DLN: 93493195026750 OMB No 1545-0047 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 Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Treasury Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 08-01-2018 , and ending 07-31-2019 C Name of organization D Employer identification number B Check if applicable THE AMERIČAN LEGION □ Address change DEPARTMENT OF OHIO CHARITIES INC ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number ☐ Amended return Number and street (or P O box if mail is not delivered to street address) Room/suite ☐ Application pending (740) 362-7478 City or town, state or province, country, and ZIP or foreign postal code DELAWARE, OH 430158007 G Gross receipts \$ 3,299,191 Name and address of principal officer H(a) Is this a group return for SUZETTE HELLER ☐Yes **☑**No subordinates? 60 BIG RUN ROAD H(b) Are all subordinates DELAWARE, OH 43015 ☐Yes ☐No ıncluded? Tax-exempt status **✓** 501(c)(3) 501(c)() **◄** (insert no) 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► N/A L Year of formation 2003 M State of legal domicile **K** Form of organization lacktriangle Corporation lacktriangle Trust lacktriangle Association lacktriangle Other Summary 1 Briefly describe the organization's mission or most significant activities TO SUPPORT THE CHARITABLE PROGRAMS OF THE AMERICAN LEGION, DEPARTMENT OF OHIO Activities & Governance 2 Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . 40 4 4 Number of independent voting members of the governing body (Part VI, line 1b) . Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 0 **6** Total number of volunteers (estimate if necessary) 6 50 Total unrelated business revenue from Part VIII, column (C), line 12 0 **b** Net unrelated business taxable income from Form 990-T, line 34 Prior Year **Current Year** 8 Contributions and grants (Part VIII, line 1h) . 2,818,802 3,211,145 Ravenua 9 Program service revenue (Part VIII, line 2g) . 0 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 32,492 41,064 2,851,294 3,252,209 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 2,498,430 3,736,714 0 **14** Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 0 26,000 Expenses **16a** Professional fundraising fees (Part IX, column (A), line 11e) . . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶0 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 125,260 41,401 3,804,115 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12 . 227,604 -551,906 Net Assets or Fund Balances Beginning of Current Year **End of Year** 711,726 162,604 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 2,784 22 Net assets or fund balances Subtract line 21 from line 20 . 711,726 159,820 Signature Block 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 Signature of officer Sign Here SUZETTE HELLER ADJUTANT Type or print name and title Print/Type preparer's name Preparer's signature Check | If 2020-07-13 P00099212 Paid self-employed Firm's name REA & ASSOCIATES INC Firm's EIN ► 34-1310124 Preparer Use Only Firm's address ▶ 941 STEUBENVILLE AVE PO BOX 820 Phone no (740) 432-5658 CAMBRIDGE, OH 437250820 ✓ Yes □ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form 990 (2018)

Form	990 (2018)					Page 2
Pa	nt III Statement	t of Program Servic	e Accomplis	hments		
	Check if Sche	edule O contains a respo	onse or note to	any line in this Part III .		🗆
1	Briefly describe the	organization's mission				
<u>TO S</u>	UPPORT THE CHARITA	ABLE PROGRAMS OF TH	E AMERICAN LE	GION, DEPARTMENT OF	ОНІО	
2	_			vices during the year wh		
	the prior Form 990 o	or 990-EZ?				☐ Yes 🗹 No
	•	ese new services on Sch				
3		<u>-</u> .	_	changes in how it condu	cts, any program	
						🗌 Yes 🗹 No
	If "Yes," describe th	ese changes on Schedu	le O			
4	Section 501(c)(3) ai		ons are required	to report the amount of	argest program services, as meast grants and allocations to others, t	
4a	(Code) (Expenses \$	3,738,454	including grants of \$	3,736,714) (Revenue \$	2,104)
	See Additional Data					
						_
4b	(Code) (Expenses \$		including grants of \$) (Revenue \$)
	-					
4c	(Code) (Expenses \$		including grants of \$) (Revenue \$)
	-					
	Othor pre	ueee (December in California				
4d	Other program serv (Expenses \$	ices (Describe in Schedi	ule O) uding grants of	¢) (Revenue \$	1
40	Total program ser		3,738,4	·	, (nevenue 4	
4e	rotar program ser	TICE EXPENSES P	3,730,4			Form 990 (2018)

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Par	tlV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💆	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
	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		No
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 2	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 💆	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🥞	11b		No
	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 3	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 2	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 2	12a		No
	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section $170(b)(1)(A)(II)$? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	_	No
Ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If</i> "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	Yes	
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
Ь	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No

orm	990 (2018)			Page 4
Pa	Checklist of Required Schedules (continued)			
			Yes	No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			

	the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a	1	No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	244		

25a

25b

26

27

28a

28b

28c

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32

33

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35a

35b

36

37

38

1a

1b

Yes

Yes

Yes

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Nο

Nο

Nο

No

Nο

No

Ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	l
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	Ī
25a	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,"	252	Ī

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🕏

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

Statements Regarding Other IRS Filings and Tax Compliance

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .

b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

instructions for applicable filing thresholds, conditions, and exceptions)

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Part V

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess 15 parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N No Is the organization an educational institution subject to the section 4968 excise tax on net investment income? Form **990** (2018)

OIIII	990 (2010)							Page u
Pa	REVI Governance, Management, and Disclosure For each "Yes" response to lines 2 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Scheous Check if Schedule O contains a response or note to any line in this Part VI	dule O	See ınst	ructions		•		lınes 🗸
Se	ection A. Governing Body and Management							
							Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a			40			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O							
b	Enter the number of voting members included in line 1a, above, who are independent	1b			40			
2	Did any officer, director, trustee, or key employee have a family relationship or a busine officer, director, trustee, or key employee?				other	2		No
3	Did the organization delegate control over management duties customarily performed be of officers, directors or trustees, or key employees to a management company or other			dırect sup	pervision	3		No
4	Did the organization make any significant changes to its governing documents since the	prior F	orm 990) was file	d۶.	4		No
5	Did the organization become aware during the year of a significant diversion of the organization	nızatıo	n's asset	:s? .		5		No
_	- · · · · · · · · · · · · · · · · · · ·						 	<u> </u>

7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		No	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
а	The governing body?	8a	Yes		
b	Each committee with authority to act on behalf of the governing body?	8 b	Yes		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No	
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code			
			Yes	No	
10a	Did the organization have local chapters, branches, or affiliates?	10a		No	
b	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?	10b			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No	
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		No	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b			
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c			
13	Did the organization have a written whistleblower policy?	13		No	
14	Did the organization have a written document retention and destruction policy?	14		No	
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?				
а	The organization's CEO, Executive Director, or top management official	15a		No	
b	Other officers or key employees of the organization	15b		No	
	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 with a taxable entity during the year?	16a		No	
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 organization's exempt status with respect to such arrangements?	16b			
	ction C. Disclosure	100			
17	List the States with which a copy of this Form 990 is required to be filed▶				
	он				
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply				
	Own website \square Another's website \checkmark Upon request \square Other (explain in Schedule O)				
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year				
20	State the name, address, and telephone number of the person who possesses the organization's books and records SUZETTE HELLER 60 BIG RUN ROAD DELAWARE, OH 43015 (740) 362-7478				
		F	orm 99	0 (2018	

101111 330 (2	010)										Page /
Part VII	Compensation of Officer and Independent Contra		Truste	es,	Key	En	nploy	ees	, Highest Comp	ensated Employ	ees,
	Check if Schedule O contains a	response or no	te to an	y line	≘ ın t	hıs	Part VI	١.			🗆
Section	A. Officers, Directors, Tru	ıstees, Key E	mploy	ees	, an	d F	lighe	st (Compensated En	nployees	
year .	this table for all persons requir of the organization's current of		·						, ,		•
of compensa	tion Enter -0- in columns (D), (if the organization's current key	E), and (F) if no	compe	nsatı	on w	vas į	paid		- ,,		
• List the who received	organization's five current high direportable compensation (Box and any related organizations	est compensate	d emplo	yees	(oth	ner t	than a	n off	icer, director, truste	e or key employee)	1
• List all o	of the organization's former office compensation from the organization						pensat	ed e	employees who rece	ived more than \$10	0,000
	f the organization's former dir e , more than \$10,000 of reportat										e
compensated	in the following order individual demployees, and former such p	ersons									
☐ Check tl	nis box if neither the organization	n nor any relate	ed organ	nizatio	on co	omp	ensate	d ar	ny current officer, di	rector, or trustee	Т
	(A) Name and Title	(B) Average hours per week (list any hours for related	than o	one bo oth a direct	ox, un off tor/t	t cho unles ficer rust	and a	on	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MI3C)	(W- 2/1099- MISC)	related organizations
See Additiona	al Data Table										

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Part VII Section A.	Officers, Directors	s, Trustees	, Key E	mpl	oye	es,	and I	ligh	est Compensate	d Employees (cor	ntinued)
(A) Name and T	i i i ore	(B) Average hours per week (list any hours for related ganizations elow dotted line)		ne bo	ox, u n off or/tr	che nles icer uste	s pers and a	on	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations

	นธษะ	l Trustee	6 6	npensated		
See Additional Data Table						

1b Sub-Total	art VII , Section	Α		*		26,000	
d Total (add lines 1b and 1c)) who	rece	26,000 eived more than \$	

	(=== (=== == == == = = = = = = = = = =						
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization \triangleright 0						
			Yes	No			
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on						
	line 1a? If "Yes," complete Schedule J for such individual	3		No			
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such						
	individual	4		No			

-	of reportable compensation from the organization ► 0			
-			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual			
	muyada	4		No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes." complete Schedule J for such person	_		NI-

	line 1a? If "Yes," complete Schedule J for such individual	3		No					
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such								
	ındıvıdual	4		No					
5	5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person								
	services rendered to the organization in Test, complete schedule 5 for such person	5		No					
Se	Section B. Independent Contractors								
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.								

