EEA

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 and its instructions is at www.irs.gov/form990.

2016

OMB No 1545-0047

Open to Public Inspection

Internal	Revenu	e Service	▶ Informati	on about Form 990 an	d its instruction	ns is at www.irs.go	v/form99	2. \ i	<u> </u>	Inspection		
A F	or the	2016 calenda	or year, or tax year begin	ning	07-	01 , 2016, and er	nding		06-30	, 2017		
Bo	eck if ap	ck if applicable C Name of organization VETERANS OF FOREIGN WARS DEPT OF MO VFW POST 3976							D E	imployer identification no.		
Па	Idress ch		Doing business as						43	-1047974		
$\overline{}$	me chai	ī	Number and street (or P.O box	of mail is not delivered to stre	et address)		Room/suite	A	-î	elephone number		
_	tial retur	•	12810 E KENTUCE		ot add:000)		11001110411			16) 461-2636		
$\overline{}$		F					J		141,936			
$\overline{}$		v/terminated	City or town, state or province,		estal code							
L Ar	nended i	-	Independence, l						_	Gross receipts\$		
∐ Ar	plication	pending	F Name and address of principal		SEY, COMMAI	NDER	H(a) is i	his a group re	turn for sub-	cordinates? Yes X No		
			Same as C above				H(b) An	e all subordi	nates incl	luded? LYes No		
1 Ta	x-exemp	ot status 🔲	501(c)(3) 🔀 501(c)(19) ◀ (insert no)	947(a)(1) or	527		if "No," att	ach a list.	(see instructions)		
J W	ebsite:	► N/A				· · · · · · · · · · · · · · · · · · ·	H(c) G	conb exeut	tion numb	ber ▶ 1504		
K Fo	rm of org	ganızatıon 🔀	Corporation Trust Ass	ociation Other ►	ξ ₁	L Year of formation 1	964	M State of	legal don	nicile MO		
Par	t t	Summary	1	•	1							
	1	Briefly describ	be the organization's missi	on or most significant a	ctivities. VB1	ERAN OF FORE	IGN WAI	RS POS	r 397	6 MISSION IS		
_		TO PROMOT	TE VETERANS ADVOC	ACY, HISTORY, I	EDUCATION A	ND COMMENTOR	ATION,	ENCOU	RAGIN	G NATIONAL		
ဦ			THROUGH SUPPORT									
喜			UNITY SERVICE.									
₹	1		ox ▶ ☐ if the organization	discontinued its operat	ions or disposed	of more than 25% o	of its net a	ssets				
<u> </u>			oting members of the gover	•				1	з	13		
ඡ			dependent voting members	,				· -	4	13		
Activities & Governance)						
₹	I		of individuals employed in	•	•			· · ·	5			
Act	1		of volunteers (estimate if i	* *				· -	6	15		
-	1		ed business revenue from t					<u> </u>	7a	0		
	b	Net unrelated	l business taxable income	from Form 990-T, line 3	<u></u>		<u></u>		7b	0		
				المادسان والمعتبيل			Pric	or Year		Current Year		
	8	Contributions	and grants (Part VIII, line	1h) <i>[</i> ։ ։		· · · · · · · · · · · · · · · · · · ·			385	16,000		
Revenue	9	Program serv	nce revenue (Part VIII, line	2g)		L		13,	063	2,005		
ě	10	Investment in	icome (Part VIII, column (A	ر), lines 3, 4, and 7d) المرازة (أمر)		. []				0		
å			e (Part VIII, column (A), lin			g KJJ − F		91,	156	82,263		
			e - add lines 8 through 11 (104,	604	100,268		
			imilar amounts paid (Part I							0		
ි			to or for members (Part IX		,		•	11,	987	10,974		
2018 °	4	•	er compensation, employed		mn (Δ) lines 5-1	<u> </u>		48,		49,349		
8	1	•	fundraising fees (Part IX, o	•	• •	· ·			 7			
e e						_				~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
[2 6 2 Expenses			sing expenses (Part IX, col					4.4	<u></u> _	47 016		
₹ ₩		•	ses (Part IX, column (A), lir			· · · · · · -			016	47,016		
<u></u>	1		es. Add lines 13-17 (must		A), line 25)	· · · · · · -		104,		107,339		
<u> </u>	19	Revenue less	s expenses Subtract line	18 from line 12	·				399	(7,071		
Net Assets or Fund Balances						<u> </u>	Beginning o	f Current Y	ear	End of Year		
See See	20	Total assets ((Part X, line 16)					73,	134	459,440		
S Se	21	Total liabilities	s (Part X, line 26)					59,	927	54,390		
	22	Net assets or	fund balances Subtract	ine 21 from line 20				13,	207	405,050		
Par	t II	Signatu	re Block									
Under	penaltie	s of perjury, I dec	lare that I have examined this retu	im, including accompanying s	chedules and statem	ents, and to the best of my	knowledge	and belief, i	is			
	correct, a	na complete pec	claration of pregarer (other than of	icer) is based on all information	or writer preparer r	as any knowledge						
	1	h La	N Xelsen						2	5-11-18		
Sigr	1	Signature	e of officer						Date			
Hero		L TRON	RELCEY, COMMANDE	r, post commi	der presidi	MT AND BOARD						
1101	^	—	print name and title	27, 1001 00122111								
		<u>, , , , , , , , , , , , , , , , , , , </u>		Propagate alanation	1 4 1 . 4 =	Date	Ta	neck	if PTIN			
Data		Print/Type pre	•	Preparer's signature	. Koduto, C	· 65 •		_	- 1	ľ		
Paid		DIANA ROBERTS EA U5-11-2018		h2-11-5018		elf-employed		900175690 V				
-	arer						Firm's EIN					
Use	Only	Firm's address		UB DR STE D			Phone no	.				
			***************************************	lence MO 64055			1	81	5-461	-7171		
			return with the preparer sh		ictions)				<u>· · · · · · · · · · · · · · · · · · · </u>	X Yes No		
For P	aperw	ork Reduction	on Act Notice, see the se	parate instructions.			^			Form 990 (2016)		

