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Form 990-EZ

Short Form
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.**

▶ **Information about Form 990-EZ and its instructions is at *www.irs.gov/form990*.**

Department of the Treasury
Internal Revenue Service

OMB No 1545-1150

2014

Open to Public Inspection

A For the 2014 calendar year, or tax year beginning 01-01-2014 , and ending 12-31-2014

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
AMERICAN LEGION 113 PRINCESS ANNE

Number and street (or P O box, if mail is not delivered to street address) | Room/suite
PO BOX 4776

City or town, state or province, country, and ZIP or foreign postal code
VIRGINIA BEACH, VA 23454

D Employer identification number
54-1550008

E Telephone number
(757) 407-2088

F Group Exemption Number ▶

G Accounting Method ☑ Cash ☐ Accrual Other (specify) ▶ _____

H Check ▶ ☑ if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

I Website: ▶ N/A

J Tax-exempt status (check only one) - ☐ 501(c)(3) ☑ 501(c)(19) ◀(insert no) ☐ 4947(a)(1) or ☐ 527

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other _____

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts If gross receipts are $200,000 or more, or if total assets (Part II, column (B) below) are $500,000 or more, file Form 990 instead of Form 990-EZ ▶ $ 51,416

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)
Check if the organization used Schedule O to respond to any question in this Part I . . . . . ☑

Revenue	1	Contributions, gifts, grants, and similar amounts received		1	2,645
	2	Program service revenue including government fees and contracts		2	0
	3	Membership dues and assessments		3	790
	4	Investment income		4	7,030
	5a	Gross amount from sale of assets other than inventory	5a 40,951		
	b	Less cost or other basis and sales expenses	5b 35,035		
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)		5c	5,916
	6	Gaming and fundraising events			
	a	Gross income from gaming (attach Schedule G if greater than $15,000)	6a 0		
	b	Gross income from fundraising events (not including $ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds $15,000)	6b 0		
	c	Less direct expenses from gaming and fundraising events	6c 0		
	d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)		6d	0
	7a	Gross sales of inventory, less returns and allowances	7a		
	b	Less cost of goods sold	7b 0		
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)		7c	0
	8	Other revenue (describe in Schedule O)		8	
	9	**Total revenue.** Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 ▶		9	16,381
Expenses	10	Grants and similar amounts paid (list in Schedule O)		10	9,182
	11	Benefits paid to or for members		11	1,077
	12	Salaries, other compensation, and employee benefits		12	
	13	Professional fees and other payments to independent contractors		13	2,340
	14	Occupancy, rent, utilities, and maintenance		14	
	15	Printing, publications, postage, and shipping		15	
	16	Other expenses (describe in Schedule O)		16	9,637
	17	**Total expenses.** Add lines 10 through 16 ▶		17	22,236
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)		18	-5,855
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)		19	175,954
	20	Other changes in net assets or fund balances (explain in Schedule O)		20	
	21	Net assets or fund balances at end of year Combine lines 18 through 20 ▶		21	170,099

Part II **Balance Sheets** (see the instructions for Part II)
Check if the organization used Schedule O to respond to any question in this Part II . . . . . ☐

		(A) Beginning of year		(B) End of year
22	Cash, savings, and investments	175,954	22	170,099
23	Land and buildings		23	
24	Other assets (describe in Schedule O)		24	
25	**Total assets**	175,954	25	170,099
26	**Total liabilities** (describe in Schedule O)		26	
27	**Net assets or fund balances** (line 27 of column (B) **must** agree with line 21)	175,954	27	170,099

Part III **Statement of Program Service Accomplishments** (see the instructions for Part III)
Check if the organization used Schedule O to respond to any question in this Part III . ☐

Expenses (Required for section 501 (c)(3) and 501(c)(4) organizations, optional for others)

What is the organization's primary exempt purpose?
AMERICAN LEGION POST SERVICES TO PRESENT AND FORMER MEMBERS OF THE ARMED FORCES

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title

28 YOUTH EDUCATION, PUBLIC WORKS AND SPONSORSHIP OF YOUTH FUNCTIONS FOR PUBLIC GOOD (Grants $) If this amount includes foreign grants, check here ▶ ☐	28a	
29 MEMBERSHIP IN NATIONAL ORGANIZATION (Grants $) If this amount includes foreign grants, check here ▶ ☐	29a	
30 (Grants $) If this amount includes foreign grants, check here ▶ ☐	30a	
31 Other program services (describe in Schedule O) (Grants $) If this amount includes foreign grants, check here ▶ ☐	31a	
32 Total program service expenses (add lines 28a through 31a) ▶	32	