	ındıvıdual		4	No				
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization services rendered to the organization? If "Yes," complete Schedule J for such person		5	No				
Se	Section B. Independent Contractors							
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.							
	(B) Description of services	C	(C) ompensation					
	Name and business address	pescription of services		ompensation				

1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year									
	(A) Name and business address	(B) Description of services	(C) Compensation							

2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 0		
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Part '								
	Check If Schedu	ile O contains a	respon	se or note to any	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
	1a Federated campaig	gns	1a			revenue		312 311
unts	b Membership dues	[1 b					
<u>اء</u> ود	c Fundraising events	s [1c					
fts, FA	d Related organization	ons	1d					
i5 i≘	e Government grants (c	contributions)	1e					
ıtions er Sir	f All other contributions and similar amounts rabove		1f	3,211,145				
Contributions, Gifts, Grants and Other Similar Amounts	g Noncash contributi in lines 1a - 1f \$ _	ions included						
S E	h Total. Add lines 1a	a-1f		•	3,211,145			
<u> 2</u>				Business	Code			
۲.	2a 							
Program Service Revenue	b ————		_					
AC.	Č							
₹	u							
ram	f All other program se		_					
%	9Total. Add lines 2a-		_					
	3 Investment income (1	I		<u> </u>
	sımılar amounts) .			•				
	4 Income from investm				-			
	5 Royalties	(ı) Real		(II) Personal	` 			
	6a Gross rents	(I) Real		(II) Personal	-			
	b Less rental expenses							
	c Rental income or				-			
	(loss)							
	d Net rental income of							
	7a Gross amount from sales of assets other than inventory	(ı) Securiti	es	(II) Other	-			
	b Less cost or other basis and sales expenses							
	C Gain or (loss)d Net gain or (loss)				4			
	8a Gross income from f	fundraising ever o	nts [<u> </u>				
Other Revenue	See Part IV, line 18		a					
r c	b Less direct expensec Net income or (loss)		b na even	nts	_			
the	9a Gross income from g	gamıng actıvıtıe	_	100	1			
0	See Part IV, line 19		a l	85,942				
	b Less direct expense	es	Ъ	46,982	_			
	c Net income or (loss)			<u> </u>	」 38,960	,		38,960
:	10a Gross sales of inven returns and allowan		Ţ	•				
	b Less cost of goods	sold	a b		_			
-	c Net income or (loss)		nventor					
F	Miscellaneous 11aOTHER INCOME	s Kevenue		Business Code		2,104		
	OTHER INCOME			50005.	2,104	2,104		
	b							
	C							
	d All other revenue .			.				
	e Total. Add lines 11a			•	2,104			
	12 Total revenue. See	e Instructions	• •	· · · <u>*</u>	3,252,209	2,104		0 38,960
								Form 990 (2018)

Form 990 (2018)				Page 10
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all co	lumns All other orga	nizations must comp	elete column (A)	
Check if Schedule O contains a response or note to any	line in this Part IX .			🗆
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	3,736,714	3,736,714		
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 individuals See Part IV, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	26,000		26,000	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	14,525		14,525	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	10,000		10,000	
12 Advertising and promotion				
13 Office expenses	1,066	1,066		
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel	1,472		1,472	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	674	674		
23 Insurance	359		359	
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a FEES & MISCELLANEOUS	13,305		13,305	
b				
С				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	3,804,115	3,738,454	65,661	0
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)				

Assets

Fund Balance

Assets or 30

Net

27

28

29

31

32

33

34

(B)

End of year

(A)

Beginning of year

4,715

1,572

707,609

300 4

1

2 3

5

6

8

9

10c

11

12

13

14

15

16

17

18

19

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21

22 23

24

25

27 28

29

32

33

34

0 26

0 30

0 31

711,726

711,726

711,726

3,817

711.726

Page **11**

159,461

3,143

162,604

2.784

2.784

0

159,820

159,820

162,604

Form **990** (2018)

1 Cash-non-interest-bearing . 2 Savings and temporary cash investments . . . 3

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

Pledges and grants receivable, net . . Accounts receivable, net . Loans and other receivables from current and former officers, directors,

trustees, key employees, and highest compensated employees Complete Loans and other receivables from other disqualified persons (as defined under

section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L

Notes and loans receivable, net .

Inventories for sale or use .

Prepaid expenses and deferred charges

10a basis Complete Part VI of Schedule D Less accumulated depreciation 10b

Investments—publicly traded securities .

Investments—other securities See Part IV, line 11 .

12

10a Land, buildings, and equipment cost or other 11

Investments-program-related See Part IV, line 11

13 14 Intangible assets 15 Other assets See Part IV, line 11 . .

16 **Total assets.**Add lines 1 through 15 (must equal line 34) . . . 17 Accounts payable and accrued expenses

18 Grants payable . .

19 Deferred revenue . . .

Tax-exempt bond liabilities . . . Escrow or custodial account liability Complete Part IV of Schedule D

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

20 21 22 persons Complete Part II of Schedule L .

Liabilities 23 24

Secured mortgages and notes payable to unrelated third parties and other liabilities not included on lines 17 - 24)

Unsecured notes and loans payable to unrelated third parties Complete Part X of Schedule D

Unrestricted net assets

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Total liabilities. Add lines 17 through 25 .

26

Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 30 through 34.

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 📙 and complete lines 27 through 29, and lines 33 and 34.

Form	990 (2018)				Page 12
Pa	Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			,252,209
2	Total expenses (must equal Part IX, column (A), line 25)	2			,804,115
3	Revenue less expenses Subtract line 2 from line 1	3			-551,906
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			711,726
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			
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			159,820
Pa	TXII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				✓
				Yes	No
1	Accounting method used to prepare the Form 990				
-	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	ı	No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both	on a			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
Ь	Were the organization's financial statements audited by an independent accountant?		2b	ı	No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both	basıs,			
	☐ 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	ı	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O			
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sil Audit Act and OMB Circular A-133?	ngle	3a	ı	No

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Additional Data

Software ID:

Software Version:

Name: THE AMERICAN LEGION

EIN: 02-0692968

DEPARTMENT OF OHIO CHARITIES INC.

Form 990 (2018) Form 990, Part III, Line 4a: DISBURSES GRANTS TO ORGANIZATIONS FOR ACTIVITIES THAT ARE DESCRIBED IN IRC SEC 501(C)(3) INCLUDING CHARITABLE, RELIGIOUS, EDUCATIONAL, SCIENTIFIC, LITERARY, TESTING FOR PUBLIC SAFETY, FOSTERING NATIONAL OR INTERNATIONAL AMATEUR SPORTS COMPETITION, AND PREVENTING CRUELTY TO CHILDREN OR ANIMALS

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other than one box, unless hours per compensation compensation person is both an officer week (list from the compensation from related and a director/trustee) any hours organization organizations from the

and Independent Contractors

DEPARTMENT CHAPLAIN

DEPARTMENT TREASURER

NATIONAL EXEC COMMITTEEMA

......

STANLEY PLEASANT

STEVEN MASOWICK

BOB KLOSTERMEIER

ALTERNATE NECMAN

DAVE PAQUETTE

FIRST DISTRICT

FIRST DISTRICT

JASON RUE

	,							(1)	(11)		
	for related organizations below dotted line)		Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
ROBERT SCHMITT PAST DEPARTMENT COMMANDER	1 00	×		x				0	0	0	
ROGER FRIEND DEPARTMENT COMMANDER	1 00	х		х				0	0	0	
JEAN WILSON FIRST VICE COMMANDER	1 00	×		х				0	0	0	
RICHARD STALEY	1 00										

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DEPARTMENT COMMANDER		, x	×		0	
JEAN WILSON	1 00	×	х		0	
FIRST VICE COMMANDER			.,		,	
RICHARD STALEY	1 00	V			0	
SECOND VICE COMMANDER		_ ^	^		0	
FATHER LOUIS SCHMIT	1 00					

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(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation hours per compensation amount of other person is both an officer from the compensation week (list from related any hours and a director/trustee) organization organizations from the

and Independent Contractors

FOURTH DISTRICT

GREG ELSBERND

FOURTH DISTRICT

DAVID LOFY

FIFTH DISTRICT

LENNY WHITE

FIFTH DISTRICT

STEVEN THORP

SIXTH DISTRICT

SIXTH DISTRICT

ROY TERRY

	any nours							organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
DAN METZGER SECOND DISTRICT	1 00	×						0	0	0
WALTER MEHARG SECOND DISTRICT	1 00	×						0	0	0
JOE LAW THIRD DISTRICT	1 00	x						0	0	0
DAVID JONES	1 00	X						0	0	0

SECOND DISTRICT							
JOE LAW	1 00				0	0	
THIRD DISTRICT						J	
DAVID JONES	1 00				0	O	
THIRD DISTRICT		_ ^				0	Ű
JAMES JENNINGS	1 00						I

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(A) (D) (B) (C) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless compensation amount of other hours per compensation person is both an officer week (list from the from related compensation

	any hours)	organization	organizations	from the	
	for related organizations below dotted line)		Institutional Trustee	Officer	key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
KENNETH CRAWFORD SEVENTH DISTRICT	1 00	X						0	0	0	
ROGER WARD SEVENTH DISTRICT	1 00	×						0	0	0	
RICHARD DONOVAN EIGHTH DISTRICT	1 00	x						0	0	0	
FRED JAMES	1 00	×						0	0	0	

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EIGHTH DISTRICT
FRED JAMES
EIGHTH DISTRICT
RICHARD DONOVAN
SEVENTH DISTRICT

FRANK ADLEY

JOSE RIVERA

GARY ICKES

NINTH DISTRICT

NINTH DISTRICT

TENTH DISTRICT

TENTH DISTRICT

RUSSELL PETERS

ELEVENTH DISTRICT

ANDREW MATHENY

ELEVENTH DISTRICT

BRADLEY TEIS

and Independent Contractors

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation hours per compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee)

	any hours	any hours and a director/trustee)						organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
RICK GARREN TWELFTH DISTRICT	1 00	x						0	0	0	
GEORGE MUSSI TWELFTH DISTRICT	1 00	×						0	0	0	
JOSEPH RULAND THIRTEENTH DISTRICT	1 00	х						0	0	0	
JOHN MURPHY THIRTEENTH DISTRICT	1 00	×						0	0	0	
CHRISTOPHER HAWKINS JR FOURTEENTH DISTRICT	1 00	×						0	0	0	

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JOHN MORPHT
THIRTEENTH DISTRICT
CHRISTOPHER HAWKINS JR
FOURTEENTH DISTRICT
ROBERT BURGESS

FOURTEENTH DISTRICT

DEPARTMENT ADJUTANT

......

GLENN HICKMAN

ARTHUR LUSTIG

JAMES MORRIS

SUZETTE M HELLER

DEPARTMENT ADJUTANT

TRUSTEE

TRUSTEE

and Independent Contractors

and Independent Contractors (A)

JERRY WILSON

TRUSTEE

Name and Title

hours per week (list any hours for related organizations below dotted line)
 1 00

(B)

Average

than one box, unless person is both an officer and a director/trustee) Institutio employee

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

Position (do not check more Reportable compensation from the organization (W-2/1099-MISC)

(D)

Reportable compensation from related organizations (W- 2/1099-MISC)

(E)

amount of other compensation from the organization and related organizations

(F)