	rt III Statement of Program Service Accomplishments
	Cheek if Cahadula O contains a recurrence as note to any line in this Bort III
1	Briefly describe the organization's mission
•	·
	VETERAN OF FOREIGN WARS POST 3976 MISSION IS TO PROMOTE VETERANS ADVOCACY, HISTORY, EDUCATION
	AND COMMENTORATION, ENCOURAGING NATIONAL SECURITY THROUGH SUPPORT OF OUR NATIONS MEN AND
	WOMEN IN UNIFORM PROMOTING GOOD CITIZENSHIP AND COMMUNITY SERVICE.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported.
	the total experises, and revenue, it any, for each program service reported.
<u> </u>	(O. t
4a	(Code) (Expenses \$10,661 including grants of \$) (Revenue \$15,929)
	MEMBER MEALS PROVIDED OPERATING REVENUE AND HELPED TO ACHEIEVE VETERAN AND FAMILIES IN NEED.
	PUNDS WERE RAISED BY SELLING MEALS TO MEMBERS TO HELP THE FAMILIES IN THIS PROGRAM. THEY ALSO
	LOANED MEDICAL EQUIPMENT FOR VETERANS. MEMBERSHIP OF 123 WAS BENEFITTED.
4b	(Code) (Expenses \$193 including grants of \$) (Revenue \$3,420)
	MEMBER FUNDRAISING MEALS PROVIDING OPERATING REVENUE AND HELPED TO ACHEIEVE HELPING OF
	VETERANS AND THEIR FAMILIES IN NEED. ALSO HELPED MEMBER FAMILIES WITH FINANCIAL HARDSHIP
	ISSUES. A HOG ROAST AND BIKER RALLY WERE HELD FOR THIS FUNCTION.
4c	(Code) (Expenses \$ 120 including grants of \$) (Revenue \$ 300)
	BUDDY POPPIES WERE SOLD FOR THE PURPOSE OF COMMERATION. FLAGS WERE ALSO PLACED IN THE
	INDEPENDENCE SCHOOL DISTRICT IN FUTHERANCE OF BOTH HELPING TO FOSTER PATRIOTISM AMONG THE
	YOUTH AND SUPPORTING THE YOUTH OF AMERICA.
	TOUTH AND SOFFORTING THE TOUTH OF AREKICA.
4d	Other program services (Describe in Schedule O)
74	
4.	<u></u>
40	Total program service expenses ▶ 10,974

Part IV Checklist of Required Schedules

Page 3 Yes No

			1 98	140
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	_1_		<u>X</u>
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2_		<u>X</u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to		1	••
	candidates for public office? If "Yes," complete Schedule C, Part I	3		<u>X</u>
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		
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		<u>X</u>
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		<u>X</u>
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		<u>X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		<u>X</u>
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		X
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		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,		[
	VII, VIII, IX, or X as applicable.			į
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	i		
_	complete Schedule D, Part VI	11a	x	
h	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		х
_	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	110		Х
d	Did the organization report on amount for other assets in Part X, line 15 that is 5% or more of its total assets			
u	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		\mathbf{x}
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
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		х
40.	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	 		
128	A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	12a		х
	Was the organization included in consolidated, independent audited financial statements for the tax year? If	I Lu		
b		12b		х
40	· · · · · · · · · · · · · · · · · · ·	13	\vdash	X
13	10 all 0 all 1 all	14a		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	144	 	
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	446		v
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or		1	· ·
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	 	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			v
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
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		X
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	_	X
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	X	
EEA		Form	1 990 (3	<i>2</i> 016)

Checklist of Required Schedules (continued) Part IV Yes No Х 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a b If "Yes" to time 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21 X domestic government on Part IX, column (A), line 17 If "Yes," complete Schedule I, Parts I and II 21 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on 22 X Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 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 X employees? If "Yes," complete Schedule J 23 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than 24a \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b X Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 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? 25b 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 nersons? If "Yes " complete Schedule L. Pert II. 26 X Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, 27 substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled X entity or farmily member of any of these persons? If "Yes," complete Schedule L, Part III 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, 28 Part IV instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV X A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete X 28b Schedule L. Part IV . An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) C was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV X Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 X 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 X 31 Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," 32 X complete Schedule N, Part II 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 X 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, 34 X 35a 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a X 35b controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable 36 36 related organization? If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Х 37

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and

19? Note. All Form 990 filers are required to complete Schedule O

Par	Statements Regarding Other IRS Fillings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	· ·	· · ·	<u> </u>
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		Yes	No
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	L			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and	4.	v	
0.	reportable gaming (gambling) winnings to prize winners?	1c	X	
2a	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		v	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	<u> </u>	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			.,
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	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		X
b	If "Yes," enter the name of the foreign country.			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		Ĺ
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		:	
	and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
0	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		Х
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		x
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		Х
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter	, , , , , , ,		7-7777
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
-	against amounts due or received from them)			
l2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		ĺ
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		·····
а		.Ja	-	
L	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand	4.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		L

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No Enter the number of voting members of the governing body at the end of the tax year 13 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 Enter the number of voting members included in line 1a, above, who are independent 13 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? X 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? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 R Did the organization have members or stockholders? X 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? Are any governance decisions of the organization reserved to (or subject to approval by) members, X stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? . 8a X Each committee with authority to act on behalf of the governing body? 8b 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? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes 10a Did the organization have local chapters, branches, or affiliates? 10a X 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? 10h X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a . . X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Х 12c Х Did the organization have a written whistleblower policy? 13 13 14 Did the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official . . . 15b **b** Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a X with a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the 16b organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed Missouri Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply Own website Other (explain in Schedule O) 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. State the name, address, and telephone number of the person who possesses the organization's books and records. 20 LEON KELSEY, COMMANDER (816)461-2636, 12810 E KENTUCKY ROAD, Independence, MO 64050

