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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

OMB No 1545-0047

Open to Public

	the 201	3 calendar year, or tax year beginning 08-01-2013 , 2013, and ending 07-31-	-2014				
3 Che	ck ıf applıc	C Name of organization		D Employ	er identi	fication number	
– Addı	ress chang	e CHARITIES INC		02-06	92968		
– Nan	ne change	Doing Business As					
– Initia	al return	Number and street (or P O box if mail is not delivered to street address) Room/suite	<u>;</u>	E Telenho	ne numbei	-	
– Terr	nınated	PO BOX 8007					
- Ame	ended retu			(/40)	362-747	⁷ 8	
– Appi	lication pei	DELAWARE, OH 430158007 nding		G Gross re	eceipts \$ 2,	783,870	
		F Name and address of principal officer	H(a) Is t	:his a group	return fo	 r	
		ROGER HIGHT 60 BIG RUN ROAD		ordinates?		┌ Yes 🗸 No	
		DELAWARE, OH 43015	H(b) Δ re	all subordır	nates	┌ Yes ┌ No	
				luded?	laces	1 1631 110	
Tax	-exempt s	tatus	If"	No," attach	a lıst (s	ee instructions)	
We	ebsite: ►	N/A	H(c) Gr	oup exempti	on numb	er ►	
Form	of organi	zation	L Year of	formation 200	3 M Sta	ate of legal domicile O	
		Summary	1		1		
		fly describe the organization's mission or most significant activities					
		SUPPORT THE CHARITABLE PROGRAMS OF THE AMERICAN LEGION, DE	EPARTME	NT OF OHI	0		
<u> </u>							
	2 Che	ck this box দ if the organization discontinued its operations or disposed of	more than	25% of its	net asse	ts	
		nber of voting members of the governing body (Part VI, line 1a)			3	39	
		nber of independent voting members of the governing body (Part VI, line 1b)			4	3'	
;		al number of individuals employed in calendar year 2013 (Part V, line 2a) .			5	-	
:		al number of volunteers (estimate if necessary)			6	39	
		al unrelated business revenue from Part VIII, column (C), line 12 unrelated business taxable income from Form 990-T, line 34			7a	(
\dashv	риес	unierated business taxable income nom Form 990-1, line 34	1	ior Year	7b 	Current Year	
	8 C	ontributions and grants (Part VIII, line 1h)	P1	2,524,5	85	2,540,233	
9 │		rogram service revenue (Part VIII, line 2g)		2,324,3	0	2,5+0,255	
Havenue		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)			0		
운		ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		125,7	37	103,572	
		otal revenue—add lines 8 through 11 (must equal Part VIII, column (A), line					
		2)		2,650,3	_	2,643,805	
- 1		rants and similar amounts paid (Part IX, column (A), lines 1-3)		2,455,3		2,438,427	
		enefits paid to or for members (Part IX, column (A), line 4)			0	С	
8		alaries, other compensation, employee benefits (Part IX, column (A), lines – 10)			0	C	
보) enses	16a P	rofessional fundraising fees (Part IX, column (A), line 11e)			0	C	
훉ㅣ	b To	otal fundraising expenses (Part IX, column (D), line 25) 🛌					
_	17 0	ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		70,405 29,37			
	18 T	otal expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		2,525,789 2,467,80			
$\overline{}$	19 R	evenue less expenses Subtract line 18 from line 12		124,5	33	176,005	
5 0 0			Beginni	ng of Currer	nt	End of Year	
2 gg	20 T	otal assets (Part V. June 16)		Year 201,8	43	373,847	
(ĕ		otal assets (Part X, line 16)		19,5		15,501	
این		et assets or fund balances Subtract line 21 from line 20		182,3		358,346	
(E)		Signature Block		102,0		200,510	
						and to the hest of	
Par nder ny kn	t III s penaltie owledge	es of perjury, I declare that I have examined this return, including accompanying and belief, it is true, correct, and complete Declaration of preparer (other that ny knowledge					
Par nder ny kn	t III s penaltie owledge	es of perjury, I declare that I have examined this return, including accompany and belief, it is true, correct, and complete Declaration of preparer (other than y knowledge ******	n officer) i	s based on a			
Par nder ny kn repai	penaltie owledge rer has a	es of perjury, I declare that I have examined this return, including accompany and belief, it is true, correct, and complete Declaration of preparer (other tha ny knowledge	n officer) i	s based on a			
Par nder ny kn repai	penaltie owledge rer has a	es of perjury, I declare that I have examined this return, including accompanying and belief, it is true, correct, and complete Declaration of preparer (other that ny knowledge ****** Signature of officer ROGER HIGHT ADJUTANT	n officer) i	s based on a			
Par nder ny kn repai	penaltie owledge rer has a	****** Signature of officer ROGER HIGHT ADJUTANT Type or print name and title	n officer) i	s based on a	all inform		
Par Inder	penaltie owledge rer has a	****** Signature of officer ROGER HIGHT ADJUTANT Type or print name and title Print/Type preparer's name Preparer's signature Preparer's signature Preparer's signature Preparer's signature Dat	n officer) i	s based on a		ation of which	

Use Only

Firm's address ▶ 941 STEUBENVILLE AVE PO BOX 820

May the IRS discuss this return with the preparer shown above? (see instructions)

CAMBRIDGE, OH 437250820

Phone no (740) 432-5658

✓ Yes 厂No

4e Total program service expenses F 2,430,427

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 📆	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		N o
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		No
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	Yes	
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			1
_		28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	Yes	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

GI I	Check if Schedule O contains a response or note to any line in this Part V			
	Check if Schedule O contains a response of note to any line in this rait v	•	Yes	No
3	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 9			
)	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
	gaming (gambling) winnings to prize winners?	1c	Yes	
1	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered			
	by this return	4		
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		N
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
ı	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		N
	If "Yes," enter the name of the foreign country ▶	-		
	bee instructions for ining requirements for Form FB F 50 EE 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	1	N
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	1	N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	100		+
	II 163, to line 3a of 3b, the the organization life Form 6000-17	5с		
ı	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		N
	organization solicit any contributions that were not tax deductible as charitable contributions?			\bot
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6b		
	were not tax deductible?	OD		+
	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		N
	services provided to the payor?	76	+	+
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		+
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		l N
	If "Yes," indicate the number of Forms 8282 filed during the year			
	, , , , , , , , , , , , , , , , , , , ,	1		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			١,
	contract?	7e	+	N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
	Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
		8	+	+
	Sponsoring organizations maintaining donor advised funds.	_		
	Did the organization make any taxable distributions under section 4966?	9a	+	+
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	1	+
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a	4		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
		1		
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year	1		
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
)	Enter the amount of reserves the organization is required to maintain by the states		1	1
	in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	Ţ	ļ	
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N
	If "Yes " has it filed a Form 720 to report these payments? <i>If "No" provide an explanation in Schedule</i> 0	14h		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ection A. Governing Body and Management			
			Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		Νo
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νo
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	avanı	ie Cod	<u> </u>
50	section by Toncies (This section b requests information about policies not required by the Internal K	CVCIII	7C COU	c.,
30	Tellon B. Folicies (This Section B requests information about policies not required by the Therman K	event	Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		•
10a				No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b		No No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		No No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b		No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a		No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b		No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10a 10b 11a 12a 12b		No No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13		No No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13		No No No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14		No No No No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14		No No No No No No No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14		No No No No No No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14		No No No No No No No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14 15a 15b		No No No No No No No No

- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 - ☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►ROGER HIGHT 60 BIG RUN ROAD DELAWARE, OH 43015 (740) 362-7478

Form 990	(2013)	
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г	а	ч	_	•

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year

List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter - 0 - in columns (D), (E), and (F) if no compensation was paid

◆ List all of the organization's current key employees, if any See instructions for definition of "key employee"