Estimated

eme	GKA	APHIC prii	1t - DO NOT PR	OCESS	As Filed Data -			DLN: 9	3493195026750			
SCH	łED	ULE A	Pi	uhlic (Charity Statu	s and Pul	nlic Sunn	ort	OMB No 1545-0047			
	n 990			e if the or	ganization is a sect 4947(a)(1) nonexe	ion 501(c)(3)	organization o	I	2018			
JUE	L)				► Attach to Form	990 or Form 99	0-EZ.		Open to Public			
		the Treasury		Go to 1	www.irs.gov/Form!	990 for the late	est information	•	Inspection			
ame	of th	ne organiza N LEGION	tion					Employer identific	ation number			
		OF OHIO CHA						02-0692968				
	tΙ				is (All organization			See instructions.				
	ganız		•		it is (For lines 1 thro	-		/ A \ / ' \				
1	Ш			,	sociation of churches			(A)(I).				
2		A school de	scribed in section	170(b)(1	l)(A)(ii). (Attach Sch	nedule E (Form 9	90 or 990-EZ))					
3		A hospital o	or a cooperative ho	spital serv	ice organization desci	ribed in section	170(b)(1)(A)(iii).				
4			medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) . Enter the hospital's ame, city, and state									
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170 (b)(1)(A)(iv). (Complete Part II)										
6		A federal, s	tate, or local gove	rnment or	governmental unit de	scribed in sectio	on 170(b)(1)(<i>f</i>	()(v).				
7		section 17	'0(b)(1)(A)(vi). ((Complete	Part II)			init or from the gener	al public described in			
8		A communi	ty trust described	ın section	170(b)(1)(A)(vi)	(Complete Part I	I)					
9					scribed in 170(b)(1) e instructions Enter			with a land-grant coll college or university	ege or university or a			
0	✓	from activit	ies related to its é	xempt fund ated busine	ctions—subject to cer ess taxable income (le	taın exceptions,	and (2) no more	ns, membership fees, than 331/3% of its su sses acquired by the c	ipport from gross			
1	П	•	-		exclusively to test fo	r public safety S	ee section 509	(a)(4).				
2		more public	ly supported organ	nizations d	escribed in section 5	09(a)(1) or sec	ction 509(a)(2	s of, or to carry out th				
a	\Box				the type of supporting	-	•	s 12e, 12f, and 12g zation(s), typically by	giving the supported			
	Ц	organizatio		regularly a				of the supporting orga				
b		manageme		g organiza	tion vested in the sar			organization(s), by ha ge the supported orga	_			
c		Type III f	unctionally integ	r ated. A s				nd functionally integra	ted with, its			
d		functionally	integrated The o	rganizatıor		fy a distribution	requirement and	th its supported orgar an attentiveness req				
e		Check this	box if the organiza	tion receiv	ed a written determir	ation from the I		pe I, Type II, Type II	I functionally			
f	Ento-		or Type III non-fu of supported orga		integrated supporting	organization						
g					pported organization(c)						
(i) Na		ame of supp organization	orted (i	i) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))		anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)			
						Yes	No					
otal												

instructions

rage	_
170	

oport Schedule for Organizations Described in Sections 170(b)(1)(A)(iv), 170(b)(1)(A)(vi), and 170
(1)(A)(ix)
mplete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part
If the organization fails to qualify under the tests listed below, please complete Part III.)

	III. If the organization fai						iy under Part
_	Section A. Public Support	iis to quality ut	ider the tests his	ted below, pied.	se complete rai	C 111.)	
	Calendar year		I	T	T		
	(or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grant ")						
2	Tax revenues levied for the						
	organization's benefit and either paid						
_	to or expended on its behalf The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by						
5	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						
6	Public support. Subtract line 5 from						
	line 4						
S	Section B. Total Support						
	Calendar year	(a)2014	(b) 2015	(c)2016	(d)2017	(e)2018	(f)Total
	(or fiscal year beginning in) ▶	(-,	(=,====	(3,2323	(-)	(0)2020	(1).010.
7							
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and						
_	income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the business is regularly carried on						
10							
10	loss from the sale of capital assets						
	(Explain in Part VI)						
11	Total support. Add lines 7 through						
	10						
12	Gross receipts from related activities, e	tc (see instruction	ons)			12	
13	First five years. If the Form 990 is for	the organization	s first, second, th	urd, fourth, or fifth	n tax vear as a sec	tion 501(c)(3) org	anization.
	check this box and stop here	=				· · · · · · <u>-</u>	_
_	section C. Computation of Public						_
	Public support percentage for 2018 (line			column (f))			
				column (1))		14	
	Public support percentage for 2017 Sch					15	
16 a	33 1/3% support test—2018. If the				ne 14 is 33 1/3% o	r more, check this	box
	and stop here. The organization qualif						··►□
b	33 1/3% support test—2017. If the	organization did	not check a box o	on line 13 or 16a,	and line 15 is 33 i	1/3% or more, chec	k this
	box and stop here. The organization	qualifies as a pub	olicly supported or	ganızatıon			▶□
17 a	10%-facts-and-circumstances test-	–2018. If the or	ganization did not	check a box on lir	ne 13, 16a, or 16b	, and line 14	
	is 10% or more, and if the organization						
	in Part VI how the organization meets t	he "facts-and-cir	cumstances" test	The organization	qualifies as a publ	icly supported	
	organization						▶ □
Į.	10%-facts-and-circumstances test	-2017. If the o	rganization did no	ticheck a box on l	ine 13, 16a, 16h	or 17a, and line	
0	15 is 10% or more, and if the organiza						
	Explain in Part VI how the organization						
	supported organization			5-	4	,	▶□
10	Private foundation. If the organization	n did not check :	hov on line 12 1	6a 16h 17a or 1	7h check this has	and see	F L
TΩ	Trivate roundation, if the organization	ii ala not check e	4 POV OIL HIE TO, T	ou, 100, 1/a, 01 1	. , D, CHECK HIIS DU)	, unu see	

F	(Complete only if you of					to qualify unde	er Part II. If
	the organization fails to	o qualify under t	he tests listed b	elow, please co	mplete Part II.)		
Se	ection A. Public Support						
	Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	·						
	membership fees received (Do not	2,743,344	2,761,107	2,903,826	2,818,805	2,624,647	13,851,729
_	include any "unusual grants ")						
2	Gross receipts from admissions, merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that	221,382	180,167	202,889	35,113	674,544	1,314,095
	are not an unrelated trade or business under section 513	221,362	180,107	202,869	33,113	074,344	1,314,093
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
9	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5	2,964,726	2,941,274	3,106,715	2,853,918	3,299,191	15,165,824
7a	Amounts included on lines 1, 2, and						C
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified						
	persons that exceed the greater of						C
	\$5,000 or 1% of the amount on line						
	13 for the year						
	Add lines 7a and 7b						C
8	Public support. (Subtract line 7c from line 6)						15,165,824
S	ection B. Total Support						
	Calendar year						
	(or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9		2,964,726	2,941,274	3,106,715	2,853,918	3,299,191	15,165,824
.0a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
	and income from similar sources						
Ь	Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30,						
_	1975 Add lines 10a and 10b		+				
с 11	Net income from unrelated business		+				
	activities not included in line 10b,						
	whether or not the business is						
	regularly carried on						
12	- I						
	or loss from the sale of capital assets (Explain in Part VI)						
13		2,964,726	2,941,274	2 106 715	2,853,918	3,299,191	15,165,824
	11, and 12)	· · ·	, · · L	3,106,715			
14	First five years. If the Form 990 is for	or the organization'	's fırst, second, th	ırd, fourth, or fıfth	tax year as a sec	tion 501(c)(3) or	ganızatıon,
	check this box and stop here						▶⊔
Se	ection C. Computation of Public						
15	Public support percentage for 2018 (III			column (f))		15	100 000 %
16	Public support percentage from 2017 :	Schedule A, Part II	I, line 15			16	100 000 %
Se	ection D. Computation of Invest						
۱7	Investment income percentage for 20	18 (line 10c, colun	nn (f) divided by l	ne 13, column (f))	17	0 %
18	Investment income percentage from 2					18	
19a	331/3% support tests—2018. If the	organization did n	ot check the box o	on line 14, and line	e 15 is more than	33 1/3%, and line	17 is not
		stan baya The av	anniantion avalific	se ac a publicly cur	ported organizati	00	▶ ☑
	more than 33 1/3%, check this box and	stop nere. The or	ganızatıon qualine	is as a publicly sup	oporteu organizati	UII	

not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

ightharpoons

Schedule A (Form 990 or 990-EZ) 2018 Page 4 Part IV Supporting Organizations (Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V) Section A. All Supporting Organizations

Yes No Are all of the organization's supported organizations listed by name in the organization's governing documents? 1 If "No," describe in Part VI how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain 1 Did the organization have any supported organization that does not have an IRS determination of status under section 509

(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2)2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below

3а Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the

determination 3b Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use 3с Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you

checked 12a or 12b in Part I, answer (b) and (c) below 4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or 4b supervised by or in connection with its supported organizations

Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported

organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by 5a

amendment to the organizing document) Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

organization's organizing document? Substitutions only. Was the substitution the result of an event beyond the organization's control?

5b 5c Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

than (1) its supported organizations. (ii) individuals that are part of the charitable class benefited by one or more of its

6

7

8

answer line 10b below

the organization had excess business holdings)

supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in

section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

7 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

complete Part I of Schedule L (Form 990 or 990-EZ)

8 Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI.

9a Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

organization had an interest? If "Yes," provide detail in Part VI.

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

9b which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

9с

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

10a certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

10a

10b

Schedule A (Form 990 or 990-EZ) 2018

>cn	edule A (Form 990 or 990-E2) 2018		F	age 5
Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
	governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
C	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11 c		
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting	2		
	organization	-		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of			
	each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
_	<u> </u>			
	ection D. All Type III Supporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		103	-140
		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)			
		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations		l	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction)	ions)		
	The organization satisfied the Activities Test Complete line 2 below	•		
	b			
	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see	instru	ctions)	
2	Activities Test Answer (a) and (b) below.	į	Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement			
,		2b		
3	Parent of Supported Organizations Answer (a) and (b) below.	_		
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard	3h		

Page 6

1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E							
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)				
1	Net short-term capital gain	1						
2	Recoveries of prior-year distributions	2						
3	Other gross income (see instructions)	3						
4	Add lines 1 through 3	4						
5	Depreciation and depletion	5						
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6						
7	Other expenses (see instructions)	7						
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8						
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)				
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1						
a	Average monthly value of securities	1a						
b	Average monthly cash balances	1 b						
С	Fair market value of other non-exempt-use assets	1c						
d	Total (add lines 1a, 1b, and 1c)	1d						
e	Discount claimed for blockage or other factors (explain in detail in Part VI)							
2	Acquisition indebtedness applicable to non-exempt use assets	2						
3	Subtract line 2 from line 1d	3						
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4						
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5						
6	Multiply line 5 by 035	6						
7	Recoveries of prior-year distributions	7						
8	Minimum Asset Amount (add line 7 to line 6)	8						
	Section C - Distributable Amount			Current Year				
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1						
2	Enter 85% of line 1	2						
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3						
				1				

4

Schedule A (Form 990 or 990-F7) 2018

Enter greater of line 2 or line 3

Schedule A (Form 990 or 990-EZ) (2018)

5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI

Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.
 Excess distributions carryover to 2019. Add lines.

a Excess from 2014. **b** Excess from 2015. **c** Excess from 2016.

See instructions

d Excess from 2017.e Excess from 2018.

3_j and 4c

8 Breakdown of line 7

Additional Data

Software ID:

Software Version: EIN: 02-0692968

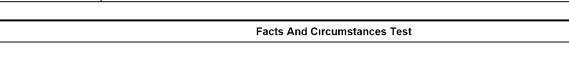
Name: THE AMERICAN LEGION

DEPARTMENT OF OHIO CHARITIES INC

Page 8

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)



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(Form 990)

Department of the Treasury

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.