Form 990 (2016) VETERANS OF FOREIGN WARS DEPT OF MO VFW POST 3976 43-1047974 Page 7 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 organizations List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organization and any related organization and any related organization from the organization and any related organization and any related organization and any related organization from the organization and any related organization and any related organization from the organization and any related organizations				
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, and highest compensated employees who received more than	, ,	,		
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, and highest compensated employees who received more than	Form 990 (20	16) VETERANS OF FOREIGN WARS DEPT OF MO VFW POST 3976	43-1047974	Page 7
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, and highest compensated employees who received more than	Part VII		npensated Employ	ees, and
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, and highest compensated employees who received more than		Check if Schedule O contains a response or note to any line in this Part VII		🗆
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, and highest compensated employees who received more than	Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		
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, and highest compensated employees who received more than	•	· · · · · · · · · · · · · · · · · · ·	nin the	
 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, and highest compensated employees who received more than 			f amount of	
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, and highest compensated employees who received more than	• List all	of the organization's current key employees, if any. See instructions for definition of "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		
			ore than	

. 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 (C) Position (A) (B) (D) (E) (F) (do not check more than one Reportable Reportable Estimated Name and Title Average box, unless person is both an hours per compensation compensation from amount of officer and a director/trustee) veek (list any from related other hours for organizations compensation related organization (W-2/1099-MISC) from the (W-2/1099-MISC) organization organizations below dotted and related line) organizations (1) LEON KELSEY, COMMANDER 20.00 POST COMMANDER PRESIDENT AND BOARD 20.00 Х X 0 (2) ANDY JASSON 6.00 Х X 0 0 VICE PRESIDENT AND BOARD MEMBER (3) WARREN ATCHINSON 30.00 SECRETARY TREASURER AND BOARD MEMBR X 0 (4) NORMAN WILSON 6.00 BOARD OF DIRECTORS Х (10) (13) (14)

Page 8

Part	VII Section A. Officers, Directors, Trustees,	Key Employ	/ 00 8, 8	ind l	High	est	Comp	ens	ated Employees	continued)	
		[(C	;)				1	
	(B)	,		Posi				(D)	(E)	(F)	
	(A) Name and title	Average					han one		Reportable	Reportable	Estimated
	14002 404 424	hours per	L				both antrustee)		compensation	compensation from	amount of
		week (list any							from	betalen	other
		hours for	Individual trustee or director	Institutional trustee	Officer	Ş.	看賣	Former	the	organizations	compensation
		related organizations	8 2	5	뽁	employee	oy es	₹	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
		below dotted	੧ ਛੋ	a a	1	Š	* §	ĺ	(2)	1	and related
		line)	į	T S		. 8	99	i	i	i	organizations
		ļ		8			Highest compensated employee	1		}	
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(25)											
± -'							1				
1b	Sub-total					-		<u> </u>			
c	Total from continuation sheets to Part VII, Section							-		 	
d					•	• •	•			0	0
	Total (add lines 1b and 1c) Total number of individuals (including but not limited							P.	than \$100,000 of	1	<u> </u>
2		i to u lose iiste	ou abo	ve) \	WIIO	100	civeu i	11016	s utali \$100,000 of	0	
	reportable compensation from the organization										Tw. Tw.
											Yes No
3	Did the organization list any former officer, director,				ee, c	or hi	ghest	com	pensated		
	employee on line 1a? If "Yes," complete Schedule J				•		•	•			3 X
4	For any individual listed on line 1a, is the sum of rep	ortable comp	ensat	ion a	and c	othe	r comp	ens	ation from the		
	organization and related organizations greater than	\$150,000? <i>If</i>	"Yes,	con	nple	te S	chedu	le J	for such		
	individual										4 X
5	Did any person listed on line 1a receive or accrue or	ompensation	from a	any (unrel	ate	d orga	nızai	tion or individual		
	for services rendered to the organization? If "Yes," of	complete Scl	hedule	J for	r suc	h p	erson				5 X
Section	on B. Independent Contractors										
1	Complete this table for your five highest compensate	ed independe	ent cor	ntrac	tors	tha	t recei	ved	more than \$100.00	0 of	
-	compensation from the organization Report compe										
	year.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			,			.,			
								_	7		(0)
	(A)								(6)	ļ	(C)
-	Name and business address				-				_ Description of	Services	Compensation
									<u> </u>		
2	Total number of independent contractors (including	but not limite	d to th	ose	liste	d ab	ove) v	vho			
	received more than \$100,000 of compensation from			•			_				

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (O) Total revenue Related or Unrelated business Revenue excluded from tax exempt function revenue under sections 512-514 revenue 1a Federated campaigns . 1a Contributions, Gifts, Grants and Other Similar Amounts 71 1b Membership dues Fundraising events 1c d Related organizations . 1d e Government grants (contributions) . . 10 All other contributions, gifts, grants, and similar amounts not included above 15,929 g Noncash contributions included in lines 1a-1f \$ Total. Add lines 1a-1f ▶ 16,000 Business Code Program Service Revenue 1.635 28 HOG ROAST AND BIKER RAL 900099 1,635 30d 300 b POPPIES 900099 50 900099 50 d OFFICER RELIEF FUND 20 20 e MILITARY ASSISTANCE PRO 900099 f All other program service revenue 2,005 g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 6a Gross rents **b** Less rental expenses c Rental income or (loss) . d Net rental income or (loss) (ı) Securities (ii) Other 7a Gross amount from sales of assets other than inventory b Less, cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) . Other Revenue 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 . b Less direct expenses c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 . 33,163 23,149 b Less, direct expenses 10.014 . 10,014 c Net income or (loss) from gaming activities \blacktriangleright 10a Gross sales of inventory, less returns and allowances . 90,768 a b Less cost of goods sold 18,519 72,249 72,249 c Net income or (loss) from sales of inventory **Business Code** Miscellaneous Revenue 11a d All other revenue e Total. Add lines 11a-11d Total revenue. See instructions 100,268 84,268