Part IV **List of Officers, Directors, Trustees, and Key Employees** (list each one even if not compensated — see the instructions for Part IV)
Check if the organization used Schedule O to respond to any question in this Part IV . . . . . ☐

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) **(if not paid, enter -0-)**	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
WAYNE MEAD POST COMMANDER	1 00	0		
STEVEN BRODIE VICE COMMANDER	1 00	0		
RANDY L SCALES ADJUTANT	1 00	0		
ROBERT HOLDREN FINANCE OFFICER	3 00	0		
ROBERT SWANSON SERVICE OFFICER	1 00	0		

Part V **Other Information** (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V . . . . . ☐

			Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		No
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name Otherwise, explain the change on Schedule O (see instructions)	34		No
35a	Did the organization have unrelated business gross income of $1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		No
b	If "Yes," to line 35a, has the organization filed a **Form 990-T** for the year? If "No," provide an explanation in Schedule O	35b		
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		No
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		No
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a			
b	Did the organization file **Form 1120-POL** for this year?	37b		No
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee **or** were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? . .	38a		No
b	If "Yes," complete Schedule L, Part II and enter the total amount involved . 38b			
39	Section 501(c)(7) organizations Enter			
a	Initiation fees and capital contributions included on line 9 . . . . . 39a			
b	Gross receipts, included on line 9, for public use of club facilities 39b			
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ _____, section 4912 ▶ _____, section 4955 ▶ _____			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		
c	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections4912, 4955, and 4958 ▶ _____			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax on line 40c reimbursed by the organization . . . . . ▶ _____			
e	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		No

41 List the states with which a copy of this return is filed ▶ _____

42a The organization's books are in care of ▶ ROBERT HOLDREN Telephone no ▶ (757) 407-2088

Located at ▶ 3748 STRATHMOOR CL VIRGINIA BEACH, VA ZIP + 4 ▶ 23452

			Yes	No
b	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)?	42b		No
	If "Yes," enter the name of the foreign country ▶ _____			
	See the instructions for exceptions and filing requirements for **FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)**			
c	At any time during the calendar year, did the organization maintain an office outside the U S ?	42c		No
	If "Yes," enter the name of the foreign country ▶ _____			

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041** - Check here . . . . . ▶ ☐
and enter the amount of tax-exempt interest received or accrued during the tax year . . . . ▶ 43

			Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		No
b	Did the organization operate one or more hospital facilities during the year? *If "Yes," Form 990 must be completed instead of Form 990-EZ*	44b		No
c	Did the organization receive any payments for indoor tanning services during the year?	44c		No
d	If "Yes," to line 44c, has the organization filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*	44d		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		No
45b	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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b		No

		Yes	No
46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	46		

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51

Check if the organization used Schedule O to respond to any question in this Part VI ☐

		Yes	No
47 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	47		
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48		
49a Did the organization make any transfers to an exempt non-charitable related organization?	49a		
b If "Yes," was the related organization a section 527 organization?	49b		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than $100,000 of compensation from the organization If there is none, enter "None "

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation

f Total number of other employees paid over $100,000 ▶

51 Complete this table for the organization's five highest compensated independent contractors who each received more than $100,000 of compensation from the organization If there is none, enter "None "

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation

d Total number of other independent contractors each receiving over $100,000. ▶

52 Did the organization complete Schedule A? **NOTE.** All Section 501(c)(3) organizations must attach a completed Schedule A ▶ ☐ Yes ☐ No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

****** 2015-09-21

Signature of officer Date

ROBERT HOLDREN FINANCE OFFICER

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
RICHARD E NOYES CPA		2015-09-21		
Firm's name ▶ RICHARD E NOYES CPA PC			Firm's EIN ▶	
Firm's address ▶ 3500 VIRGINIA BEACH BLVD 509 VIRGINIA BEACH, VA 23452			Phone no (757) 631-9334	

May the IRS discuss this return with the preparer shown above? See instructions ▶ ☑ Yes ☐ No

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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ 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.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization	Employer identification number
AMERICAN LEGION 113 PRINCESS ANNE	54-1550008