DLN: 93493195026750 OMB No 1545-0047

> Open to Public Inspection

▶ Go to www.irs.gov/Form990 for the latest information. Internal Revenue Service Name of the organization **Employer identification number** THE AMERICAN LEGION DEPARTMENT OF OHIO CHARITIES INC 02-0692968 Part I 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 1 Total number at end of year 2 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 funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? 🗌 Yes 🗌 No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 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 an 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 Year Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, 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 tax year 🟲 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes 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) 8 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 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

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

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

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

Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

Assets included in Form 990, Part X

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 52283D Schedule D (Form 990) 2018

Par	t III	Organizations Ma	aintaining Col	lections of A	rt, Histor	ical T	reas	ures, oi	r Other	Similar A	Assets (continued,)
3		the organization's acquiched (check all that apply)	uisition, accession	n, and other rec	ords, check	any of	the fo	ollowing t	hat are a	significant	t use of it	s collection	ı
а		Public exhibition			d		Loar	or excha	ange prog	grams			
b		Scholarly research			е		Othe	er					
С		Preservation for future	e generations										
4	Provid Part >	de a description of the o	organızatıon's col	lections and ex	olain how th	ney furt	her th	ie organiz	zation's ex	xempt pur	oose in		
5		g the year, did the orga s to be sold to raise fun								nılar	□ Y	es 🗆	No
Pa	rt IV	Escrow and Custon Complete if the organic X, line 21.			n Form 99	0, Part	: IV,	ine 9, o	r reporte	ed an amo			, Part
1a		e organization an agent led on Form 990, Part)		an or other inte	rmediary fo	r contri	bution	ns or othe	er assets	not	□ Y	es 🗆	No
ь	If "Y∈	es," explain the arrange	ement in Part XIII	and complete t	he followin	g table					Amount		
c		ning balance		,		_			1c				_
d	Addıtı	ions during the year							1 d				
е	Dıstrı	butions during the year	r						1e				
f	Endın	g balance							1f				
2a	Did th	ne organization include	an amount on Fo	rm 990, Part X,	line 21, fo	r escrov	v or cı	ustodial a	ccount lia	ability?	. 🗆 Y	es 🗆	— No
b	If "Ye	s," explain the arrange	ment in Part XIII	Check here if	the explana	tion ha	s beer	n provide	d in Part :	XIII	. \square		
Pa	rt V	Endowment Fund	ds. Complete ıf	the organizat	ion answe	ered "Y	es" o	n Form	990, Pai	rt IV, lıne	10.		
				(a)Current ye	ar (b)	Prior yea	ır	(c)Two y	ears back	(d)Three y	ears back	(e)Four ye	ars back
	-	ing of year balance .					_						
		outions											
		estment earnings, gain											
		or scholarships											
	and pro	expenditures for facilities ograms	es										
		strative expenses .											
g		year balance											
2 a		de the estimated percei d designated or quasi-ei		ent year end ba	lance (line :	1g, colu	ımn (a	a)) held a	S				
b	Perm	anent endowment 🕨											
c	Temp	orarily restricted endov	wment 🟲										
	The p	ercentages on lines 2a,	, 2b, and 2c shou	ld equal 100%									
3а	organ	nere endowment funds nization by		sion of the orga	anization th	at are h	eld ar	nd admini	istered fo	r the	-	Yes	No
		nrelated organizations					٠.				_	a(i) a(ii)	+
b		elated organizations . s" on 3a(ii), are the rel		s listed as requ	ired on Sch	edule R	٠.					3b	
4	Descr	ibe in Part XIII the inte	ended uses of the	organization's	endowment	funds						•	
Pa	rt VI	Land, Buildings,				0 0-			C	000 5		10	
	Descri	Complete if the org	ganization answ (a) Cost or oth (investme	er basis (b	Cost or othe					rm 990, F depreciation		ne 10. (d) Book va	lue
12	Land												
		gs											
		old improvements									+		
		nent									+		
							4,715	;		1,572	2		3,143
		lines 1a through 1e (Co	L olumn (d) must ed	ual Form 990,	Part X, colu	ımn (B)				>			3,143

	Saa Form 990 Part V lina 17					
	See Form 990, Part X, line 12. (a) Description of security or category (including name of security)		(b) Book value		(c) Method of or end-of-yea	valuation r market value
	al derivatives					
	Tied equity interests	· · ·				
(A)						
[B)						
(C)						
(D)						
(E)						
F)						
(G)						
(H)						
Fotal. (Colum	on (b) must equal Form 990, Part X, col (B) line 12)	•				
Part VIII	Investments—Program Related. Complete if the organization answered 'Yes' on I	Form 990. P	art IV. line	11c. See Fo	rm 990. Part	X. line 13.
	(a) Description of investment		ok value		(c) Method of	
(1)				Cost	or end-or-year	market value
(2)						
(3)						
4)						
[5)						
6)						
(7)						
(8)						
(8)						
(9)	nn (b) must equal Form 990, Part X, col (B) line 13)	•				
(9) Fotal. (Colum	on (b) must equal Form 990, Part X, col (B) line 13) Other Assets. Complete if the organization answered		n 990, Part	IV, line 11d S	ee Form 990,	
9) Fotal. (Column Part IX			n 990, Part	IV, line 11d Si	ee Form 990,	Part X, line 15 (b) Book value
9) Fotal. (Column Part IX 1)	Other Assets. Complete if the organization answered		n 990, Part	IV, line 11d S	ee Form 990,	
Fotal. (Column Part IX 1)	Other Assets. Complete if the organization answered		n 990, Part	IV, line 11d S	ee Form 990,	
Fotal. (Column Part IX 1) (2) (3)	Other Assets. Complete if the organization answered		n 990, Part	IV, line 11d S	ee Form 990,	
(9) Fotal. (Column Part IX 1) 2) 3)	Other Assets. Complete if the organization answered		n 990, Part	IV, line 11d Si	ee Form 990,	
(9) Fotal. (Column Part IX 1) 2) 3) 4)	Other Assets. Complete if the organization answered		n 990, Part	IV, line 11d S	ee Form 990,	
(9) Fotal. (Column Part IX 1) 2) 3) 4) 5)	Other Assets. Complete if the organization answered		n 990, Part	IV, line 11d S	ee Form 990,	
Fotal. (Column Part IX 1) 1) 2) 3) 4) 5) 6) 7)	Other Assets. Complete if the organization answered		n 990, Part	IV, line 11d S	ee Form 990,	
9) Fotal. (Column Part IX 1) 2) 3) 4) 5) 6) 7)	Other Assets. Complete if the organization answered		n 990, Part	IV, line 11d S	ee Form 990,	
9) Total. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8)	Other Assets. Complete if the organization answered (a) Description		n 990, Part	IV, line 11d S		
9) Total. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8)	Other Assets. Complete if the organization answered (a) Description (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization asserted to the organization as the complete in the organization and the complete in the complete in the organization and the complete in the comple	n				(b) Book value
9) Fotal. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) Fotal. (Column Part X	Other Assets. Complete if the organization answered (a) Description (b) must equal Form 990, Part X, col (B) line 15	n		 n 990, Part I\		(b) Book value
9) Total. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) Total. (Column Part X	Other Assets. Complete if the organization answered (a) Description Imm (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization at See Form 990, Part X, line 25.	n	es' on Forn	 n 990, Part I\		(b) Book value
9) Total. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) Fotal. (Column Part X 1) Federal (1)	Other Assets. Complete if the organization answered (a) Description Imm (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization at See Form 990, Part X, line 25. (a) Description of liability	n	es' on Forn	 n 990, Part I\		(b) Book value
9) Total. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) Fotal. (Column Part X 1) Federal (1)	Other Assets. Complete if the organization answered (a) Description Imm (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization at See Form 990, Part X, line 25. (a) Description of liability	n	es' on Forn	 n 990, Part I\		(b) Book value
9) Total. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) Total. (Column Part X 1) Federal (1) 2) 3)	Other Assets. Complete if the organization answered (a) Description Imm (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization at See Form 990, Part X, line 25. (a) Description of liability	n	es' on Forn	 n 990, Part I\		(b) Book value
9) Fotal. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) Fotal. (Column Part X 1) Federal (1) 2) 3) 4)	Other Assets. Complete if the organization answered (a) Description Imm (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization at See Form 990, Part X, line 25. (a) Description of liability	n	es' on Forn	 n 990, Part I\		(b) Book value
9) Total. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) Total. (Column Part X 1) Federal (1) 2) 3) 4)	Other Assets. Complete if the organization answered (a) Description Imm (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization at See Form 990, Part X, line 25. (a) Description of liability	n	es' on Forn	 n 990, Part I\		(b) Book value
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1

Schedule D (Form 990) 2018

Total revenue, gains, and other support per audited financial statements . . .

Amounts included on line 1 but not on Form 990. Part VIII. line 12

1

Schedule D (Form 990) 2018

Page 4

2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains (losses) on investments 2a			
b	Donated services and use of facilities			
С	Recoveries of prior year grants			
d	Other (Describe in Part XIII) 2d			
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a			
b	Other (Describe in Part XIII)		1	
c	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	
Par	Reconciliation of Expenses per Audited Financial Statements Wi Complete if the organization answered 'Yes' on Form 990, Part IV, line		Returi	n.
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			
а	Donated services and use of facilities 2a			
b	Prior year adjustments			
c	Other losses			
d	Other (Describe in Part XIII) 2d			
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a			
b	Other (Describe in Part XIII) 4b			
С	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	
Pai	t XIII Supplemental Information			
Prov	vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any addit	lines 1b and 2b, Part ional information	V, line	4, Part X, line 2, Part
	Return Reference Explanation			

Schedule D (Fo	orm 990) 2018	Page 5	
Part XIII	Supplemental Info	rmation <i>(continued)</i>	
Ret	urn Reference	Explanation	
			Schedule D (Form 990) 2018

DLN: 93493195026750 OMB No 1545-0047 SCHEDULE G **Supplemental Information Regarding** (Form 990 or 990-EZ) **Fundraising or Gaming Activities** 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 Open to Public Department of the Treasury Attach to Form 990 or Form 990-EZ. Inspection Internal Revenue Service Go to www irs gov/Form990 for instructions and the latest information **Employer identification number** Name of the organization THE AMERICAN LEGION DEPARTMENT OF OHIO CHARITIES INC 02-0692968 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations e Solicitation of non-government grants Internet and email solicitations Solicitation of government grants Phone solicitations ☐ Special fundraising events ☐ In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of individual (ii) Activity (iii) Did (iv) Gross receipts (v) Amount paid to (vi) Amount paid to or entity (fundraiser) fundraiser have from activity (or retained by) (or retained by) custody or fundraiser listed in organization control of col (i) contributions? Yes No