Page 10

Part IX Statement of Functional Expenses

Secu	on 501(c)(3) and 501(c)(4) organizations must complete all col Check if Schedule O contains a response or note to a		audris musi complete (Joint (A).	
Do n	ot include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)
	b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments See Part IV, line 21	{			
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	ĺ			
	ındıviduals. See Part IV, lines 15 and 16				4,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
4	Benefits paid to or for members	10,974	10,974		
5	Compensation of current officers, directors,	}		Ì	
	trustees, and key employees				
6	Compensation not included above, to disqualified			1	
	persons (as defined under section 4958(f)(1)) and	[
	persons described in section 4958(c)(3)(B)				
7	Other salanes and wages	44,844		44,844	
8	Pension plan accruals and contributions (include	Í			
	section 401(k) and 403(b) employer contributions) .				
9	Other employee benefits	4 606		4 505	
10	Payroll taxes	4,505		4,505	
11	Fees for services (non-employees)		,	Ì	
a	Management				
b	Legal	2,775		2,775	
c d	Accounting	2,113		2,113	
8	Lobbying Professional fundraising services See Part IV, line 17			-	
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
v	(A) amount, list line 11g expenses on Schedule O.) .		ļ		
12	Advertising and promotion				
13	Office expenses	7,001		7,001	
14	Information technology				
15	Royalties				
16	Occupancy	37,803		37,803	
17	Travel				
18	Payments of travel or entertainment expenses	1		1	
	for any federal, state, or local public officials				<u> </u>
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	8,750		8,750	
23	Insurance	5,951		5,951	
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column	1			
	(A) amount, list line 24e expenses on Schedule O)	(15.064)		(15.264)	
a	ADJUSTMENT	(15,264)		(15,264)	
b					
C				 	
d	All other evnences				
9 25	All other expenses	107,339	10,974	96,365	0
25 26	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	207,339	10/3/4	20,203	
	organization reported in column (B) joint costs				
	from a combined educational campaign and	j		,	
	fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				
		المستحد والمستحد والمستحدد والمستحدد والمستحد والمستحد والمستحد والمستحدد والمستحد والمستحدد والمستحد والمستحدد والمستحد والمستحدد والمستحد والمستحدد والمستحدد والمستحدد والمستحدد والمستحدد والمستحدد والمستحدد والمستحد والمستحدد والمستحد والمستحدد والمستحدد والمستحد	and the second s		

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) End of year Beginning of year 15,625 1 3,017 2 2 Savings and temporary cash investments 3 3 Pledges and grants receivable, net . . 4 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees 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 6 organizations (see instructions). Complete Part II of Schedule L. . . 7 7 Notes and loans receivable, net 8 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or 10a 539,957 other basis. Complete Part VI of Schedule D . . | 10b 57,509 456,423 Less accumulated depreciation 11 11 12 12 Investments - other securities. See Part IV, line 11 . . . Investments - program-related See Part IV, line 11 13 13 14 14 Intangible assets 15 73,134 16 459,440 Total assets. Add lines 1 through 15 (must equal line 34) 16 2,418 17 17 18 18 19 Deferred revenue . . 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, iabilities. trustees, key employees, highest compensated employees, and 22 disqualified persons. Complete Part II of Schedule L. Secured mortgages and notes payable to unrelated third parties 57,509 27,041 23 23 Unsecured notes and loans payable to unrelated third parties 24 27,349 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 25 59,927 54,390 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here 🕟 🗌 and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here \blacktriangleright 🔯 and complete lines 30 through 34. 30 20 Capital stock or trust principal, or current funds 31 398,919 31 Paid-in or capital surplus, or land, building, or equipment fund 13,207 32 6,131 32 Retained earnings, endowment, accumulated income, or other funds 13,207 33 405,050 33 73,134 459,440 Total liabilities and net assets/fund balances

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Form	990 (2016) VETERANS OF FOREIGN WARS DEPT OF MO VFW POST 3976	<u>43-1047</u>	974	Pe	age 12
Pai	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>	<u></u>		<u>. 🔲</u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1	:	100,	268
2	Total expenses (must equal Part IX, column (A), line 25)	. 2		107,	339
3	Revenue less expenses. Subtract line 2 from line 1	3_		(7,	071)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	. 4		13,	207
5	Net unrealized gains (losses) on investments	. 5_			
6	Donated services and use of facilities	. 6			
7	Investment expenses	. 7			
8	Prior period adjustments	8		398,	914
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		405,	050
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>			<u>. 🔲</u>
				Yes	No
1	Accounting method used to prepare the Form 990' 🔯 Cash 🔲 Accrual 🔲 Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		. 2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both.			.	
	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 oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		. 2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O				
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?		3a		
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		
EEA			Form	990 (2016)

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below.

▶ Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. If the organization answered "Yes," on 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," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A Do not complete Part II-B.

Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

	organization answered "Yes," on Form (see separate instructions), then	990, Part IV, line 5 (Proxy Tax) (see s	eparate instruction	ons) or Form 99	0-EZ, Pari	t V, line 35c (Pro	жу
	Section 501(c)(4), (5), or (6) organizations	Complete Part III					
Nam	e of organization			E	mployer	identification n	umber
VE	TERANS OF FOREIGN WARS DEPT				43-104		
Pa	rt I-A Complete if the organ	ization is exempt under secti	on 501(c) or i	s a section 5	27 orga	anization.	
1	Provide a description of the organization's	s direct and indirect political campaign a	tuntes in Part IV	see instructions	for		
	definition of "political campaign activities")					
2	Political campaign activity expenditures (see instructions)			\$		
3	Volunteer hours for political campaign act	bvities (see instructions)					
Pa	rt I-B Complete if the organ	ization is exempt under secti	on 501(c)(3).				
1	Enter the amount of any excise tax incurr	ed by the organization under section 49	55		▶ \$		
2	Enter the amount of any excise tax incurr	ed by organization managers under sec	ion 4955		▶ \$		
3	If the organization incurred a section 4959	5 tax, did it file Form 4720 for this year?				Yes	☐ No
4a	Was a correction made?					Yes	☐ No
b	If "Yes," describe in Part IV.						
Pa	rt I-C Complete if the organ	ization is exempt under secti	on 501(c), exc	cept section	501(c)(3).	
1	Enter the amount directly expended by th	e filing organization for section 527 exer	npt function				
	activities				▶ \$		
2	Enter the amount of the filing organization	n's funds contributed to other organizatio	ns for section				
	527 exempt function activities				▶ \$		
3	Total exempt function expenditures. Add						
	line 17b				▶ \$		
4	Did the filing organization file Form 1120-					Yes	☐ No
5	Enter the names, addresses and employe	er identification number (EIN) of all section	on 527 political org	anızatıons to whi	ch the filin	g	
	organization made payments. For each or		-			=	
	the amount of political contributions receiv	-					
	as a separate segregated fund or a politic						
							oltraal
	(a) Name	(b) Address	(c) EIN	(d) Amount pa filing organiz		(e) Amount of p	
				funds if none,		promptty and o	directly
						delivered to a s political organiz	•
						none, enter	
				,			
(1)							
(2)							
(3)			•			ļ	
	· · · · · · · · · · · · · · · · · · ·		 -			 	
(4)							
		 					