List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more t	han o	one l both	box, an d r/tru	heck sofficer (stee) Highest compensated	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	A verage hours per week (list any hours and director/trustee) A verage hours per word than one box, unless compensation week (list any hours and director/trustee) A verage hours position (do not check compensation compensation from the organization (W-organizations (W-organizations (W-organizations (W-organizations))								. .	(F) Estimated amount of other compensation from the organization and			
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-	-MISC)	2/1099-MISC)		rganizati relate organiza	ed
	ub-Total			•				F				_		
	otal from continuation sheet otal (add lines 1b and 1c) .	s to Part VII, S	ection A	`	٠.	٠.	•	►		0	100,34	2		30,119
2 To	otal number of individuals (in						d abov	e) w	ho receive	d more th	an			
\$]	L00,000 of reportable compe	ensation from th	e organ	ızatıd	on ⊩ ()								
3 Dı	d the organization list any fc	armor officer du	actor o	r truc	+00	kov	ample		or highost	compon	cated ampleyee		Yes	No
	i line 1a? <i>If "Yes," complete S</i>	•					• •	• •	, or mignesi	• •	sated employee	3		No
	r any individual listed on line ganization and related organ													
	dıvıdual .		• •		•	•		•				4		No
	d any person listed on line 1 ervices rendered to the organ								_	anızatıon • • •	or individual for	5		No
Sect	ion B. Independent Co	ntractors												
1 C	omplete this table for your fiven meaning the second secon	/e highest comp											tay yoar	
		(A) lame and business		ation	101	tile c	arenu	ат уе	ar ending v		(B) cription of services		(C Comper)
	IV	a.me and business								Des	onpulon of scryices	#	Сотпрет	
												\downarrow		
	al number of independent co 00,000 of compensation fron			not	lımıt	ed to	thos	e list	ted above)	who rece	ived more than			

Form 99		-				Page S
Part V	7 🕶	Statement of Revenue Check if Schedule O contains a response or note to an	u line in this Dort VIII			_
		Check it Schedule of Contains a response of note to an	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
တည	1a	Federated campaigns 1a	_			
ant	ь	Membership dues 1b				
Contributions, Gifts, Grants and Other Similar Amounts	c	Fundraising events 1c				
ff. FA	d	Related organizations 1d	_			
tributions, Giffe Other Similar	e	Government grants (contributions)	_			
ms, Sin						
utio er	f	All other contributions, gifts, grants, and similar amounts not included above 2,540,2	33			
들 돌	g	Noncash contributions included in lines 1a-1f \$	j			
Cont and	h	Total. Add lines 1a-1f				
<u>ة ت</u>	<u>"</u>		P			
e E		Business Cod	<u>e</u>			
Program Serwoe Revenue	2a					
2 <u>44</u>	b	- <u></u> -				
နှိ နှ	C					
Ř	d					
Ē	e f	All other program service revenue				
D Q	'	All other program service revenue				
<u> </u>	g	Total. Add lines 2a−2f				
	3	Investment income (including dividends, interest, and other similar amounts)				
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties				
		(ı) Real (ıı) Personal				
	6a	Gross rents				
	b	Less rental expenses				
	С	Rental income or (loss)				
	d	Net rental income or (loss)				
		(ı) Securities (ıı) Other				
	7a	Gross amount from sales of				
		assets other than inventory				
	ь	Less cost or				
		other basis and sales expenses				
	С	Gain or (loss)	_			
	d	Net gain or (loss)				
une	8a	Gross income from fundraising events (not including \$				
Other Revenue		of contributions reported on line 1c) See Part IV, line 18				
<u>ā</u>		a h	_			
돛	b c	Less direct expenses b Net income or (loss) from fundraising events b	_			
-	9a					
		See Part IV, line 19				
		a 243,6	537			
	b	Less direct expenses b 140,0				402.573
		` ,	103,572			103,572
	10a	Gross sales of inventory, less returns and allowances .	_			
	ь	Less cost of goods sold b	_			
	1	Net income or (loss) from sales of inventory				
	٣	Miscellaneous Revenue Business Cod				
	11a		┥			
	ь					
	c					
	d	All other revenue				
	_ e		-			
	12	Total revenue. See Instructions				
	<u> </u>		2,643,805	0	0	103,572

	IX Statement of Functional Expenses				
Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns All				
	Check if Schedule O contains a response or note to any line in this	Part IX I	(B)		
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	2,438,427	2,438,427		
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal				
c	Accounting	18,500		18,500	
d	Lobbying	2,000		2,000	
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				
13	Office expenses	5,692		5,692	
14	Information technology	,		,	
15	Royalties				
16	Occupancy				
17	Travel	1,450		1,450	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	2,122		2,121	
19	Conferences, conventions, and meetings	756		756	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	DEPARTMENT SERVICES	875		875	
b					
c	_				
d					_
e	All other expenses	100		100	
25	Total functional expenses. Add lines 1 through 24e	2,467,800	2,438,427	29,373	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)		. , .		

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X	(A)		(B)
	Π.		Beginning of year		End of year
	1	Cash-non-interest-bearing	200,843	1	372,643
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	1,000	4	1,204
Assets	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	,	Notes and lang reservable not		7	
	7	Notes and loans receivable, net			
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a			
	ь	Less accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities		11	
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	201,843	16	373,847
	17	Accounts payable and accrued expenses	19,502	17	15,501
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
lities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
Liabilit		persons Complete Part II of Schedule L		22	
ï	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule			
		D	10 800	25	
	26	Total liabilities. Add lines 17 through 25	19,502	26	15,501
ري دان		Organizations that follow SFAS 117 (ASC 958), check here ► and complete			
Fund Balance		lines 27 through 29, and lines 33 and 34.		2.7	
<u>ස</u>	27	Unrestricted net assets		27	
ŭ	28	Temporarily restricted net assets		28	
Ξ	29	Permanently restricted net assets		29	
o F		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ▽ and complete lines 30 through 34.			
ž	30	Capital stock or trust principal, or current funds	0	30	0
Assets	31	Paid-in or capital surplus, or land, building or equipment fund	0	31	0
	32	Retained earnings, endowment, accumulated income, or other funds	182,341	32	358,346
₹	33	Total net assets or fund balances	182,341	33	358,346
2	34	Total liabilities and net assets/fund balances	201.843	34	373.847

				'	age ==
Par	Reconcilliation of Net Assets Check If Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2.6	343,805
2	Total expenses (must equal Part IX, column (A), line 25)				
	-	2		2,4	67,800
3	Revenue less expenses Subtract line 2 from line 1	3		1	.76,005
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))				
_	<u> </u>	4	 	1	.82,341
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities				
_	<u> </u>	6			
7	Investment expenses	7			
8	Prior period adjustments	_			
•	Other share we will be a sea to suffer a halomate (sombon on Cahadula O)	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		3	358,346
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. 区
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed or	n		
	▼ Separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of th	ne 2с	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	1			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Software ID: **Software Version:**