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

Total

	G (Form 9	90 or 990-EZ) 2018					Page
L Doe	es the orga	anization conduct gamii	ng activities with nonmembers	5?		☐ Yes	✓ No
		ation a grantor, benefi minister charitable gam		member of a partnership or other entity		□Yes	
Indi	cate the p	ercentage of gaming a	ctivity conducted in				
The	e organizat	ion's facility			13a		0,
A n o	outside fac	cility			13b		100 000 °
Ente	er the nam	ne and address of the p	erson who prepares the organ	nization's gaming/special events books an	d records		
Nan	me ▶	TARA HENDERSON					
Add	dress 🕨	60 BIG RUN ROAD DELAWARE, OH 430	15				
	es the orga enue?	anization have a contra		om the organization receives gaming		✓ Yes	
b If "Y	Yes," entei		g revenue received by the org	anization ▶ \$ an	d the	⊻ Yes	⊔ No
		r name and address of					
Nan	me ▶ "						
Add	dress 🕨	PO BOX 1200 HOLLIS, NH 03049					
Gam	ming mana	ager information					
Nan	me ▶ "						
Gam	mıng mana	ager compensation > \$					
Des	scription of	f services provided >					
	Director/	officer	☐ Employee	☐ Independent contractor			
Man	ndatory dis	stributions					
	_	ration required under st te gaming license?	ate law to make charitable di	stributions from the gaming proceeds to		☐Yes	√ No
			quired under state law distribu	ited to other exempt organizations or spe	nt	∟ res	₩ INO
• Ente			tivities during the tax year	· •			
		<u>.</u>	tion Duamed the amen	ions required by Part I, line 2b, colu	mne (III) s	and (v/): a	nd Dart
				licable. Also provide any additional ir			

DLN: 93493195026750 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. Schedule I OMB No 1545-0047 **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public ▶ Attach to Form 990. Department of the Inspection ▶ Go to www.irs.gov/Form990 for the latest information. Treasury Internal Revenue Service Name of the organization Employer identification number THE AMERICAN LEGION 02-0692968 DEPARTMENT OF OHIO CHARITIES INC Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 1 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) organization (book, FMV, appraisal, noncash assistance or assistance grant cash or government assistance other) (1) See Additional Data (4)(5)(6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2018

Schedule I (Form 990) 2018						Page 2
		Domestic Individuonal space is needed	als. Complete if the org	anization answered "Yes	on Form 990, Part IV, line 22	
(a) Type of grant or	assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
Part IV Suppleme	ental Information	on. Provide the inf	ormation required in	Part I, line 2; Part III	, column (b); and any other a	dditional information.
Return Reference	Explanation	on				
PART I, LINE 2	PURPOSE 7	THE ORGANIZATION .	ALSO MAKES CONTRIBU	JTIONS TO THE AMERICA	AN LEGION POSTS IN THE STATE C	ATIONS FOR USE IN FUNDING THEIR EXEMPT OF OHIO THE ORGANIZATION MONITORS THE USE

Additional Data

PO BOX 1055

60 BIG RUN ROAD DELAWARE, OH 43015

(SCH R)

INDIANAPOLIS, IN 46206 THE AMERICAN LEGION

DEPARTMENT OF OHIO INC.

Software ID: Software Version:

EIN: 02-0692968 Name: THE AMERICAN LEGION

23,164

DEPARTMENT OF OHIO CHARITIES INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

or government	п аррпсавіе	grant	assistance	other)
AMERICAN LEGION CHILD WELFARE FOUNDATION INC	501(C)(3)	10,000		

of non-	(f) Method of valuat
1	(book, FMV, apprais
nce	other)

(q) Description of non-cash assistance

(h) Purpose of grant or assistance

TO FURTHER THE EXEMPT PURPOSE OF

TO FURTHER THE

THE ORGANIZATION

EXEMPT PURPOSE OF

THE ORGANIZATION

if applicable organization arant

ation --1

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount

501(C)(19)

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 15.000 TO FURTHER THE AMERICAN LEGION BASEBALL 60 BIG RUN ROAD EXEMPT PURPOSE OF THE ORGANIZATION 25.000 TO FURTHER THE

DELAWARE, OH 43015

AMERICAN LEGION

AMERICANISM &
GOVERNMENT

60 BIG RUN ROAD

THE ORGANIZATION

25,000

TO FURTHER THE
EXEMPT PURPOSE OF
THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

DELAWARE, OH 43015

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance AMERICAN LEGION 15,000 TO FURTHER THE F PURPOSE OF RGANIZATION

EXEMPT PURPOSE OF

THE ORGANIZATION

ORATORICAL 60 BIG RUN ROAD DELAWARE, OH 43105				EXEMPT PURPOSE OF THE ORGANIZATION
AMERICAN LEGION BUCKEYE		10.000		TO FURTHER THE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

BOYS STATE

60 BIG RUN ROAD

DELAWARE, OH 43015

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501C3 10.000 TO FURTHER THE AMERICAN LEGION SCHOLARSHIP EXEMPT PURPOSE OF THE ORGANIZATION

EXEMPT PURPOSE OF

THE ORGANIZATION

5475 LEE RD INDIANAPOLIS, IN 46206 5.000 TO FURTHER THE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

BUCKEYE AMERICAN LEGION COLLEGE

DELAWARE, OH 43015

60 BIG RUN ROAD

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501C3 10.000 TO FURTHER THE AMERICAN LEGION NATIONAL EMERGENCY FUND EXEMPT PURPOSE OF THE ORGANIZATION

EXEMPT PURPOSE OF

THE ORGANIZATION

PO BOX 1954 INDIANAPOLIS, IN 46206 AMERICAN LEGION FAMILY 25.000 TO FURTHER THE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SUPPORT NETWORK

INDIANAPOLIS, IN 46206

PO BOX 1055

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 15.000 EDUCATION. BUCKEYE CRUISE FOR CANCER FUND PHILANTHROPIC AND 4890 BLAZER MEMORIAL OTHER

PARKWAY CONTRIBUTIONS FOR DUBLIN, OH 43017 501(C)(3) EXEMPT PURPOS CITY OF HARRISON 10,000 EDUCATION,

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

MAYORS FUND 300 GEORGE PHILANTHROPIC AND OTHER HARRISON, OH 45030 CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 7.500 EDUCATION. COLUMBUS SYMPHONY 55 E STATE ST PHILANTHROPIC AND COLUMBUS, OH 43215 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

PURPOS 30,000 CSW FARM FOUNDATION 501(C)(3) 8651 RIEBEL RD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

EDUCATION, PHILANTHROPIC AND GALLOWAY, OH 43119 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 10.000 EDUCATION. HOME HISTORY FUND 1209 WESTWOOD AVE PHILANTHROPIC AND

501(C)(3) EXEMPT

PURPOS

COLUMBUS, OH 43212 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT PURPOS NATIONAL VETS MEMORIAL 10,000 EDUCATION,

MUSEUM PHILANTHROPIC AND 300 W BROAD ST OTHER COLUMBUS, OH 43215 CONTRIBUTIONS FOR

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 29,779 EDUCATION. AMVETS POST #2256 818 TARLTON ROAD PHILANTHROPIC AND CIRCLEVILLE, OH 43113 OTHER

CONTRIBUTIONS FOR 501(C)(3) EXEMPT PURPOS AMERICAN LEGION POST #3 501(C)(19) 40.137 EDUCATION, 120 W FRONT STREET PHILANTHROPIC AND

FINDLAY, OH 45840 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 6,150 EDUCATION. AMERICAN LEGION POST #6 1913 E PLEASANT ST PHILANTHROPIC AND SPRINGFIELD, OH 45505 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

5.666 AMERICAN LEGION POST #7 501(C)(19) 29919 EUCLID AVE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PURPOS EDUCATION, PHILANTHROPIC AND WICKLIFFE, OH 44092 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 43,681 EDUCATION. AMERICAN LEGION POST #8 518 SOUTH MAIN ST PHILANTHROPIC AND WELLINGTON, OH 44090 OTHER CONTRIBUTIONS FOR

501(C)(3) EXEMPT AMERICAN LEGION POST #11 501(C)(19) 32.828 279 CANAL ST

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PURPOS EDUCATION, PHILANTHROPIC AND LANCASTER, OH 43130 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 47,329 EDUCATION. AMERICAN LEGION POST #12 393 OHIO ST PHILANTHROPIC AND ELYRIA, OH 44035 OTHER CONTRIBUTIONS FOR

501(C)(3) EXEMPT PURPOS AMERICAN LEGION POST #23 501(C)(19) 28.335 705 COURT 186

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

EDUCATION, PHILANTHROPIC AND PORTSMOUTH, OH 45662 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 29,187 EDUCATION. AMERICAN LEGION POST #25 1240 US RT 22 NW PHILANTHROPIC AND OTHER

WASHINGTON CH, OH 43160

WASHINGTON CH, OH 43160

OTHER
CONTRIBUTIONS FOR
501(C)(3) EXEMPT
PURPOS

AMERICAN LEGION POST #29

501(C)(19)

85,957

EDUCATION,

AMERICAN LEGION POST #29
27 S THIRD ST
ZANESVILLE, OH 43701

Soli(C)(3) EXEMPT PURPOS

EDUCATION, PHILANTHROPIC AND OTHER CONTRIBUTIONS FOR Soli(C)(3) EXEMPT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 5,400 EDUCATION. AMERICAN LEGION POST #34 336 E SPRING ST PHILANTHROPIC AND CADIZ, OH 43907 OTHER CONTRIBUTIONS FOR

501(C)(3) EXEMPT PURPOS 13.572 AMERICAN LEGION POST #38 501(C)(19) 221 S ZANE HWY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

EDUCATION, PHILANTHROPIC AND MARTINS FERRY, OH 43935 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 13,397 EDUCATION. AMERICAN LEGION POST #43 622 SOUTH MARKET STREET PHILANTHROPIC AND OTHER TROY, OH 45373 CONTRIBUTIONS FOR 501(C)(3) EXEMPT

PURPOS AMERICAN LEGION POST #49 501(C)(19) 51.918 140 E LOCUST ST

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

EDUCATION, PHILANTHROPIC AND WILMINGTON, OH 45177 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 14,203 EDUCATION. AMERICAN LEGION POST #52 3600 GUERNSEY ST PHILANTHROPIC AND BELLAIRE, OH 43906 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

PURPOS AMERICAN LEGION POST #58 501(C)(19) 13.446 EDUCATION, 107 E GAY ST PHILANTHROPIC AND SOMERSET, OH 43783 OTHER

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 13,523 EDUCATION. AMERICAN LEGION POST #63 218 WEST MAIN STREET PHILANTHROPIC AND OTHER OTTAWA, OH 45875 CONTRIBUTIONS FOR 501(C)(3) EXEMPT

CONTRIBUTIONS FOR 501(C)(3) EXEMPT

PURPOS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 26,110 EDUCATION. AMERICAN LEGION POST #68 1901 SYLVAN RD PHILANTHROPIC AND OTHER WOOSTER, OH 44691 CONTRIBUTIONS FOR

501(C)(3) EXEMPT PURPOS AMERICAN LEGION POST #70 501(C)(19) 9,353 229 WELLS AVE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

EDUCATION, PHILANTHROPIC AND WELLSVILLE, OH 43968 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT PURPOS

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 20,447 EDUCATION. AMERICAN LEGION POST #71 74 S MAIN ST PHILANTHROPIC AND OTHER ROSEVILLE, OH 43777 CONTRIBUTIONS FOR

501(C)(3) EXEMPT PURPOS AMERICAN LEGION POST #73 501(C)(19) 7.889 300 N MAIN ST

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

EDUCATION, PHILANTHROPIC AND FOSTORIA, OH 44830 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 32,850 EDUCATION. AMERICAN LEGION POST #76 395 W CALIFORNIA AVE PHILANTHROPIC AND SEBRING, OH 44672 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