(5)						1	
	·····		 			 	
(6)						1	

	ert II-A Complete if the organization		DEPT OF MO VI		43-1047 d Form 5768 (ele	
	section 501(h)).				<u> </u>	
A	Check 🕨 🔲 if the filing organization belongs to		•		ember's	
	name, address, EIN, expenses, ar			•		
<u>B</u>	Check ▶ ☐ if the filing organization checked b			ily		
		bying Expenditure			(a) Filing	(b) Affiliated
	(The term "expenditures" n	neans amounts pa	id or incurred.)		organization's totals	group totals
1a	Total lobbying expenditures to influence public of	oinion (grass roots l	obbying)			
b	Total lobbying expenditures to influence a legisla	tive body (dırect lob	bying)			
C	Total lobbying expenditures (add lines 1a and 1b)				
d	Other exempt purpose expenditures					
0	Total exempt purpose expenditures (add lines 1c					
f	Lobbying nontaxable amount Enter the amount f	rom the following ta	ble in both			
	columns					
	If the amount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amoun	t is:	Ţ.	
	Not over \$500,000	20% of the an	nount on line 1e		· · · · · · · · · · · · · · · · · · ·	
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess of	over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess of	over \$1,000,000	1	
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess or	ver \$1,500,000		
	Över \$17,000,000	\$1,000,000		1		
g	Grassroots nontaxable amount (enter 25% of line	e 1f)				
h	Subtract line 1g from line 1a If zero or less, ente	r <i>-</i> 0				
ı	Subtract line 1f from line 1c If zero or less, enter	·- 0				
j	If there is an amount other than zero on either lin	e 1h or line 1i, did ti	he organization file F	orm 4720		
-	reporting section 4911 tax for this year? .					Yes No
	(Some organizations that made a s	ection 501(h) el	ing Period Under lection do not han structions for li	ve to complete a		nns below.
	Lobb	ying Expenditures	During 4-Year Aver	raging Period		
	Calendar year (or fiscal year	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
	beginning in)					
2a	Lobbying nontaxable amount					AUSS
b	Lobbying ceiling amount (150% of line 2a, column (e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount	,,,,,				
0	Grassroots ceiling amount (150% of line 2d, column (e))		,	۸.	, ,	, -
f	Grassroots lobbying expenditures					

EEA

Schedule C (Form 990 or 990-EZ) 2016

a	Current year	Za	
Ь	Carryover from last year	2b	
C	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	
_		1 - 1	
	rt IV Supplemental Information	 	
Pa	rt IV Supplemental Information	and	
Pa Prov	rt IV Supplemental Information Ide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated group list), Part II-A, lines 1	and	
Pa Prov	rt IV Supplemental Information	and	
Pa Prov	rt IV Supplemental Information Ide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated group list), Part II-A, lines 1	and	
Pa Prov	rt IV Supplemental Information Ide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated group list), Part II-A, lines 1	and	
Pa Prov	rt IV Supplemental Information Ide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated group list), Part II-A, lines 1	and	
Pa Prov	rt IV Supplemental Information Ide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated group list), Part II-A, lines 1	and	

(Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990.

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047

2016

Open to Public napaction

Employer identification number Name of the organization VETERANS OF FOREIGN WARS DEPT OF MO VFW POST 3976 43-1047974 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year . . Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised ☐ Yes ☐ No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for chantable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a 2b Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax vear > Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes No violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) ... Yes No and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X . . If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