EIN: 02-0692968

Name: THE AMERICAN LEGION DEPARTMENT OF OHIO CHARITIES INC

(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more th perso and a	ion (d nan o n is b	ne booth a	ox, u an of trus	nless ficer tee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			related organizations
JEFF KAUFFMAN	1 00	х		Х				0	0	0
DEPARTMENT COMMANDER DAVID HILLIARD	1 00							_		
FIRST VICE COMMANDER		Х		Х				0	0	0
JIM CAMPBELL SECOND VICE COMMANDER	1 00	х		х				0	0	o
DAVE JACKSON	1 00	X		Х				0	0	0
DEPARTMENT TREASURER CHARLES SOLLBERGER	1 00									
DEPARTMENT CHAPLAIN	1 00	х		Х				0	0	0
STEVE MASOWICK	1 00	х		х				0	13,014	0
PAST DEPARTMENT COMMANDER BILL BALSER	1 00									
NATIONAL EXEC COMMITTEEMAN BOB KIMBALL	1 00	X		X				0	0	0
ALTERNATE NECMAN RICK WALTER	1 00									
FIRST DISTRICT	100	х						0	0	0
CHET NOWAK	1 00	х						0	0	0
JOHN WAGNER SECOND DISTRICT	1 00	х						0	0	0
DAVID MYERS SECOND DISTRICT	1 00	х						0	0	0
LUIS LERMA THIRD DISTRICT	1 00	х						0	0	0
ARNOLD WHATLEY	1 00	х						0	0	0
THIRD DISTRICT GARY TARVIN	1 00	х						0	0	0
FOURTH DISTRICT ALLAN WALSH	1 00	×						0	0	0
FOURTH DISTRICT DORIAN TAYLOR	1 00	^								
FIFTH DISTRICT	100	х						0	0	0
JIM LUDBAN	1 00	х						0	0	0
FIFTH DISTRICT ROGER FRIEND	1 00	Х						0	0	0
SIXTH DISTRICT VINCE BECKER	1 00	X						0	0	0
SIXTH DISTRICT KENNETH COTTRILL	1 00									
SEVENTH DISTRICT		Х						0	0	0
TROY BRUNGS SEVENTH DISTRICT	1 00	x						0	0	0
MARY AUSTIN	1 00	Х						0	0	0
EIGHTH DISTRICT MARV SHAMHART	1 00	х						0	0	0
EIGHTH DISTRICT ROBERT MASTRONICOLA	1 00						\vdash			
NINTH DISTRICT		Х						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and Inde	pendent Cor	itracto	rs			, -	,			
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more th perso and a	ion (nan o n is b	ne b oth ctor/	ox, u an of trus	inless fficer tee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Office	Key employee	Highest compensated employee	Former	2/1099-14130/	2/1099-1413C)	related organizations
ED DOHERTY	1 00	X						0	0	0
NINTH DISTRICT										
ORVAL BAKER TENTH DISTRICT	1 00	x						0	0	0
GENE NOLING	1 00	,,								
TENTH DISTRICT		X						0	0	0
STEPHEN ISHMAEL	1 00	х						0	0	0
ELEVENTH DISTRICT FLOYD BURK	1 00									
	1 00	х						0	0	0
GARY FAST	1 00	x						0	0	0
TWELFTH DISTRICT								Ů		
VERNON HALL TWELFTH DISTRICT	1 00	x						0	0	О
STANLEY POPEK	1 00		1							
THIRTEENTH DISTRICT		Х						0	0	0
TIMOTHY LEAHY	1 00	х						0	0	0
THIRTEENTH DISTRICT DALE LUZADER	1.00		-							
FOURTEENTH DISTRICT	1 00	x						0	0	o
CHRISTOPHER VINCE	1 00	х						0	0	0
FOURTEENTH DISTRICT GLENN HICKMAN	1.00		-							
TRUSTEE	1 00	x						0	0	0
ART LUSTIG	1 00	х						0	0	0
TRUSTEE										
JIM MORRIS	1 00	X						0	0	0
TRUSTEE ROGER HIGHT	1.00	-				-				
	1 00			х				0	87,328	30,119
DEPARTMENT ADJUTANT	J									

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493027007765

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

h

Name of the organization

THE AMERICAN LEGION DEPARTMENT OF OHIO

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2013

Open to Public Inspection

HAR	TIES IN	02-0692968
Pa	rt I	Reason for Public Charity Status (All organizations must complete this part.) See instructions.
he	organı	zation is not a private foundation because it is (For lines 1 through 11, check only one box)
1	Γ	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2	Γ	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)
3	Γ	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4	Γ	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state
5	Γ	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in
		section 170(b)(1)(A)(iv). (Complete Part II)
6	Γ	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7	Γ	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)
8	\sqcap	A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)
9	<u>~</u>	An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of
		its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses
		acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)
10	Γ	An organization organized and operated exclusively to test for public safety See section 509(a)(4).
11	Γ	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box

Since August 17, 2006, has the organization accepted any gift or contribution from any of the

Type I b Type II c Type III - Functionally integrated d Type III - Non-functionally integrated

following persons?

the box that describes the type of supporting organization and complete lines 11e through 11h

(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

(ii) A family member of a person described in (i) above?

(iii) A 35% controlled entity of a person described in (i) or (ii) above?

Provide the following information about the supported organization(s)

Yes No
11g(i)
11g(ii)
11g(iii)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you the organiz in col (i) o suppor	zation fyour	(vi) Is the organization in col (i) organized in the US?		(vii) A mount of monetary support
	instructions))		Yes	No	Yes	No	Yes	No	
Total									

Sch	edule A (Form 990 or 990-EZ) 2013						Page 2
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation failed	to qualify under
_	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	low, please con	iplete Part .	.111.)
	endar year (or fiscal year beginning	(-) 2000	(1-) 2010	(-) 2011	(4) 2012	(-) 201	(5) T. I.
	in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 201:	3 (f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
3	behalf The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	Public support. Subtract line 5 from line 4						
S	ection B. Total Support	I	<u> </u>		I		I
	endar year (or fiscal year beginning	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(6) 2010	(6) 2011	(u) 2012	(e) 2013	(I) I otal
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
	business activities, whether or not the business is regularly carried						
	on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support (Add lines 7 through 10)						
12	Gross receipts from related activities	es, etc (see inst	ructions)	•		12	1
13	First five years. If the Form 990 is t	for the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	501(c)(3) o	rganızatıon, check
	this box and stop here				<u> </u>	<u> </u>	<u></u>
	ection C. Computation of Pub			4.4 1 (5)			
14	Public support percentage for 2013			11, column (f))		14	
15	Public support percentage for 2012	· ·	•			15	_
16a	33 1/3% support test—2013. If the condition have				line 14 is 33 1/3%	or more, che	ck this box
b	and stop here. The organization qua 33 1/3% support test—2012. If the				and line 15 is 33	8 1/3% or more	
	box and stop here. The organization				, 10 00	. 40.001111011	► F
17a	10%-facts-and-circumstances test-	-2013. If the org	anızatıon dıd not	check a box on lı			
	is 10% or more, and if the organizat						
	in Part IV how the organization mee	ts the "facts-and	d-circumstances'	test The organ	ızatıon qualıfıes a	s a publicly s	
Ь	organization 10%-facts-and-circumstances test-	-2012 . If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and L	▶ 厂
	15 is 10% or more, and if the organ						
	Explain in Part IV how the organizat						ublicly
	supported organization				4-71		▶ □
18	Private foundation. If the organizat instructions	ion aid not check	k a box on line 13	, 16a, 16b, 1/a,	or 1/p, check thi	s pox and se	e ▶□
							г,