PURPOS AMERICAN LEGION POST #78 501(C)(19) 10.238 EDUCATION, 12845 ST RT 664 S BOX 11 PHILANTHROPIC AND OTHER

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

LOGAN, OH 43138 CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 84,335 EDUCATION. AMERICAN LEGION POST #83 3615 HAYES AVE PHILANTHROPIC AND SANDUSKY, OH 44870 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

PURPOS AMERICAN LEGION POST #85 501(C)(19) 5.793 85 S 6TH ST

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

EDUCATION, PHILANTHROPIC AND NEWARK, OH 43055 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 5,130 EDUCATION. AMERICAN LEGION POST #86 415 MARKET STREET PHILANTHROPIC AND TORONTO, OH 43964 OTHER CONTRIBUTIONS FOR

501(C)(3) EXEMPT PURPOS AMERICAN LEGION POST #88 501(C)(19) 40.163 PO BOX 626

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

EDUCATION, PHILANTHROPIC AND ASHLAND, OH 44805 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 32,135 EDUCATION. AMERICAN LEGION POST #91 91 AMERICAN LEGION PKWY PHILANTHROPIC AND OTHER BEREA, OH 44017 CONTRIBUTIONS FOR 501(C)(3) EXEMPT

56.844 AMERICAN LEGION POST #96 501(C)(19) PO BOX 5096

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PURPOS EDUCATION, PHILANTHROPIC AND LIMA, OH 45802 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 36,634 EDUCATION. AMERICAN LEGION POST #103 1804 W 19TH ST PHILANTHROPIC AND OTHER ASHTABULA, OH 44004 CONTRIBUTIONS FOR 501(C)(3) EXEMPT

501(C)(3) EXEMPT

PURPOS

AMERICAN LEGION POST #105 501(C)(19) 11.428 51 E FIRST ST

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PURPOS EDUCATION, PHILANTHROPIC AND LONDON, OH 43140 OTHER CONTRIBUTIONS FOR

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 22,598 EDUCATION. AMERICAN LEGION POST #112 6677 MIDDLERIDGE RD PHILANTHROPIC AND OTHER MADISON, OH 44057 CONTRIBUTIONS FOR 501(C)(3) EXEMPT

AMERICAN LEGION POST #114 501(C)(19) 14.112 221 PARK ST

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PURPOS EDUCATION, PHILANTHROPIC AND OAK HARBOR, OH 43449 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 29,530 EDUCATION. AMERICAN LEGION POST #118 921 NORTH LAKE ST PHILANTHROPIC AND OTHER AMHERST, OH 44001 CONTRIBUTIONS FOR 501(C)(3) EXEMPT

AMERICAN LEGION POST #120 501(C)(19) 7.160 414 N MAIN ST

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PURPOS EDUCATION, PHILANTHROPIC AND URBANA, OH 43078 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 17.948 EDUCATION. AMERICAN LEGION POST #123 5129 MONTGOMERY ROAD PHILANTHROPIC AND OTHER NORWOOD, OH 45212 CONTRIBUTIONS FOR 501(C)(3) EXEMPT

PURPOS 15.796 AMERICAN LEGION POST #131 501(C)(19) 540 E MAIN ST

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

EDUCATION, PHILANTHROPIC AND LEETONIA, OH 44431 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 12,963 EDUCATION. AMERICAN LEGION POST #134 23363 US RT 23 SOUTH PHILANTHROPIC AND CIRCLEVILLE, OH 43113 OTHER CONTRIBUTIONS FOR

501(C)(3) EXEMPT AMERICAN LEGION POST #138 501(C)(19) 5.217 427 S 3RD ST

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PURPOS EDUCATION, PHILANTHROPIC AND HAMILTON, OH 45011 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 62,981 EDUCATION. AMERICAN LEGION POST #140 325 N OHIO ST PHILANTHROPIC AND GREENVILLE, OH 45331 OTHER CONTRIBUTIONS FOR

501(C)(3) EXEMPT PURPOS AMERICAN LEGION POST #142 501(C)(19) 61.269 EDUCATION,

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

201 JAMES RD PHILANTHROPIC AND WAVERLY, OH 45690 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 16,278 EDUCATION. AMERICAN LEGION POST #144 3253 S HIGH ST PHILANTHROPIC AND COLUMBUS, OH 43207 OTHER CONTRIBUTIONS FOR

501(C)(3) EXEMPT PURPOS AMERICAN LEGION POST #147 501(C)(19) 17.124 EDUCATION, 8493 HACKETT RD PHILANTHROPIC AND

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

APPLE CREEK, OH 44806 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 40.706 EDUCATION. AMERICAN LEGION POST #151 272 BROAD ST PHILANTHROPIC AND OTHER CONNEAUT, OH 44030 CONTRIBUTIONS FOR 501(C)(3) EXEMPT

PURPOS 44.492 AMERICAN LEGION POST #159 501(C)(19) 150 LEGION RD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

EDUCATION, PHILANTHROPIC AND SAINT CLAIRSVILLE, OH OTHER 43950 CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 24,030 EDUCATION. AMERICAN LEGION POST #162 531 BELLEFONTAINE AVE PHILANTHROPIC AND OTHER MARION, OH 43302 CONTRIBUTIONS FOR 501(C)(3) EXEMPT

PURPOS 34.268 AMERICAN LEGION POST #165 501(C)(19) 35 N MAIN ST MIAMISBURG, OH 45342

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

EDUCATION, PHILANTHROPIC AND OTHER CONTRIBUTIONS FOR

501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 15,390 EDUCATION. AMERICAN LEGION POST #169 280 S WASHINGTON ST PHILANTHROPIC AND OTHER TIFFIN, OH 44883 CONTRIBUTIONS FOR 501(C)(3) EXEMPT

AMERICAN LEGION POST #170 501(C)(19) 29.620 129 MAIN ST

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PURPOS EDUCATION, PHILANTHROPIC AND WADSWORTH, OH 44281 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 9,588 EDUCATION. AMERICAN LEGION POST #173 120 COLTON AVE PHILANTHROPIC AND BELLEFONTAINE, OH 43311 OTHER CONTRIBUTIONS FOR

501(C)(3) EXEMPT PURPOS 29.500 AMERICAN LEGION POST #181 501(C)(19) EDUCATION, 123 EAST RENSSELAER PHILANTHROPIC AND

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

STREET OTHER BUCYRUS, OH 44820 CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 17,100 EDUCATION, AMERICAN LEGION POST #184 301 W WATER ST PHILANTHROPIC AND

PIQUA, OH 45356				OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT PURPOS
AMERICAN LEGION POST #188 326 ELIZABETH ST - PO BOX	501(C)(19)	8,797		EDUCATION, PHILANTHROPIC AND

501(C)(3) EXEMPT

PURPOS

612 OTHER NEW LEXINGTON, OH 43764 CONTRIBUTIONS FOR

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 53,508 EDUCATION. AMERICAN LEGION POST #191 200 S BROADWAY PHILANTHROPIC AND SPENCERVILLE, OH 45887 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

501(C)(3) EXEMPT

PURPOS

PURPOS 23.566 AMERICAN LEGION POST #200 501(C)(19) EDUCATION, 5046 NEBRASKA AVE PHILANTHROPIC AND

HUBER HEIGHTS, OH 45424 OTHER CONTRIBUTIONS FOR

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 41.097 EDUCATION. AMERICAN LEGION POST #210 2510 STE RTE 703 PHILANTHROPIC AND OTHER CELINA, OH 45822 CONTRIBUTIONS FOR 501(C)(3) EXEMPT

AMERICAN LEGION POST #211 501(C)(19) 32.315

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PURPOS EDUCATION, 31972 WALKER RD PHILANTHROPIC AND AVON LAKE, OH 44012 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 18,419 EDUCATION. AMERICAN LEGION POST #215 1000 US RT 35 WEST PHILANTHROPIC AND OTHER EATON, OH 45320 CONTRIBUTIONS FOR 501(C)(3) EXEMPT

AMERICAN LEGION POST #217 501(C)(19) 30.004 1265 N 4TH AVENUE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PURPOS EDUCATION, PHILANTHROPIC AND SIDNEY, OH 45365 OTHER CONTRIBUTIONS FOR

501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 6.994 EDUCATION. AMERICAN LEGION POST #225 PO BOX 317 PHILANTHROPIC AND UPPER SANDUSKY, OH 43351 OTHER CONTRIBUTIONS FOR

CONTRIBUTIONS FOR 501(C)(3) EXEMPT

PURPOS

AMERICAN LEGION POST #228
279 HWY 7 NORTH
POWHATAN POINT, OH 43942

501(C)(3) EXEMPT
PURPOS

EDUCATION,
PHILANTHROPIC AND
OTHER

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 44,992 EDUCATION. AMERICAN LEGION POST #236 2025 E RIVER ROAD PHILANTHROPIC AND NEWTON FALLS, OH 44444 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

PURPOS 38.758 AMERICAN LEGION POST #243 501(C)(19)

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

EDUCATION, 118 MARKET ST PHILANTHROPIC AND GALION, OH 44833 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 19,229 EDUCATION. AMERICAN LEGION POST #250 131 S SYCAMORE ST BOX 83 PHILANTHROPIC AND OTHER SYCAMORE, OH 44882 CONTRIBUTIONS FOR 501(C)(3) EXEMPT

PURPOS AMERICAN LEGION POST #256 501(C)(19) 18,900 EDUCATION, PHILANTHROPIC AND

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

897 OAKLAND RD LOVELAND, OH 45140 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 23,233 EDUCATION. AMERICAN LEGION POST #265 1105 N SHOOP AVE PHILANTHROPIC AND OTHER WAUSEON, OH 43567 CONTRIBUTIONS FOR 501(C)(3) EXEMPT

PURPOS AMERICAN LEGION POST #283 501(C)(19) 50.089 7725 REFUGEE RD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

EDUCATION, PHILANTHROPIC AND PICKERINGTON, OH 43147 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 26,550 EDUCATION. AMERICAN LEGION POST #290 44403 ST RT 14 PHILANTHROPIC AND OTHER COLUMBIANA, OH 44408 CONTRIBUTIONS FOR 501(C)(3) EXEMPT

PURPOS 25.213 AMERICAN LEGION POST #292 501(C)(19) 185 N MAIN STREET

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

EDUCATION, PHILANTHROPIC AND NEW LONDON, OH 44851 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 7,792 EDUCATION. AMERICAN LEGION POST #316 505 S STEARNS AVE PHILANTHROPIC AND OTHER DESHER, OH 43516 CONTRIBUTIONS FOR

501(C)(3) EXEMPT PURPOS 9.450 AMERICAN LEGION POST #322 501(C)(19) 1477 SR 503 S - PO BOX 2

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

EDUCATION, PHILANTHROPIC AND WEST ALEXANDRIA, OH 45381 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance AMERICAN LEGION POST #325 501(C)(19) 61,259 EDUCATION. 211 PEARL ST PHILANTHROPIC AND MANCHESTER, OH 45144 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

AMERICAN LEGION POST #326 501(C)(19) 31.464 89 E MAIN ST

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PURPOS EDUCATION, PHILANTHROPIC AND SHELBY, OH 44875 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 56,776 EDUCATION. AMERICAN LEGION POST #330 1108 E BENTON ST PHILANTHROPIC AND OTHER WAPAKONETA, OH 45895 CONTRIBUTIONS FOR 501(C)(3) EXEMPT