3 Uses the organization is expansion, accession, and other records, check any of the following that are a significant use of the collections terms (check all that apply): Public exhibition	Pa	rt III Organizations Maintaining Colle	ctions of Art, I	Historical To	reasures,	or Oth	er Similar As	sets (continu	ued)
Public exhibition	3	Using the organization's acquisition, accession, and of	ther records, check	any of the follow	ving that are	a signific	ant use of its		
b		collection items (check all that apply):							
Preservation for future generations	a	Public exhibition	d Loan or e	xchange progra	ams				
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII	b	Scholarly research	e 🗌 Other						
Sull Successful to eyear, did the organization solicit or receive donations of art, historical breasures, or other similar assets to be sold to raise funds rather than to be maintened as part of the organization's collection?	C	Preservation for future generations							
5 Durng the year, dit the organization soletic receive donations of art, historical freesures, or other similar seates to be sold to raise funds rather than to be minimared as part of the organization's collection?	4	Provide a description of the organization's collections	and explain how the	y further the org	ganization's e	xempt p	urpose in Part		
assets to be sold to raise funds rather than to be meintaned as part of the organization's collection?		XIII.							
Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yee" on Form 990, Part IV, line 9, or repuried an amount on Form 990, Part X, line 21. Tall is the organization an agent, trustee, outsolding or other intermediary for contributions or other assets not included on Form 900, Part X? Yes No If Yes, "explain the arrangement in Part Xill and complete the following table: Contributions during the year Tall T	5	During the year, did the organization solicit or receive	donations of art, his	torical treasures	s, or other sin	nılar			
Complete if the organization answered "Yes" on Fourn 960, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes		assets to be sold to raise funds rather than to be main	tained as part of the	organization's	collection?		<u></u>	. Yes	☐ No
990, Part X, line 21. 1a Is the organization an agent, tustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No No If Yes, "explain the arrangement in Part XIII and complete the following table: Complete if the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account tubbility? Yes No If Yes, explain the arrangement in Part XIII Ohock here if the explanation has been provided on Part XIII Ohock here if the explanation has been provided on Part XIII Ohock here if the explanation has been provided on Part XIII Ohock here if the explanation has been provided on Part XIII Ohock here if the explanation has been provided on Part XIII Ohock here if the explanation has been provided on Part XIII Ohock here if the explanation has been provided on Part XIII Ohock here if the explanation has been provided on Part XIII Ohock here if the explanation has been provided on Part XIII Ohock here if the explanation has been provided on Part XIII Ohock here if the explanation has been provided on Part XIII Ohock here if the explanation has been provided on Part XIII Ohock here if the explanation has been provided on Part XIII Ohock here if the organization answered "Yes" on Form 990, Part IV, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.	Pa								
The street of the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 900, Part X? Complete if the organization answered "Yes" on Form 900, Part IV, line 10.		Complete if the organization answer	red "Yes" on Fo	ını 990, Par	i IV, lin o 9	, or rep	orted an amot	ıni on Form	
included on Form 990, Part X? Yes		990, Part X, line 21.							
b If "Yes," explain the arrangement in Part XIII and complete the following table: Beginning balance	1a	Is the organization an agent, trustee, custodian or other	er intermediary for c	ontributions or c	other assets r	not			_
c Beginning balance d Additions during the year e Distributions during the year 1 td d d d d d d d d d d d d d d d d d d		included on Form 990, Part X?						. 🔲 Yes	☐ No
c Beginning balance	b	If "Yes," explain the arrangement in Part XIII and comp	olete the following to	ıble:					
d Additions during the year Destributions during the year Ending balance If						<u> </u>	Am	ount	
e Distributions during the year f Ending belance 2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?	C	Beginning balance				10			
f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account hability? Part V Endowment Funds. Part V Endowment Funds.	đ	Additions during the year			•	10	1		
Digital the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account hability? Yes No b f Yes," explain the arrangement in Part XIII Check here if the explanation has been provided on Part XIII Part X Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.	0								
b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided on Part XIII	f	· · · ·							
Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Beginning of year balance								📙 Yes	∐ No
Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Administrative expenses (a) Four year (b) Foor year (c) Two years back (d) Three years back (e) Four years (e) Four yea			ere if the explanatio	n has been prov	nded on Part	XIII	<u> </u>	<u> </u>	Ц
(a) Current year (b) Proor year (c) Two years back (d) Three years back (e) Four years back	Pa	the late of the la				_			
tale Beginning of year balance b Contributions c Net investment earnings, gams, and losses d Grants or scholarships Other expenditures for facilities and programs f Administrative expenses g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Board designated or quasi-endowment ▶ % Fermanent endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (iii) related organizations b if "Yes" on 3e(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Describer of property (a) Control other basis (b) Cost or other basis (c) Accumulated depreciation depreciation 1a Land (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation depreciation 22,100 b Buildings (b) Cost or other basis (c) Accumulated depreciation depreciation 1a Land (c) Accumulated (d) Book value depreciation 22,100 b Buildings (d) Equipment (51,660 c) Equipment (51,660 c) Other (c) Other (c) S1,660 c) Other (c)		Complete if the organization answer			,			_,	
b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment b % The permanent endowment b % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) related organizations (iii) related organizations (iv) related organizations (iv) related organizations (iv) related organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (c) Accountiated (d) Book value dependent of the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Leasthold improvements d Equipment 51,660 51,660 51,660			Current year	(b) Pnor year	(c) Two years	s back	(d) Three years back	(e) Four years	back
c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment b Permanent endowment b % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If 'Yes' on 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Describe in Part XIII the intended uses of the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Describe in Part XIII the intended uses of the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Describe of property (a) Cost or other basis (c) Accommisted deprecation dep	1a				<u> </u>			<u> </u>	
Corants or scholarships	b							- 	
d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as 8 Board designated or quasi-endowment	C								
e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment					ļ			- }	
programs f. Administrative expenses g. End of year balance 2. Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a. Board designated or quasi-endowment	d	· · · · · · · · · · · · · · · · · · ·							
g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment	0	' I							
g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Board designated or quasi-endowment %	_	· ·							
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Board designated or quasi-endowment	•				 		<u> </u>	- 	
a Board designated or quasi-endowment ▶		<u> </u>			<u> </u>		· · · · · · · · · · · · · · · · · · ·		
b Permanent endowment \	_		, ,	, column (a)) ne	ea as				
Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) related organizations (iii) related organizations (iv) are the related organizations listed as required on Schedule R? Describe in Part XIII the intended uses of the organization's endowment funds Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (c) Accumulated depreciation (c) Accumulated depreciation 1a Land 22,100 22,100 b Buildings 466,197 31,874 434,323 c Leasehold improvements d Equipment 51,660 51,660	a		%						
The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) relat	D		0/						
Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) related organizations (iiii) related organizations (iiiii) related organizations (iiiiiii) (iiiiiiii) (iiiiiiiii) (iiiiiiii	С	* ****	_						
organization by: (ii) unrelated organizations (iii) related organizations (iii) related organizations (iii) related organizations (iii) related organizations (iv) related organization	2-			are hold and ad	lminustarad fa	- -			
(ii) unrelated organizations (iii) related organizations b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (investment) (investment) (other) 4 Describe in Part XIII the intended uses of the organization's endowment funds (d) Book value (d) Book value 22,100 22,100 22,100 5 Buildings C Leasehold improvements G Equipment G Equipment G Other S 1,660 C S 1,660 C S 1,660 C S 1,660	3a	·	ne organization that	are neid and ad	iministered to	rue		\vec	No
(ii) related organizations b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (investment) (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 22,100 b Buildings Land 22,100 22,100 b Buildings Leasehold improvements d Equipment 51,660 51,660		-							NO
b If "Yes" on 3a(II), are the related organizations listed as required on Schedule R? Describe in Part XIII the intended uses of the organization's endowment funds Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (investment) (invesm		.,							
Describe in Part XIII the intended uses of the organization's endowment funds Part VI		• •	, , , , , , , , , , , , , , , , , , ,	lula P2			• • • • •		+-
Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (investment) (b) Cost or other basis (c) Accumulated depreciation (d) Book value 22,100 b Buildings	4	-	<u>-</u>					. [30]	ч
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation	(B)			ilius					
Cost or other basis (investment) Cost or other basis (other)	<u> </u>			rm 990 Par	t IV line 1	1a Se	e Form 990 P	art X line 10)
(investment) (other) depreciation 1a Land 22,100 22,100 b Buildings 466,197 31,874 434,323 c Leasehold improvements 51,660 51,660 e Other 51,660 51,660									
1a Land 22,100 b Buildings 466,197 31,874 434,323 c Leasehold improvements 51,660 51,660 e Other 51,660 51,660		Description of property		1 ' '				(d) Book value	
b Buildings	10	Land		 `			-	22	100
c Leasehold improvements d Equipment e Other							31,874		
d Equipment		_						454)	
e Other	-	•			51.660		51.660		
		• •			22,000				
			m 990 Part X colu	nn (B), line 10c	.)	L		456.	423