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	3	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	3,187,765	2,885,247	2,898,477	2,524,585	2,500	5,813	14,002,887
2	Gross receipts from admissions,							
	merchandise sold or services performed, or facilities furnished in							
	any activity that is related to the							
	organization's tax-exempt purpose							
3	Gross receipts from activities that	00.040	150 255	150,262	104.766	27-	7.057	052.201
	are not an unrelated trade or business under section 513	80,940	159,355	150,263	184,766	27.	7,057	852,381
4	Tax revenues levied for the							
	organization's benefit and either paid to or expended on its							
	behalf							
5	The value of services or facilities furnished by a governmental unit							
	to the organization without							
_	charge	2 260 705	2.044.602	2.040.740	2 700 251	2.70	2.070	14.055.260
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2,	3,268,705	3,044,602	3,048,740	2,709,351	2,783	5,870	14,855,268
, u	and 3 received from disqualified persons							0
b	Amounts included on lines 2 and 3							
	received from other than disqualified persons that exceed							0
	the greater of \$5,000 or 1% of the							0
	amount on line 13 for the year							0
с 8	Add lines 7a and 7b Public support (Subtract line 7c							
	from line 6)							14,855,268
	ction B. Total Support							
Cale	in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013		(f) Total
9	A mounts from line 6	3,268,705	3,044,602	3,048,740	2,709,351	2,783	3,870	14,855,268
L0a	Gross income from interest, dividends, payments received on							
	securities loans, rents, royalties							
	and income from similar sources							
b	Unrelated business taxable							
	income (less section 511 taxes) from businesses acquired after							
	June 30, 1975							
C	Add lines 10a and 10b							
11	Net income from unrelated business activities not included							
	in line 10b, whether or not the							
12	business is regularly carried on Other income. Do not include							
	gaın or loss from the sale of							
	capital assets (Explain in Part IV)							
13	Total support. (Add lines 9, 10c,	3,268,705	3,044,602	3,048,740	2,709,351	2,783	3.870	14,855,268
14	11, and 12) First five years. If the Form 990 is f	' '	, ,	• •		<u> </u>		
14	check this box and stop here	or the organization	on s mst, second	, cilita, loutell, of t	iitii tax year as a	501(0)(3)	organi.	Zation, ►
	ction C. Computation of Publ					, ,		
15	Public support percentage for 2013			13, column (f))		15		100 000 %
16	Public support percentage from 201		<u>-</u>			16		100 000 %
<u>Se</u> 17	ction D. Computation of Inve Investment income percentage for 2				n (f))	1.7		
1 <i>7</i> 18	Investment income percentage for 2	-		·	II (1 <i>))</i>	17		0 %
	33 1/3% support tests—2013. If the				line 15 is more th	18 nan 33 1/3%	and I	ine 17 is not
a	more than 33 1/3%, check this box a						, and I	

33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supplemental Information. Provide the explanations required by Part II, line 10; Part I 17b; and Part III, line 12. Also complete this part for any additional information. (See institutional information).							
Facts And Circumstances Test							
Retu	ırn Reference	Explanation					
		Schodulo A / Form 0	000 er 000 E7) 201				

Schedule A (Form 990 or 990-EZ) 2013

DLN: 93493027007765

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

► See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations Complete Part I-A only

If the organization answered "Yes" to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

•	Section 501(c)(3) organizations the	hat have filed Form 5768 (election unden hat have NOT filed Form 5768 (election s'' to Form 990, Part IV, Line 5 (Pro	under section 50	01(h)) Complete Part II-B Do	o not complete Part II-A
	Section 501(c)(4), (5), or (6) orga	•	Ay 18A) 01 10111	1 990-LZ, Fait V, IIIIe 55C	(FIOXy Tax), tileli
Na	me of the organization	·		Employer iden	tification number
	E AMERICAN LEGION DEPARTMENT OF C ARITIES INC	DHIO		02-0692968	
Par	t I-A Complete if the or	ganization is exempt under s	section 501(organization.
1	Provide a description of the org	ganızatıon's dırect and ındırect politic	al campaign act	ıvıtıes ın Part IV	
2	Political expenditures		. 5	▶	\$
3	Volunteer hours				
_				. (2)	
	<u> </u>	ganization is exempt under s			
1	•	e tax incurred by the organization und			\$
2	·	e tax incurred by organization manage		n 4955 ►	\$
3		section 4955 tax, did it file Form 472	O for this year?		☐ Yes ☐ No
4a	Was a correction made?				☐ Yes ☐ No
b	If "Yes," describe in Part IV				
Par	•	ganization is exempt under s	-	•	1(c)(3).
1	Enter the amount directly expe	ended by the filing organization for sec	ction 527 exemp	ot function activities 🕨	\$
2	Enter the amount of the filing o exempt function activities	\$			
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here a	ınd on Form 112	0-POL, line 17b	\$
4	Did the filing organization file F	Form 1120-POL for this year?			
5	organization made payments f amount of political contribution	nd employer identification number (EI For each organization listed, enter the ns received that were promptly and di political action committee (PAC) If a	e amount paid fro rectly delivered	m the filing organization's t to a separate political orga	funds Also enter the Inization, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Sch	hedule C (Form 990 or 990-EZ) 2013					Page 2
P	art II-A Complete if the organization	is exempt under	section 501(c)(3) and file	ed Form 5768	
_	under section 501(h)).		Link in Donk IV an			a adduses FIN
٠.	Check ► If the filing organization belongs to a expenses, and share of excess lobb		list in Part IV ea	ch amiliated gro	up members nam	e, address, EIN,
3	Check ► ☐ If the filing organization checked bo		ol" provisions app	ly		
	Limits on Lobbying E (The term "expenditures" means ar		l.)		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisl	ative body (direct lobb	yıng)			
c	Total lobbying expenditures (add lines 1a and 1	b)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount to	from the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	00		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,0	000		
	Over \$17,000,000	\$1,000,000				
		1.6				
_	Grassroots nontaxable amount (enter 25% of lir	•				
	Subtract line 1g from line 1a If zero or less, ent			_		1
	Subtract line 1f from line 1c If zero or less, ente			L		1
j	If there is an amount other than zero on either lii section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file	Form 4720 repo	orting	┌ Yes ┌ No
	(Some organizations that made a columns below. See t	he instructions fo	ection do not r lines 2a thre	have to con ough 2f on p		ne five
	Lobbying Exp	enditures During	4-Year Avera	ging Period	1	1
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					

e Grassroots ceiling amount (150% of line 2d, column (e))

Grassroots lobbying expenditures

Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has N filed Form 5768 (election under section 501(h)).	IOT			r age s
Eor e	ach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(6	a)	(b))
activ		Yes	No	Amo	unt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
a	Volunteers?		No		
Ь	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No		
ر C	Media advertisements?		No No		
d e	Mailings to members, legislators, or the public? Publications, or published or broadcast statements?		No		
f	Grants to other organizations for lobbying purposes?		No		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes	110		2,000
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	103	No		2,000
ï	Other activities?		No		
i	Total Add lines 1c through 1i		110		2,000
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		l No		2,000
ъ	If "Yes," enter the amount of any tax incurred under section 4912		-110		
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6).	01(c)(5), o	r secti	on
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3	
Pai	t III-B Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."				
1	Dues, assessments and similar amounts from members	1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				
а	Current year	2a			
b	Carryover from last year	2b			
С	Total	2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	5			
P	art IV Supplemental Information				
Pro	ovide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grount III-B, line 1, Part II-B, l	p lıst),	Part II	-A, line 2	and?, and
	Return Reference Explanation				

201124416 3 (1 31111 333 31 333 12) 2313		i age i				
Part IV Supplemental Information	on <i>(continued)</i>					
Return Reference	Explanation					
l						

Schedule D (Form 990) 2013

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DLN: 93493027007765

Employer identification number

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

Fundraising or Gaming Activities Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the

Supplemental Information Regarding

organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ. See separate instructions.

► Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply a Mail solicitations Internet and email solicitations Phone solicitations The person solicitation of non-government grants The solicitation of government gran	
Mail solicitations	line 17.
Internet and email solicitations Phone solicitations In-person solicitations I	
Phone solicitations In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the function be compensated at least \$5,000 by the organization (i) Name and address of individual or entity (fundraiser) (iii) Activity (iii) Did fundraiser have custody or control of contributions? Yes No Yes No Output Professional fundraising events (v) Amount paid to (or retained by) fundraiser listed in col (i) 2 Yes No Output Professional fundraising events (v) Amount paid to (or retained by) fundraiser listed in col (i) Output Professional fundraising events (v) Amount paid to (or retained by) fundraiser listed in col (i) Output Professional fundraising events (v) Amount paid to (or retained by) fundraiser listed in col (ii)	
Phone solicitations In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the funt to be compensated at least \$5,000 by the organization (i) Name and address of individual or entity (fundraiser) (iii) Activity (iii) Did fundraiser have custody or control of contributions? Yes No Yes No (iv) Gross receipts from activity (v) Amount paid to (or retained by) fundraiser listed in col (i) Yes No	
In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fund to be compensated at least \$5,000 by the organization (i) Name and address of individual or entity (fundraiser have custody or control of contributions? Yes No Yes No (ii) Activity (iii) Did (iv) Gross receipts from activity fundraiser listed in col (i) activity fundraiser listed in col (i) activity fundraiser listed in col (i) activity fundraiser listed in col (ii) activity fundraiser listed in col (iii) activity fundraiser listed in col (iiii) activity fundraiser listed in col (iii) a	
or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the function be compensated at least \$5,000 by the organization (i) Name and address of individual or entity (fundraiser) (ii) Activity (iii) Did fundraiser have custody or control of contributions? Yes No 1 3 4 5 6 7 7 8 8 8 9 9 9 9 9 9 9 9 9 9	
to be compensated at least \$5,000 by the organization (i) Name and address of individual or entity (fundraiser) (ii) Activity (fundraiser) (iii) Activity (fundraiser) (iii) Activity (fundraiser) (iv) Amount paid to (or retained by) fundraiser listed in coll (i) (v) Amount paid to (or retained by) fundraiser listed in coll (i) (v) Amount paid to (or retained by) fundraiser listed in coll (i) (v) Amount paid to (or retained by) fundraiser listed in coll (i) (v) Amount paid to (or retained by) fundraiser listed in coll (i)	Г _{Yes} Г
Individual or entity (fundraiser) Individual or en	draiser is
Yes No 2 3 4 5 6 7 8 9	(vi) A mount paid to (or retained by) organization
33	
, , , , , , , , , , , , , , , , , , , ,	
al	
List all states in which the organization is registered or licensed to solicit contributions or has been notified it is e registration or licensing	exempt from

Pa	rt II	Fundraising Events. Commore than \$15,000 of fundraevents with gross receipts g	aising event contribu							
		Grente mar grees receipts g	(a) Event #1	(b) Event #2	(c) O ther events	(d) Total events (add col (a) through col (c))				
			(event type)	(event type)	(total number)	, , ,				
Revenue	1	Gross receipts								
eve	2	Less Contributions								
	3	Gross income (line 1 minus line 2)								
	4	Cash prizes								
S	5	Noncash prizes								
Expenses	6	Rent/facility costs								
ă	7	Food and beverages .								
Direct	8	Entertainment								
à	9	Other direct expenses .								
	10	Direct expense summary Add lin	es 4 through 9 in colum	nn (d)		()				
	11	Net income summary Subtract III	ne 10 from line 3, colum	nn (d)	🛌					
Par	t II			l "Yes" to Form 990, Pa	rt IV, line 19, or repo	rted more than				
ф		\$15,000 on Form 990-EZ, lii	(a) Bingo	(b) Pull tabs/Instant	(c) Other gaming	(d) Total gaming (add				
Revenue			(4, 5go	bingo/progressive bingo		col (a) through col				
~	1	Gross revenue			243,637	243,637				
Expenses	2	Cash prizes			31,250	31,250				
X De	3	Non-cash prizes								
Direct E	4	Rent/facility costs								
<u>ā</u>	5	Other direct expenses			108,815	108,815				
	6	Volunteer labor	✓ Yes	Г Yes% Г Nо	✓ Yes100 000 % No					
	7	Direct expense summary Add line	s 2 through 5 in column	(d)	🛌	140,065				
	8	Net gaming income summary Subt	ract line 7 from line 1, c	column (d)		103,572				
_										
9 a		ter the state(s) in which the organiza	• •			. V Yes No				
b										
10a b		re any of the organization's gaming 'Yes," explain								

Does	Does the organization operate gaming activities with nonmem	bers?
12		
	formed to administer charitable gaming?	
13		
а	a The organization's facility	
b	b An outside facility	
14	Enter the name and address of the person who prepares	the organization's gaming/special events books and records
	Name ► ROGER HIGHT	
	Address 60 BIG RUN ROAD DELAWARE, OH 43015	
15a	15a Does the organization have a contract with a third party	
L		
D	b If "Yes," enter the amount of gaming revenue received	· · · · · · · · · · · · · · · · · · ·
	amount of gaming revenue retained by the third party $lacktriangle$	\$
С	C If "Yes," enter name and address of the third party	
	Name ► JH MARKETING SERVICES	
	Address ► PO BOX 1200 HOLLIS,NH 03049	
16		
	Name 🟲	
	Gaming manager compensation ► \$	
	Description of services provided	
	☐ Director/officer ☐ Employee	Independent contractor
17	17 Mandatory distributions	
а	a Is the organization required under state law to make ch	arıtable dıstrıbutıons from the gamıng proceeds to
	retain the state gaming license?	
b	b Enter the amount of distributions required under state la	aw distributed to other exempt organizations or spent
	ın the organization's own exempt activities during the ta	<u> </u>
Pa		explanations required by Part I, line 2b, columns (III) and (v), and 17b, as applicable. Also complete this part to provide any
	Return Reference	Explanation
	L	

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DLN: 93493027007765

OMB No 1545-0047

(Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.

Department of the Treasury nternal Revenue Service	► Information		► Attach to Form 990 rm 990) and its instructi	ions is at <u>www.irs.gov/</u>	<u>form990</u> .		Inspection
lame of the organization THE AMERICAN LEGION DEPARTME	ENT OF OHIO					Employer identificat	ion number
CHARITIES INC	ENTOPOHIO					02-0692968	
Part I General Information	n on Grants and	Assistance					
 Does the organization maintain in the selection criteria used to aw Describe in Part IV the organiza 	ard the grants or ass	ıstance [?]					Г Yes
Part II Grants and Other As Form 990, Part IV, line							Yes" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra e or assistance
See Addıtıonal Data Table							
2 Enter total number of section 50		-	ed in the line 1 table .			<u> </u>	7
5		lance of the late.					4 2 2

1111	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990,	Part IV, line 22.
	Part III can be duplicated if additional space is needed.	

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Part IV Supplemental Infor	mation. Provide the inf	ormation required in Pa	art I, line 2, Part III, co	lumn (b), and any other a	dditional information.
	Jamatian	<u> </u>	· · · · · · · · · · · · · · · · · · ·		

2010 IV Supplemental II	normation. Frovide the information required in Fart 1, line 2, Fart 111, column (b), and any other additional information.
Return Reference	Explanation
,	THE ORGANIZATION MONITORS THE USE OF GRANT FUNDS BY MAKING CONTRIBUTIONS TO 501(C)(3) ORGANIZATIONS FOR USE IN FUNDING THEIR EXEMPT PURPOSE THE ORGANIZATION ALSO MAKES CONTRIBUTIONS TO THE AMERICAN LEGION POSTS IN THE STATE OF OHIO THE ORGANIZATION MONITORS THE USE OF THESE FUNDS BY REQUIRING THE POSTS TO MAINTAIN SEPARATE BANK ACCOUNTS FOR THESE CONTRIBUTIONS AND TO THEN CONTRIBUTE THESE MONIES TO LOCAL 501(C)(3) AND OTHER EXEMPT ORGANIZATIONS

Additional Data

Software ID:

Software Version:

EIN: 02-0692968

Name: THE AMERICAN LEGION DEPARTMENT OF OHIO

CHARITIES INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN LEGION CHILD WELFARE FOUNDATION INC PO BOX 1055 INDIANAPOLIS,IN 46206	35-7041737	501(C)(3)	20,000				GENERAL SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
THE AMERICAN LEGION DEPARTMENT OF OHIO INC 60 BIG RUN ROAD DELAWARE,OH 43015	31-4115640	501(C)(19)	50,000				GENERAL SUPPORT			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION SCHOLARSHIP 5475 LEE RD INDIANAPOLIS,IN 46206	42-1553035	501(C)(3)	15,000				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION NATIONAL EMERGENCY FUND PO BOX 1954 INDIANAPOLIS,IN 46206	35-0144250	501(C)(3)	50,000				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
THE HOME HISTORY FUND 1209 WESTWOOD AVE COLUMBUS,OH 43212	45-4599453	501(C)(3)	10,000				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CHALMERS P WYLIE AMBULATORY CARE UNIT 420 N JAMES RD COLUMBUS,OH 43219			10,000				GENERAL SUPPORT		

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	1	(f) Method of valuation (book, FMV, appraisal, other)		(h) Purpose of grant or assistance	
DONATE LIFE OHIO 246 N HIGH ST COLUMBUS,OH 43215			10,000				GENERAL SUPPORT	

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
FISHER HOUSE 111 ROCKVILLE PIKE STE 420 ROCKVILLE,MD 20850	11-3158401	501(C)(3)	30,000				GENERAL SUPPORT	

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
FOLDS OF HONOR 5800 N PATRIOT DR OWASSO,OK 74055	75-3240683	501(C)(3)	5,000				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MOTTS MILITARY MUSEUM 5075 S HAMILTON RD GROVEPORT,OH 43125	31-1225950	501(C)(3)	10,000				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #3 120 W FRONT STREET FINDLAY,OH 45840	34-6570592	501(C)(19)	19,889				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #6 1913 E PLEASANT ST SPRINGFIELD,OH 45505	31-6039359	501(C)(19)	7,639				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #8 518 SOUTH MAIN ST WELLINGTON,OH 44090	34-1510371	501(C)(19)	26,751				GENERAL SUPPORT		

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #11 279 CANAL ST LANCASTER,OH 43130	31-4115650	501(C)(19)	6,520				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #12 393 OHIO ST ELYRIA,OH 44035	34-0065627	501(C)(19)	29,542				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #23 705 COURT 186 PORTSMOUTH,OH 45662	31-4115656	501(C)(19)	32,029				GENERAL SUPPORT		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #25 1240 US RT 22 NW WASHINGTON COURTHOUSE,OH 43160	31-0500979	501(C)(19)	7,070				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #29 27 S THIRD ST ZANESVILLE,OH 43701	31-6181424	501(C)(19)	27,622				GENERAL SUPPORT		

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #34 336 E SPRING ST CADIZ,OH 43907	34-0685452	501(C)(19)	6,547				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #43 622 SOUTH MARKET STREET TROY,OH 45373	31-0566270	501(C)(19)	10,237				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #49 140 E LOCUST ST WILMINGTON,OH 45177	31-0599268	501(C)(19)	14,388				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #58 107 E GAY ST SOMERSET,OH 43783	31-1260535	501(C)(19)	8,491				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #62 53 WEST MAIN STREET CHILLICOTHE,OH 45601	31-4115603	501(C)(19)	16,218				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #63 218 WEST MAIN STREET OTTAWA,OH 45875	34-4411445	501(C)(19)	10,378				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #64 WOOSTER STREET MARIETTA,OH 45750	31-4355305	501(C)(19)	41,251				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #65 652 MAIN ST COSHOCTON,OH 43812	31-6049667	501(C)(19)	18,709				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #68 1901 SYLVAN RD WOOSTER,OH 44691	34-6595723	501(C)(19)	21,655				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #70 229 WELLS AVE WELLSVILLE, OH 43968	34-0670801	501(C)(19)	11,276				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #85 85 S 6TH ST NEWARK,OH 43055	31-4368969	501(C)(19)	10,395				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #88 PO BOX 626 ASHLAND,OH 44805	34-0065640	501(C)(19)	41,400				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #91 91 AMERICAN LEGION PKWY BEREA,OH 44017	34-1130149	501(C)(19)	31,784				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #96 PO BOX 5096 LIMA,OH 45802	34-4176080	501(C)(19)	35,049				GENERAL SUPPORT		

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #103 1804 W 19TH ST ASHTABULA,OH 44004	34-0651675	501(C)(19)	22,901				GENERAL SUPPORT			

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #112 6677 MIDDLERIDGE RD MADISON,OH 44057	34-6571161	501(C)(19)	13,324				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #118 921 NORTH LAKE ST AMHERST,OH 44001	34-0663114	501(C)(19)	34,772				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #123 5129 MONTGOMERY ROAD NORWOOD,OH 45212	31-6049091	501(C)(19)	6,747				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #131 540 E MAIN ST LEETONIA,OH 44431	34-0940482	501(C)(19)	20,949				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #134 23363 US RT 23 S CIRCLEVILLE,OH 43113	31-0649193	501(C)(19)	10,354				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #138 427 S 3RD ST HAMILTON,OH 45011	31-0504273	501(C)(19)	14,373				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #140 325 N OHIO ST GREENVILLE,OH 45331	34-4176070	501(C)(19)	22,831				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #142 201 JAMES RD WAVERLY,OH 45690	31-4388390	501(C)(19)	6,901				GENERAL SUPPORT		

Form 990,Schedule I, Pa	form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #144 3253 S HIGH ST COLUMBUS,OH 43207	34-4312233	501(C)(19)	9,675				GENERAL SUPPORT			

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #147 8493 HACKETT RD APPLE CREEK,OH 44806	34-0607469	501(C)(19)	11,633				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #149 126 E 4TH ST FRANKLIN,OH 45005	31-0722842	501(C)(19)	8,883				GENERAL SUPPORT		

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #151 272 BROAD ST CONNEAUT,OH 44030	34-6607470	501(C)(19)	33,598				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #159 150 LEGION RD SAINT CLAIRSVILLE, OH 43950	34-1135437	501(C)(19)	16,860				GENERAL SUPPORT			

Form 990,Schedule I, Pai	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #162 531 BELLEFONTAINE AVE MARION,OH 43302	31-1138184	501(C)(19)	48,130				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #165 35 N MAIN ST MIAMISBURG,OH 45342	31-0526291	501(C)(19)	21,150				GENERAL SUPPORT		

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
AMERICAN LEGION POST #169 280 S WASHINGTON ST TIFFIN,OH 44883	34-4176086	501(C)(19)	5,203				GENERAL SUPPORT				

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #170 129 MAIN ST WADSWORTH,OH 44281	34-6557911	501(C)(19)	26,446				GENERAL SUPPORT		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #173 120 COLTON AVE BELLEFONTAINE, OH 43311	43-1190592	501(C)(19)	7,906				GENERAL SUPPORT			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #181 123 EAST RENSSELAER STREET BUCYRUS,OH 44820	34-4176045	501(C)(19)	23,022				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #184 301 W WATER ST PIQUA,OH 45356	31-0513602	501(C)(19)	27,084				GENERAL SUPPORT			

Form 990, Schedule 1, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #188 326 ELIZABETH ST NEW LEXINGTON,OH 43764	31-6049659	501(C)(19)	5,778				GENERAL SUPPORT			