PURPOS AMERICAN LEGION POST #331 501(C)(19) 17.905 109 ELM ST RAVENNA, OH 44266

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

EDUCATION, PHILANTHROPIC AND OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 12,259 EDUCATION. AMERICAN LEGION POST #336 60 CHESTER ST PHILANTHROPIC AND PAINESVILLE, OH 44077 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

CONTRIBUTIONS FOR 501(C)(3) EXEMPT

PURPOS

PURPOS 9.433 AMERICAN LEGION POST #338 501(C)(19) EDUCATION, 209 WEST CROCKER ST PHILANTHROPIC AND OTHER

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BRADNER, OH 43406

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 16,902 EDUCATION. AMERICAN LEGION POST #344 201 E FINDLAY ST PHILANTHROPIC AND OTHER CAREY, OH 43316 CONTRIBUTIONS FOR

501(C)(3) EXEMPT PURPOS AMERICAN LEGION POST #345 501(C)(19) 11.340 EDUCATION, RT 19 NORTH PHILANTHROPIC AND

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

FORT RECOVERY, OH 45846 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT PURPOS

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 32,123 EDUCATION. AMERICAN LEGION POST #353 118 MACKINAW ST PHILANTHROPIC AND ANSONIA, OH 45303 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT PURPOS

AMERICAN LEGION POST #360 501(C)(19) 9,601 215 N WASHINGTON ST

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

EDUCATION, PHILANTHROPIC AND NEW PARIS, OH 45347 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 9,582 EDUCATION. AMERICAN LEGION POST #366 107 HIGH ST PHILANTHROPIC AND OTHER FLUSHING, OH 43977 CONTRIBUTIONS FOR

501(C)(3) EXEMPT PURPOS AMERICAN LEGION POST #371 501(C)(19) 31.379 1001 SOUTH PENNSYLVANIA

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

EDUCATION, PHILANTHROPIC AND AVENUE OTHER WELLSTON, OH 45692 CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 5,311 EDUCATION. AMERICAN LEGION POST #373 5939 ST RT 109 PHILANTHROPIC AND DELTA, OH 43515 OTHER CONTRIBUTIONS FOR

501(C)(3) EXEMPT AMERICAN LEGION POST #377 501(C)(19) 15.913 137 S MAIN ST

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PURPOS EDUCATION, PHILANTHROPIC AND CAMDEN, OH 45311 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 11.860 EDUCATION. AMERICAN LEGION POST #384 6910 PROVIDENCE ST - PO PHILANTHROPIC AND OTHER BOX 2818 WHITEHOUSE, OH 43571 CONTRIBUTIONS FOR 501(C)(3) EXEMPT

PURPOS AMERICAN LEGION POST #397 501(C)(19) 17.865 EDUCATION, 2713 STATE RD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PHILANTHROPIC AND VERMILLION, OH 44089 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 11,520 EDUCATION. AMERICAN LEGION POST #401 PO BOX 415 PHILANTHROPIC AND CALEDONIA, OH 43314 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

CONTRIBUTIONS FOR 501(C)(3) EXEMPT

PURPOS

PURPOS AMERICAN LEGION POST #406 501(C)(19) 13.055 EDUCATION, 3393 LEGION LANE PHILANTHROPIC AND BETHEL, OH 45106 OTHER

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 32,024 EDUCATION. AMERICAN LEGION POST #407 49 BLACK DRIVE PHILANTHROPIC AND DOYLESTOWN, OH 44230 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

36,881

PURPOS

OTHER

PURPOS

EDUCATION,

PHILANTHROPIC AND

CONTRIBUTIONS FOR 501(C)(3) EXEMPT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(19)

AMERICAN LEGION POST #417 PO BOX 17 MT STERLING, OH 43143

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 11.466 EDUCATION. AMERICAN LEGION POST #420 150 LOCUST MAIN PHILANTHROPIC AND OTHER MURRAY CITY, OH 43144 CONTRIBUTIONS FOR 501(C)(3) EXEMPT

CONTRIBUTIONS FOR 501(C)(3) EXEMPT

PURPOS

PURPOS 5.596 AMERICAN LEGION POST #421 501(C)(19) EDUCATION, 22001 BROOKPARK RD PHILANTHROPIC AND OTHER

FAIRVIEW PARK, OH 44126

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 8,718 EDUCATION. AMERICAN LEGION POST #430 3227 E LIVINGSTON AVE PHILANTHROPIC AND OTHER COLUMBUS, OH 43227 CONTRIBUTIONS FOR

501(C)(3) EXEMPT PURPOS AMERICAN LEGION POST #431 501(C)(19) 22,151 EDUCATION, 1 CANAL CT PHILANTHROPIC AND NEWCOMERSTOWN, OH 43832 OTHER

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 6.644 EDUCATION. AMERICAN LEGION POST #441 18086 TONTOGANY RD - PO PHILANTHROPIC AND OTHER BOX 131 TONTOGANY, OH 43565 CONTRIBUTIONS FOR 501(C)(3) EXEMPT

CONTRIBUTIONS FOR 501(C)(3) EXEMPT

PURPOS

AMERICAN LEGION POST #442
501(C)(19)
51 W MAIN ST
SALINEVILLE, OH 43945

501(C)(3) EXEMPT
PURPOS

EDUCATION,
PHILANTHROPIC AND
OTHER

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 20,669 EDUCATION. AMERICAN LEGION POST #447 112 TRUX STREET PHILANTHROPIC AND PLYMOUTH, OH 44665 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

CONTRIBUTIONS FOR 501(C)(3) EXEMPT

PURPOS

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 5,839 EDUCATION. AMERICAN LEGION POST #450 450 VICTOR STIER DR PHILANTHROPIC AND OTHER MILFORD, OH 45150 CONTRIBUTIONS FOR

501(C)(3) EXEMPT PURPOS AMERICAN LEGION POST #470 501(C)(19) 20,845 EDUCATION, PHILANTHROPIC AND

601 N 2ND ST COLDWATER, OH 45828 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 10,861 EDUCATION. AMERICAN LEGION POST #479 200 S HALLETT AVE PHILANTHROPIC AND SWANTON, OH 43558 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

CONTRIBUTIONS FOR 501(C)(3) EXEMPT

PURPOS

PURPOS AMERICAN LEGION POST #490 501(C)(19) 44.100 EDUCATION, 1117 S HAMILTON RD PHILANTHROPIC AND OTHER

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

COLUMBUS, OH 43227

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 5,797 EDUCATION. AMERICAN LEGION POST #521 3809 CENTRAL AVE PHILANTHROPIC AND SHADYSIDE, OH 43947 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

PURPOS 9.468 AMERICAN LEGION POST #523 501(C)(19) EDUCATION, 120 BANK ST

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PHILANTHROPIC AND LODI, OH 44254 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 28,500 EDUCATION. AMERICAN LEGION POST #532 1571 DEMOREST ROAD PHILANTHROPIC AND COLUMBUS, OH 43228 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

OTHER

PURPOS

EDUCATION,

PHILANTHROPIC AND

CONTRIBUTIONS FOR 501(C)(3) EXEMPT

AMERICAN LEGION POST #535 501(C)(19) 12.673 77 BELL STREET

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

BELLVILLE, OH 44813

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 41,544 EDUCATION. AMERICAN LEGION POST #539 539 AMERICAN LEGION DR PHILANTHROPIC AND NORTH BALTIMORE, OH OTHER 45872 CONTRIBUTIONS FOR

501(C)(3) EXEMPT PURPOS 38.440 AMERICAN LEGION POST #541 501(C)(19)

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

EDUCATION, 109 5TH ST PHILANTHROPIC AND CONTINENTAL, OH 45831 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 16,596 EDUCATION. AMERICAN LEGION POST #547 8-14 S MAIN ST PHILANTHROPIC AND MONROEVILLE, OH 44847 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

CONTRIBUTIONS FOR 501(C)(3) EXEMPT

PURPOS

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 6,750 EDUCATION. AMERICAN LEGION POST #557 1212 TWO RIDGE RD - PO BOX PHILANTHROPIC AND OTHER 2387 WINTERSVILLE, OH 43953 CONTRIBUTIONS FOR 501(C)(3) EXEMPT

CONTRIBUTIONS FOR 501(C)(3) EXEMPT

PURPOS

PURPOS AMERICAN LEGION POST #566 501(C)(19) 12.354 EDUCATION, 2974 CORMANY RD PHILANTHROPIC AND OTHER

AKRON, OH 44319

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 7,082 EDUCATION. AMERICAN LEGION POST 571 8140 ST RT 119 - PO BOX 155 PHILANTHROPIC AND MARIA STEIN, OH 45860 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

PURPOS 29,741 AMERICAN LEGION POST #572 501(C)(19) EDUCATION, 6483 STATE RD PHILANTHROPIC AND

PARMA, OH 44134 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance AMERICAN LEGION POST #578 501(C)(19) 10,437 EDUCATION. PO BOX 430 PHILANTHROPIC AND OUAKER CITY, OH 43773 OTHER CONTRIBUTIONS FOR

501(C)(3) EXEMPT PURPOS 36.934 AMERICAN LEGION POST #584 501(C)(19) EDUCATION, 142 OLNEY AVE PHILANTHROPIC AND

MARION, OH 43302 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 11,031 EDUCATION. AMERICAN LEGION POST #586 377 N THIRD ST PHILANTHROPIC AND TIPP CITY, OH 45373 OTHER CONTRIBUTIONS FOR

501(C)(3) EXEMPT

PURPOS

20.747 AMERICAN LEGION POST #598 501(C)(19)

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3) EXEMPT PURPOS EDUCATION, 5700 KENTSHIRE DR PHILANTHROPIC AND KETTERING, OH 45440 OTHER CONTRIBUTIONS FOR

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 20,930 EDUCATION. AMERICAN LEGION POST #605 367 W MAIN ST PHILANTHROPIC AND OTHER WALDO, OH 43356 CONTRIBUTIONS FOR 501(C)(3) EXEMPT

PURPOS AMERICAN LEGION POST #610 501(C)(19) 22.152 EDUCATION, 19944 SHELDON RD PHILANTHROPIC AND

BROOK PARK, OH 44142 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT PURPOS

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 7.686 EDUCATION. AMERICAN LEGION POST #627 3935 E 42ND ST PHILANTHROPIC AND NEWBURGH HEIGHTS, OH OTHER 44105 CONTRIBUTIONS FOR 501(C)(3) EXEMPT

AMERICAN LEGION POST #633 501(C)(19) 17.100 17825 ST RT 247

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PURPOS EDUCATION, PHILANTHROPIC AND SEAMAN, OH 45679 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 22,275 EDUCATION. AMERICAN LEGION POST #641 131 BROWN ST PHILANTHROPIC AND BELLE VALLEY, OH 43717 OTHER

CONTRIBUTIONS FOR 501(C)(3) EXEMPT PURPOS 31.347 AMERICAN LEGION POST #651 501(C)(19) EDUCATION, 6353 HARRISON RD PHILANTHROPIC AND