VETERANS OF FOREIGN WARS DEPT OF MO VFW POST 3976

Schedule D (Form 990) 2016

43-1047974

Page 2

Part VII	Investments - Other Securities. Complete if the organization answe	red "Yes" on Form 990 F	Part IV line 11b. See Form 990.	Part X. line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuatio	n.
(1) Financial	denvatives			
(2) Closely-he	eld equity interests			
(3) Other				
(A)				
(B)				· <u></u>
(C)				
(D)		-		
(E)			 	
(F) (G)				
(H)		- 		
) must equal Form 990, Part X, col (B) line 12)	- 		······································
Part VIII	Investments - Program Related.			
(Committee of the Committee of the Commi	Complete if the organization answe	red "Yes" on Form 990, f	Part IV, line 11c. See Form 990,	Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuatio	n
(1)				
(2)				
(3)				
(4)				
(5)			<u> </u>	
(6)			<u> </u>	
_(7)				
(8)				
(9)				
Control of the Contro	must equal Form 990, Part X, col (B) line 13)	•	<u></u>	
Part IX	Other Assets. Complete if the organization answe	red "Yes" on Form 990, I	Part IV, line 11d. See Form 990	
(4)) Description		(b) Book value
	YEAR ADJUSTMENT			
(2)				
(3)				
(5)		<u> </u>		
(6)				
(7)		·		
(8)				
(9)				
	nn (b) must equal Form 990, Part X, col. (B) line	15)		
Part X	Other Liabilities.			
	Complete if the organization answe line 25.	ered "Yes" on Form 990, I	Part IV, line 11e or 11f. See For	m 990, Part X,
1.	(a) Description of liability	(b) Book value		1191
(1) Federal	income taxes			
_(2)				
(3)				
_(4)		<u> </u>		
(5)			 	
<u>(6)</u>				
<u>(7)</u>				
(8)		 	 	
(9)				
) must equal Form 990, Part X, col. (B) line 25)	hout of the factuate to the armon	ration's figuresal statements that reports	

organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Sched	tule D (Form 990) 2016 VETERANS OF FOREIGN WARS DEPT OF MO VFW POST 3976	43-1047974	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities	-	
C	Recoveries of prior year grants	-	
d	Other (Describe in Part XIII)	-	
8	Add lines 2a through 2d	20	
3	Subtract line 2e from line 1	3	
	1 1		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b		
þ	Other (Describe in Part XIII)	- -	
C	Add lines 4a and 4b	4c	
ستين و	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	
Pa	Reconciliation of Expenses per Audited Financial Statements With Expense	s per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities		
b	Prior year adjustments	7	
c	Other losses		
d	Other (Describe in Part XIII)	-	
9	Add lines 2a through 2d	20	
3		3	
	1 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII)	.	
C	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	
	rt XIII Supplemental Information.		
	nde the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part IV, lines 1b and 2b, Part V, line 4;	Part X, line	
2; P	art XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.		
			
			
			
	· 		

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

2016

Department of the Treasury

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ, line 6a. organization about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form

Open to Public

Name of the organization	1 40001 041100410 0	<i>y</i> (1 0.1.1 000 0	1 000 22, 411	- 10 110110110110 10 01 1	100000000000000000000000000000000000000		ntification number
veterans of foreign wars de	DT OF WO 178	ህ ኮሶሪሞ ን	076			43-10	
Eundraiging Activities				swered "Vee" on	Form 90/		
Form 990-EZ filers are no	•	_		SWEIGG 165 OII	i Oilli ee	J, Fait IV	, mi o 17.
1 Indicate whether the organization rais				ties Check all that ar	only		
a Mail solicitations	Journal allough	·	-	of non-government gra	• -		
b Internet and email solicitations				of government grants	u		
c Phone solicitations				fraising events			
d In-person solicitations		ЯЦ	opoolal land	a along ovorto			
		والمساوية والمساولات	امينا المصارية	unu afficara durantara	· · · · · · · · · · · · · · · · · · ·		
2a Did the organization have a written of							Dw-
or key employees listed in Form 990,						Y.	
b If "Yes," list the 10 highest paid indivi- compensated at least \$5,000 by the o		undraisers) (oursuant to a	igreements under whi	cn the fundr	aiser is to D	e
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody o	draiser have r control of outions?	(Iv) Gross receipts from activity	(or reta fundraise	unt paid to uned by) or listed in (i)	(vi) Amount paid to (or retained by) organization
	 	Yes	No				
1				,			<u> </u>
2					. <u></u>		
3							
4		-					
5							
6		 			i		
7	1	+		- "			
8		 					
9	 						
10	 	 					
		<u> </u>	<u> </u>				
Fotal				<u></u>			
List all states in which the organization registration or licensing	is registered or li	censed to so	olicıt contribu	tions or has b ee n noti	fied it is exe	mpt from	
							