Form 990,Schedule I, Pai	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #191 200 S BROADWAY SPENCERVILLE,OH 45887	34-6554865	501(C)(19)	18,720				GENERAL SUPPORT			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #200 5046 NEBRASKA AVE HUBER HEIGHTS,OH 45424	31-6050801	501(C)(19)	25,666				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #210 2510 STE RTE 703 CELINA,OH 45822	34-6607486	501(C)(19)	49,376				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #211 31972 WALKER RD AVON LAKE,OH 44012	34-6554868	501(C)(19)	32,551				GENERAL SUPPORT			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #217 1265 N 4TH AVENUE SIDNEY,OH 45365	34-4407888	501(C)(19)	34,649				GENERAL SUPPORT			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #236 2025 E RIVER ROAD NEWTON FALLS,OH 44444	34-6607493	501(C)(19)	41,050				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #243 118 MARKET ST GALION,OH 44833	34-6607497	501(C)(19)	16,971				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #250 131 S SYCAMORE AVE SYCAMORE,OH 44882	34-4418316	501(C)(19)	12,194				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #256 897 OAKLAND RD LOVELAND,OH 45140	31-6050459	501(C)(19)	13,004				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #265 1105 N SHOOP AVE WAUSEON,OH 43567	34-6554837	501(C)(19)	31,004				GENERAL SUPPORT		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #286 2251 N DAYTON- LAKEVIEW NEW CARLISLE,OH 45344	31-6067790	501(C)(19)	6,277				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #290 44403 ST RT 14 COLUMBIANA,OH 44408	34-6572971	501(C)(19)	15,075				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #292 185 N MAIN STREET NEW LONDON,OH 44851	34-6607510	501(C)(19)	14,588				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #316 505 SOUTH STEARNS AVENUE DESHLER,OH 43516	34-6597450	501(C)(19)	5,204				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #322 1477 SR 503 S WEST ALEXANDRIA,OH 45381	31-6181457	501(C)(19)	6,120				GENERAL SUPPORT			

Form 990,Schedule I, Pa	form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #325 211 PEARL ST MANCHESTER,OH 45144	31-6181458	501(C)(19)	31,720				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #326 89 EAST MAIN ST SHELBY,OH 44875	43-1490592	501(C)(19)	9,286				GENERAL SUPPORT		

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #330 1108 E BENTON ST WAPAKONETA,OH 45895	34-6554944	501(C)(19)	30,217				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #331 109 ELM ST RAVENNA,OH 44266	34-1199856	501(C)(19)	15,878				GENERAL SUPPORT		

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #336 60 CHESTER ST PAINESVILLE,OH 44077	34-1107100	501(C)(19)	23,490				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #338 209 W CROCKER ST BRADNER,OH 43406	34-6556035	501(C)(19)	5,222				GENERAL SUPPORT		

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #344 201 E FINDLAY ST CAREY,OH 43316	34-4413262	501(C)(19)	12,031				GENERAL SUPPORT		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #345 RT 19 NORTH FORT RECOVERY,OH 45846	34-4445031	501(C)(19)	6,840				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #353 118 MACKINAW ST ANSONIA,OH 45303	34-4421382	501(C)(19)	13,401				GENERAL SUPPORT		

Form 990,Schedule I, Pa	form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #366 107 HIGH ST FLUSHING,OH 43977	34-0816488	501(C)(19)	9,947				GENERAL SUPPORT			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #371 1001 SOUTH PENNSYLVANIA AVENUE WELLSTON,OH 45692	51-1504128	501(C)(19)	13,489				GENERAL SUPPORT		

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
AMERICAN LEGION POST #377 137 S MAIN ST CAMDEN,OH 45311	31-6181466	501(C)(19)	10,302				GENERAL SUPPORT				

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #397 2713 STATE RD VERMILLION,OH 44089	34-6556636	501(C)(19)	14,832				GENERAL SUPPORT		

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #401 PO BOX 415 CALEDONIA,OH 43314	31-6181470	501(C)(19)	26,037				GENERAL SUPPORT			

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #407 49 BLACK DRIVE DOYLESTOWN,OH 44230	34-6607323	501(C)(19)	16,127				GENERAL SUPPORT			

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #430 3227 E LIVINGSTON AVE COLUMBUS,OH 43227	31-6063115	501(C)(19)	8,284				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #431 1 CANAL CT NEWCOMERSTOWN, OH 43832	34-0065654	501(C)(19)	7,861				GENERAL SUPPORT			

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #442 51 W MAIN ST SALINEVILLE,OH 43945	51-0142864	501(C)(19)	12,743				GENERAL SUPPORT			

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #449 1090 KENMORE BLVD AKRON,OH 44314	34-1019238	501(C)(19)	16,414				GENERAL SUPPORT			

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #450 450 VICTOR STIER DR MILFORD,OH 45150	31-0595881	501(C)(19)	5,640				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #470 601 N 2ND ST COLDWATER,OH 45828	34-6556641	501(C)(19)	19,525				GENERAL SUPPORT		

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #479 200 S HALLETT AVE SWANTON,OH 43558	31-6181482	501(C)(19)	5,042				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #490 1117 S HAMILTON RD WHITEHALL,OH 43227	31-6043208	501(C)(19)	16,821				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #503 4-1/2 E MAIN ST SHILOH,OH 44878	31-6181484	501(C)(19)	6,522				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #521 3809 CENTRAL AVE SHADYSIDE,OH 43947	34-0784589	501(C)(19)	20,293				GENERAL SUPPORT		

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #523 120 BANK ST LODI,OH 44254	34-6607426	501(C)(19)	17,051				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #526 526 LEGION LANE FAIRBORN,OH 45324	31-6049294	501(C)(19)	7,041				GENERAL SUPPORT		

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #530 11100 WINTON ROAD GREENHILLS,OH 45218	31-6063356	501(C)(19)	13,807				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #532 1571 DEMOREST ROAD COLUMBUS,OH 43228	31-1101109	501(C)(19)	34,091				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
AMERICAN LEGION POST #539 539 AMERICAN LEGION DR NORTH BALTIMORE,OH 45872	34-6607335	501(C)(19)	21,894				GENERAL SUPPORT				

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #541 109 5TH ST CONTINENTAL,OH 45831	34-4437019	501(C)(19)	22,866				GENERAL SUPPORT			

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #551 9150 ST RT 83N HOLMESVILLE,OH 44633	34-6556473	501(C)(19)	8,838				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #557 1212 TWO RIDGE RD WINTERSVILLE,OH 43953	34-6557303	501(C)(19)	18,000				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #566 2974 CORMANY RD AKRON,OH 44319	34-0715875	501(C)(19)	12,734				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #572 6483 STATE RD PARMA,OH 44134	34-6564708	501(C)(19)	31,518				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #578 PO BOX 430 QUAKER CITY,OH 43773	31-0679675	501(C)(19)	12,263				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #584 142 OLNEY AVE MARION,OH 43302	31-6055551	501(C)(19)	29,334				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #586 377 N THIRD ST TIPP CITY,OH 45373	31-0597502	501(C)(19)	7,293				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #598 5700 KENTSHIRE DR KETTERING,OH 45429	31-6181501	501(C)(19)	7,077				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #605 367 W MAIN ST WALDO,OH 43356	31-6181504	501(C)(19)	18,659				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #610 19944 SHELDON RD BROOK PARK,OH 44142	35-0144250	501(C)(19)	19,605				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
AMERICAN LEGION POST #627 3935 E 42ND ST NEWBURGH HEIGHTS,OH 44105	34-6607437	501(C)(19)	5,400				GENERAL SUPPORT				

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #633 17825 ST RT 247 SEAMAN,OH 45679	31-6181511	501(C)(19)	6,716				GENERAL SUPPORT			

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #641 131 BROWN ST BELLE VALLEY,OH 43717	31-0643945	501(C)(19)	16,983				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #651 6353 HARRISON RD FREDERICKSBURG, OH 44627	34-1506935	501(C)(19)	19,578				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #668 742 W NATIONAL RD VANDALIA,OH 45377	31-6181517	501(C)(19)	28,800				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #675 228 OBELL CT DAYTON,OH 45409	31-6049838	501(C)(19)	8,892				GENERAL SUPPORT		