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990EZ, Part I, Line 10	NATIONAL DUES DUES TO NATIONAL AMERICAN LEGION NATIONAL NATIONAL AFFILIATE 1175 PUBLIC GOOD SEE LISTING SEE LISTING 8007
Form 990EZ, Part I, Line 16	LICENSE 875 OFFICE COSTS 513 INVESTMENT MANAGEMENT FEES 1715 FOREIGN TAXES ON INVESTMENTS 42 UNREALIZED LOSS ON INVESTMENTS 6492
Form 990, Part IX, Line 24f	CALENDARS

AMERICAN LEGION PRINCESS ANNE POST 113 UNAUDITED

STATEMENT OF ASSETS, LIABILITIES AND NET ASSETS 12-31-14

CURRENT ASSETS

WELLS FARGO - OPERATING	3,046 36		
WELLS FARGO - BASEBALL	0 00		
WELLS FARGO INV @ MARKET	167,021.00		
WELLS FARGO MMKT	31 43		
TOTAL CURRENT ASSETS		170,098 79	
TOTAL ASSETS			170,098 79

IN ASSOCIATION WITH 990 EZ

AMERICAN LEGION PRINCESS ANNE POST 113

CURRENT LIABILITIES				
ACCOUNTS PAYABLE	0 00			
TAXES PAYABLE - PAYROLL	0 00			
STATE W/H PAYABLE	0 00			
FUTA PAYABLE	0 00			
SUTA PAYABLE	0 00			
TAXES PAYABLE - SALES	0 00			
TOTAL CURRENT LIABILITIES		0 00		
TOTAL LIABILITIES		0 00		
NET ASSETS				
UNRESTRICTED NET ASSETS	170,098 79			
TOTAL NET ASSETS		170,098 79		
TOTAL LIABILITIES AND NET ASSETS			170,098 79	0 00

IN ASSOCIATION WITH 990 EZ

AMERICAN LEGION PRINCESS ANNE POST 113 UNAUDITED

STATEMENT OF SUPPORT, REVENUES AND EXPENSES 12-31-14

DUES			790 00
DONATIONS			852 00
BOYS STATE			1,792 50
GROSS PROCEEDS STOCK SALES			40,950 72
TOTAL REVENUES AND OTHER SUPPORT			44,385 22
EXPENSES			
BANK CHARGES		0 00	
DUES		1,175 00	
PROGRAM EXPENSES			
LAW & ORDER	650 68		
ROTC	31 07		
BOYS STATE	4,500 00		
NEEDY VETS	345 51		
HONOR FLIGHT	100 00		
ADA	100 00		
BASEBALL	2,279 98		
TOTAL PROGRAM EXPENSES		8,007 24	
FUNERALS & MEMORIALS		0 00	
SOCIAL EVENTS		144 86	
CALENDARS		72 00	
CONVENTIONS		859 98	
RENT		0 00	
EQUIPMENT RENT		0 00	
REPAIRS		0 00	
LICENSES	875 00		
MEAL TAX BOND	0 00		
BUS LIC/PPTAX	0 00	875 00	
UTILITIES - ELECTRIC	0 00		
UTILITIES - CELL	0 00	0 00	
AUTO		0 00	
INSURANCE		0 00	
MEALS & ENTERTAINMENT		0 00	
CONTRIBUTIONS		0 00	
PROFESSIONAL FEES		2,340 00	
DEPRECIATION		0 00	
AMORTIZATION		0 00	
SUPPLIES		0 00	
OFFICE COSTS		513 21	
TRAVEL		0 00	
MISCELLANEOUS EXPENSES		0 00	
INVESTMENT BASIS		35,035 05	
INVESTMENT FEES		1,715 01	
FOREIGN TAX		41 51	
TOTAL EXPENSES			50,778 86
CHANGE IN NET ASSETS FROM OPERATIONS			(6,393 64)

OTHER INCOME (EXPENSE)		
INVESTMENT INCOME	7,029 65	
UNREALIZED GAIN (LOSS) ON INVESTMENTS	(6,492 27)	
TOTAL OTHER INCOME (EXPENSE)		537 38
CHANGE IN NET ASSETS		(5,856 26)

IN ASSOCIATION WITH 990 EZ

STATEMENT OF NET ASSETS

NET ASSETS BEGINNING OF PERIOD	1-1-14	175,955 05
CHANGE IN NET ASSETS		(5,856 26)
NET ASSETS	12-31-14	170,098 79

IN ASSOCIATION WITH 990 EZ