		 _					
							
							
							
							
							

- 1			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col (a) through
			(event type)	(event type)	(total number)	col (c))
ועמאמוותם	1	Gross receipts				
	2	Less' Contributions Gross income (line 1 minus				
1	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				
Sacrady Toolla	7	Food and beverages .				
\$	8	Entertainment				
	9	Other direct expenses				
	11 1	Net income summary Subtract line Gaming. Complete if the o than \$15,000 on Form 990	organization answered '	'Yes" on Form 990, Part	t IV, line 19, or reported	more
Τ	_	41211 \$10,000 011 0111 000		(b) Pull tabs/instant	(c) Other gaming	
		utan \$10,000 on 1 om 500	(a) Bingo	bingo/progressive bingo	(c) Other gaming	col (a) through col (c
	1	Gross revenue			(c) Other gaming	
†	1 2			bingo/progressive bingo	(c) Other gaming	col (a) through col (c
†		Gross revenue		bingo/progressive bingo	(c) Other gaming	col (a) through col (c)
CO I TAPOLISCO	2	Gross revenue		bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c)
2001000	2	Gross revenue	(a) Bingo	33,163		col (a) through col (c)
	2 3 4	Gross revenue		bingo/progressive bingo 33,163	(c) Other gaming	cot (a) through cot (c)
Onicaci - cheripdy - 100 ii	2 3 4 5	Gross revenue	(a) Bingo	23,149 Z 100.00 %	Yes%	cot (a) through cot (c)
	2 3 4 5	Gross revenue	(a) Bingo Yes % No 2 through 5 in column (d)	23,149 X Yes 100.00 % No	☐ Yes % ☐ No	23,149
a	2 3 4 5 6 7 8 En	Cash prizes Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary Add lines Net garning income summary Subteter the state(s) in which the organization licensed to conduct of	Yes% No 2 through 5 in column (d) ract line 7 from line 1, column	23,149 23,149 No No No these states?	☐ Yes% ☐ No	23,149

Sched	ING (Form 980 of 980-E2) 2016 VETERANS OF FOREIGN WARS DEPT OF MO VFW POST 39/6 43-104/9/4 Pag	<u>je J</u>
11		No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity	
	formed to administer chantable gaming?	No
13	Indicate the percentage of gaming activity conducted in:	
8	The organization's facility	%
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 LEON KELSEY	
	Address ► 12810 E KENTUCKY ROAD, Independence, MO 64050	
15a	Does the organization have a contract with a third party from whom the organization receives gaming	
	revenue?	40
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the	
	amount of gaming revenue retained by the third party ▶ \$	
C	If "Yes," enter name and address of the third party.	
	Name ►	
	Address ►	
16	Gaming manager information	
	Name LEON KELSEY	
	Gaming manager compensation ▶ \$	-
	Description of conveyed and a CHERGERS HOLDERS HANDLING CAMPLING	
	Description of services provided VOVERSEES VOLUNTEERS HANDLING GAMBLING	
	☑ Director/officer ☐ Employee ☐ Independent contractor	
17	Mandatory distributions	
а	Is the organization required under state law to make chantable distributions from the gaming proceeds to	
	retain the state gaming license?	40
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or	
Pray.	spent in the organization's own exempt activities during the tax year \$\bigs\\$ 10,014 TW Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and	
T 40	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information.	
	See instructions	
	See Instructions	_
		_
		_
		_

SCHEDULE 0 (Form 990 or 990-EZ)

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.

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Employer identification number

Inspection

VEIGRANS OF FOREIGN WARS DEPT OF MO VFW POST 39/6 43-104/9/4
01. Members or stockholder classes and rights (Part VI, line 6)
MEMBER AND STOCKHOLER CLASSES AND RIGHTS AS A COMBAT VETERANS ORGANIZATION
02. Member election for additional members (Part VI, line 7a)
ANY MEMBER IN GOOD STANDING MAY BE ELCTED
03. Governing body decisions (Part VI, line 7b)
ALL MEMBERS PRESENT ARE ENTITLED TO A VOTE
04. Governing body meeting documentation (Part VI, line 8a)
GOVERNING BODY MINUTES ARE AVAILABLE UPON REASONABLE REQUEST
05. Committee meeting documentation (Part VI, line 8b)
COMMITTEE MEETING DOCUMENTATION IS AVAILABLE UPON REASONABLE REQUEST
06. Form 990 governing body review (Part VI, line 11)
MEMBERSHIP REVIEWS 990 AFTER FILING DUE TO TIMING ISSUES
07. Conflict of interest policy compliance (Part VI, line 12c)
NO OFFICER MAY HOLD A POSITION WITH A CONFLICTING INTEREST
08. CEO, executive director, top management comp (Part VI, line 15a)
CEO, EXECUTIVE DIRECTOR AND TOP MANAGEMENT COMPENSATION ARE ALL VOTED UPON BY COMMITTEE
09. Other officer or key employee compensation (Part VI, line 15b
OTHER OFFICER OR KEY EMPLOYEE COMPENSATION IS VOTED UPON BY BOARD

Schedule O (Form 990 or 990-EZ) (2016)		Page 2
Name of the organization	Employer identification nu	mber
VETERANS OF FOREIGN WARS DEPT OF MO VFW POST 3976	43-1047974	
	 	
10. Governing documents, etc, available to public (Part VI, line 19)		
ALL DOCUMENTS ARE AVAILABLE UPON REASONABLE NOTICE		
ALL DOCUMENTO AND AVAILABLE OF ON READONABLE NOTTED		_ ·—. –
11. General explanation attachment		
Gaming activity of pull tabs, keno and lottery is run by volunteers.		
Gaming activity of puri cabs, keno and foccery is full by volunceers.		
		
		
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