Form 990,Schedule I, Pa	orm 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #678 570 E 328TH ST WILLOWICK,OH 44095	34-6607404	501(C)(19)	6,117				GENERAL SUPPORT			

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #685 10001 HUDSON AURORA RD STREETSBORO,OH 44241	34-1572959	501(C)(19)	10,127				GENERAL SUPPORT			

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #715 PO BOX 37 FORT JENNINGS,OH 45844	34-6549820	501(C)(19)	9,680				GENERAL SUPPORT		

Form 990,Schedule I, Pa	form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #719 215 N MAPLE ST ORWELL,OH 44076	34-6607418	501(C)(19)	5,192				GENERAL SUPPORT			

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #733 3751 W ST RT 12 BETTSVILLE,OH 44815	34-0936533	501(C)(19)	7,736				GENERAL SUPPORT		

Form 990, Schedule I, Pa	orm 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #737 16465 MILTON AVE LAKE MILTON,OH 44429	34-6607357	501(C)(19)	22,562				GENERAL SUPPORT			

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #746 7015 NORTH DIXIE DRIVE DAYTON,OH 45414	31-0621358	501(C)(19)	9,121				GENERAL SUPPORT		

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #749 30 HURON ST JEROMESVILLE,OH 44840	34-6607361	501(C)(19)	6,995				GENERAL SUPPORT		

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN LEGION POST #750 226 MAIN ST LOWELL,OH 45744	31-6054931	501(C)(19)	8,245				GENERAL SUPPORT		

Form 990,Schedule I, Pa	form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #757 289 COOKS HILL RD CHILLICOTHE,OH 45601	34-6550655	501(C)(19)	23,981				GENERAL SUPPORT			

Form 990,Schedule I, Pa	form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #762 35 WEST MAIN STREET NEW LEBANON,OH 45345	31-6181531	501(C)(19)	15,467				GENERAL SUPPORT			

Form 990,Schedule I, Pai	orm 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN LEGION POST #763 3200 DAYTON-XENIA RD BEAVERCREEK,OH 45434	31-1223790	501(C)(19)	13,673				GENERAL SUPPORT			

Form 990,Schedule I, Pa	rt II, Grants an	d Other Assistance	<u>e to Governments</u>	and Organizations	s in the United Sta	tes	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN LEGION POST #776 5350 BURKHARDT RD RIVERSIDE,OH 45431	31-0960013	501(C)(19)	25,403				GENERAL SUPPORT

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493027007765

OMB No 1545-0047

2013

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ) Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on

Form 990 or to provide any additional information.

► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

Name of the organization	Employer identification number
THE AMERICAN LEGION DEPARTMENT OF OHIO	
CHARITIES INC	02-0692968

990 Schedule O, Supplemental Information

Return Reference	Explanation							
FORM 990, PART VI, SECTION B, LINE 11								
FORM 990, PART VI, SECTION B, LINE 15	THE ORGANIZATION DOES NOT COMPENSATE ANY OFFICERS, DIRECTORS, TRUSTEES, OR OTHER EMPLOYEES AND THEREFORE A POLICY FOR DETERMINING COMPENSATION IS NOT REQUIRED							
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST							
FORM 990, PART XI, LINE 2C, OVERSIGHT OF FINANCIAL STATEMENTS	THE ORGANIZATION HAS A COMMITTEE THAT ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE COMPILAT ION AND SELECTION OF THE INDEPENDENT ACCOUNTANT THE PROCESS BY WHICH THE COMMITTEE OVERSE ES THE COMPILATION AND SELECTS THE INDEPENDENT ACCOUNTANT HAS NOT CHANGED FROM PRIOR YEARS							

DLN: 93493027007765

2013

OMB No 1545-0047

Open to Public Inspection

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990. ► See separate instructions.

► Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service

(Form 990)

SCHEDULE R

Name of the organization THE AMERICAN LEGION DEPARTMENT OF OHIO CHARITIES INC

Employer identification number 02-0692968

Part 1 Identification of Disregarded Entitles Complete	e ii the organization a	answered tes or	i Foriii 990, Par	crv, line 33.	
(a) Name, address, and EIN (ıf applıcable) of dısregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
Part II Identification of Related Tax-Exempt Organization or more related tax-exempt organizations during the		he organization ar	nswered "Yes" o	n Form 990, Part I	IV, line 34 because it had one
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state	(d) Exempt Code sectio	(e) Public charity status	(f) (g) Direct controlling Section 512

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g Section (13) coi enti	512(b) ntrolled
						Yes	No
(1) AMERICAN LEGION DEPARTMENT OF OHIO INC	PRESERVE DEMOCRACY AND UPHOLD PATIOTISM	ОН	501(C)(19) & (C)(23)	N/A			No
60 BIG RUN ROAD					N/A		
DELAWARE, OH 43015 31-4115640							
(2) AMERICAN LEGION BUCKEYE BOYS STATE INC	PROMOTE PATRIOTISM AND TEACH STATE GOVERNMENT	ОН	501(C)(19) & (C)(23)	N/A	AMERICAN LEGION DEPARTMENT OF OHIO INC		No
60 BIG RUN ROAD	ORGANIZATION TO HS STUDENTS						
DELAWARE, OH 43015 31-6080576							
For Donouverly Deduction Act Nation and the Instructions for Forms 000		Cat No. 5013			Cabadula D (Carra		

Part III	Identification of Related Org because it had one or more rela						ation ansv	vered "Ye	es" on	Form	990, Part	IV, lu	ne 34	ļ
	(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	entity -	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income		(h Disprop r allocat	rtionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana parti	ral or	(k) Percentage ownership
						,			Yes	No		Yes	No	
												igspace		
												\vdash		
Part IV	Identification of Related Org line 34 because it had one or mo	ore related organız							wered	d "Yes				IV,
Na	(a) ame, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		(d) Dırect controllır entity	(e) Type of entit (C corp, S corp, or trust)	y Share of income	total Share	(g) e of end- -year ssets		(h) ercentage wnership	Section (b) (continue)	i) on 512 (13) rolled city?	No.
							1			-	ĺ	Yes	•	No
												l		

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

Yes No

1 During the tax year, did the organization engage in any of the following transactions with one or more	related organizations li	sted in Parts II-IV?								
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No				
b Gift, grant, or capital contribution to related organization(s)				1b	Yes					
c Gift, grant, or capital contribution from related organization(s)				1c		No				
d Loans or loan guarantees to or for related organization(s)				1d		No				
e Loans or loan guarantees by related organization(s)										
f Dividends from related organization(s)				1f		No				
g Sale of assets to related organization(s)				1g		No				
h Purchase of assets from related organization(s)				1h		No				
i Exchange of assets with related organization(s)				1 i		No				
j Lease of facilities, equipment, or other assets to related organization(s)				1j		No				
k Lease of facilities, equipment, or other assets from related organization(s)				1k		No				
I Performance of services or membership or fundraising solicitations for related organization(s)				11		No				
m Performance of services or membership or fundraising solicitations by related organization(s)										
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Yes					
• Sharing of paid employees with related organization(s)				10	Yes					
p Reimbursement paid to related organization(s) for expenses				1p	Yes					
q Reimbursement paid by related organization(s) for expenses				1q		No				
r Other transfer of cash or property to related organization(s)				1r		No				
s Other transfer of cash or property from related organization(s)				1s		No				
2 If the answer to any of the above is "Yes," see the instructions for information on who must comple	to this line including a	anad walatianahina								
(a)	(b)	(c)	(d)							
Name of related organization	Transaction type (a-s)	Amount involved	Method of determining amo	ount II	nvolved	I				
1) AMERICAN LEGION DEPARTMENT OF OHIO	В	50,025	ACTUAL							

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V ² UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
												1	
													_
			<u> </u>				l					<u> </u>	

Schedule R (Form 990) 2013

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2013