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

FREDERICKSBURG, OH 44627 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 17.247 EDUCATION. AMERICAN LEGION POST #668 742 W NATIONAL RD PHILANTHROPIC AND OTHER VANDALIA, OH 45377 CONTRIBUTIONS FOR 501(C)(3) EXEMPT

PURPOS 9.282 AMERICAN LEGION POST #674 501(C)(19) 9960 E CENTER ST - BOX 446

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

EDUCATION, PHILANTHROPIC AND WINDHAM, OH 44288 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 6,817 EDUCATION. AMERICAN LEGION POST #682 48225 RABBIT ROAD - PO BOX PHILANTHROPIC AND OTHER 486 HOPEDALE, OH 43976 CONTRIBUTIONS FOR 501(C)(3) EXEMPT

PURPOS AMERICAN LEGION POST #703 501(C)(19) 20,981 7667 YORK RD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

EDUCATION, PHILANTHROPIC AND PARMA, OH 44130 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 28,737 EDUCATION. AMERICAN LEGION POST #715 100 LEGION DR - PO BOX 37 PHILANTHROPIC AND FORT JENNINGS, OH 45844 OTHER CONTRIBUTIONS FOR

501(C)(3) EXEMPT AMERICAN LEGION POST #726 501(C)(19) 8.102 6540 OLD TOWN RD E FULTONHAM, OH 43735

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PURPOS EDUCATION, PHILANTHROPIC AND OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 15,372 EDUCATION. AMERICAN LEGION POST #733 3751 W ST RT 12 PHILANTHROPIC AND BETTSVILLE, OH 44815 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

PURPOS AMERICAN LEGION POST #737 501(C)(19) 25,311 EDUCATION, 16465 MILTON AVE PHILANTHROPIC AND

LAKE MILTON, OH 44429 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 6.641 EDUCATION. AMERICAN LEGION POST #746 7015 NORTH DIXIE DRIVE PHILANTHROPIC AND OTHER DAYTON, OH 45414 CONTRIBUTIONS FOR

CONTRIBUTIONS FOR 501(C)(3) EXEMPT

PURPOS

501(C)(3) EXEMPT PURPOS AMERICAN LEGION POST #749 501(C)(19) 10.597 EDUCATION, 30 HURON ST PHILANTHROPIC AND OTHER

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

JEROMESVILLE, OH 44840

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 11,980 EDUCATION. AMERICAN LEGION POST #750 226 MAIN ST PHILANTHROPIC AND LOWELL, OH 45744 OTHER CONTRIBUTIONS FOR

501(C)(3) EXEMPT 9.953 AMERICAN LEGION POST #757 501(C)(19) 289 COOKS HILL RD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PURPOS EDUCATION, PHILANTHROPIC AND CHILLICOTHE, OH 45601 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

PURPOS

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 8,395 EDUCATION. AMERICAN LEGION POST #762 35 WEST MAIN STREET PHILANTHROPIC AND NEW LEBANON, OH 45345 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

PURPOS AMERICAN LEGION POST #763 501(C)(19) 31.529 3200 DAYTON-XENIA RD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

EDUCATION, PHILANTHROPIC AND BEAVERCREEK, OH 45434 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

PURPOS

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(19) 30,153 EDUCATION. AMERICAN LEGION POST #768 52651 BROAD ST PHILANTHROPIC AND BEALLSVILLE, OH 43716 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

13.758 SHELBY MOOSE LODGE #422 501(C)(19) 102 NORTH GAMBLE REAR

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PURPOS EDUCATION, PHILANTHROPIC AND SHELBY, OH 44875 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 10.000 EDUCATION. NATIONAL WILD TURKEY FEDERATION (TEAM OHIO) PHILANTHROPIC AND 770 AUGUSTA RD OTHER EDGEFIELD, SC 29824 CONTRIBUTIONS FOR

6.000 SALVATION ARMY 501(C)(19) 966 E MAIN ST

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3) EXEMPT PURPOS EDUCATION, PHILANTHROPIC AND COLUMBUS, OH 43205 OTHER CONTRIBUTIONS FOR 501(C)(3) EXEMPT

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance SAVE A WARRIOR - WARRIOR 501(C) (3) 15.000 EDUCATION. VILLAGE PHILANTHROPIC AND OTHER CONTRIBUTIONS FOR

TO FURTHER THE

TEXEMPT PURPOSE OF

THE ORGANIZATION

PO BOX 694
NEW ALBANY, OH 43054
CONTRIBUTIONS F
501(C)(3) EXEMPT
PURPOS

10,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(19)

THE AMERICAN LEGION

BUCKEYE BOYS STATE

DELAWARE, OH 43015

60 BIG RUN ROAD

(a) Name and address of (b) EIN (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (c) IRC section (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 501(C)(3) 10.000 VALOR HOME FOR WOMEN (COI EDUCATION. PHILANTHROPIC AND

501(C)(3) EXEMPT

PURPOS

POST 703) OTHER 7667 YORK ROAD PARMA, OH 44130 CONTRIBUTIONS FOR

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

efile GRAPH	IIC print - I	OO NOT PROCESS	As Filed Data -		DLN	: 93493195026750
SCHEDUL (Form 990 or EZ)	990-EZ ions on on.	OMB No 1545-0047 2018 Open to Public Inspection				
Name & the ofg THE AMERICAN LE DEPARTMENT OF C	GION DHIO CHARITIES	s INC emental Informatio	n		02-0692968	ification number
Return Reference				Explanation		
FORM 990, PART VI, SECTION B, LINE 11B	1	990 IS PREPARED BY OFFICER AND ADJUT		UNTING FIRM THE FORM 990 G FILED	IS THEN REVIEW	WED BY T

Return Explanation
Reference

990 Schedule O, Supplemental Information

FORM 990, THE ORGANIZATION DOES NOT COMPENSATE ANY OFFICERS, DIRECTORS, TRUSTEES, OR OTHER EMPLOYEES
PART VI,
SECTION B,
LINE 15

Return Explanation
Reference

990 Schedule O, Supplemental Information

FORM 990, PART VI, SECTION C, LINE 19

990 Schedule O, Supplemental Information

Return

STATEMENTS

Reference	Explanation
FORM 990,	THE ORGANIZATION HAS A COMMITTEE THAT ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE COMPILAT
PART XI, LÎNE	ION AND SELECTION OF THE INDEPENDENT ACCOUNTANT THE PROCESS BY WHICH THE COMMITTEE OVERSE
2C,	ES THE COMPILATION AND SELECTS THE INDEPENDENT ACCOUNTANT HAS NOT CHANGED FROM PRIOR YEARS
OVERSIGHT	
OF FINANCIAL	

Explanation

SCHEDULE R

(Form 990)

As Filed Data
Related

Department of the Treasury

Internal Revenue Service

Name of the organization

Related Organizations and Unrelated Partnerships

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

► Go to <u>www.irs.gov/Form990</u> for instructions and the latest information.

2018
Open to Public

Employer identification number

DLN: 93493195026750OMB No 1545-0047

Open to Public Inspection

HE AMERICAN LEGION DEPARTMENT OF OHIO CHARITIES INC						02-0692968				
Part I Identification of Disregarded Entities Complete in	the organization answ	ered "Yes	" on Form	990, Part	IV, line 3	3.				
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary ad	(c) Legal domicile (state or foreign country)		(d) Total ind	come End-of-ye	e) ar assets	ssets Direct control entity			
Part II Identification of Related Tax-Exempt Organization	ns Complete if the orga	anization	answered '	'Yes" on F	orm 990,	Part IV, line 34	becaus	e it had one or	more	
related tax-exempt organizations during the tax year. (a) Name, address, and EIN of related organization	(b) Primary activity	Legal do or forei	(c) micile (state gn country)	(d Exempt Co) de section	(e) Public charity stati (if section 501(c)(3		(f) Direct controlling entity	Section (13) co ent	tity?
(1)AMERICAN LEGION DEPARTMENT OF OHIO INC 60 BIG RUN ROAD DELAWARE, OH 43015 31-4115640	PRESERVE DEMOCRACY AND UPHOLD PATIOTISM			501(C)(19)	& (C)(23)	N/A	N/A		Yes	No No
For Danarwork Deduction Act Notice, see the Instructions for Form	000		at No. 50135				Sol.	hadula B (Form	000) 3	018

(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, excluded fron tax under sections 512- 514)	d, total incom		Disprop	h) ortionate itions?	(i) Code V-U amount in 20 of Schedule k (Form 106	oox ma pa -1	(j) neral or naging rtner?	(k) Percen owner	tage
					314)			Yes	No	1	Ye	s No	1	
											_	+		
Identification of Related Organiza because It had one or more related o						ization ans	wered "Yes	" on Fo	orm 99	90, Part 1	V, lın	e 34		
		s a corporation	on or trus (c) egal micile or foreign	st during th	(d) controlling Tyentity	(e) pe of entity corp, S corp, or trust)	wered "Yes (f) Share of total income	Share	(g) e of end- year assets	of- Pe	V, lin-	e	(ı) Section 5 13) cont entity	12(b rolled
because it had one or more related o (a) Name, address, and EIN of	rganizations treated as	s a corporation	on or trus (c) egal micile	st during th	(d) controlling Tyentity	(e) pe of entity corp, S corp,	(f) Share of total	Share	(g) e of end- year	of- Pe	(h)	e	Section 5 13) cont entity	12(b rolled
because it had one or more related o (a) Name, address, and EIN of	rganizations treated as	s a corporation	on or trus (c) egal micile or foreign	st during th	(d) controlling Tyentity	(e) pe of entity corp, S corp,	(f) Share of total	Share	(g) e of end- year	of- Pe	(h)	e	Section 5 13) cont entity	12(b rolled
because it had one or more related o (a) Name, address, and EIN of	rganizations treated as	s a corporation	on or trus (c) egal micile or foreign	st during th	(d) controlling Tyentity	(e) pe of entity corp, S corp,	(f) Share of total	Share	(g) e of end- year	of- Pe	(h)	e	Section 5 13) cont entity	12(b rolled
because it had one or more related o (a) Name, address, and EIN of	rganizations treated as	s a corporation	on or trus (c) egal micile or foreign	st during th	(d) controlling Tyentity	(e) pe of entity corp, S corp,	(f) Share of total	Share	(g) e of end- year	of- Pe	(h)	e	Section 5 13) cont entity	12(b rolled
because it had one or more related o (a) Name, address, and EIN of	rganizations treated as	s a corporation	on or trus (c) egal micile or foreign	st during th	(d) controlling Tyentity	(e) pe of entity corp, S corp,	(f) Share of total	Share	(g) e of end- year	of- Pe	(h)	e	Section 5 13) cont entity	12(b rolled

Schedule R (Form 990) 2018		Pa	age 3
Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii)annuities, (iii) royalties, or(iv) rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to related organization(s)	1 b	Yes	
c Gift, grant, or capital contribution from related organization(s)	1c		No
d Loans or loan guarantees to or for related organization(s)	1 d		No
e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1 f		No
g Sale of assets to related organization(s)	1 g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1i		No
j Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k	_	No
l Performance of services or membership or fundraising solicitations for related organization(s)	11		No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
o Sharing of paid employees with related organization(s)	10	Yes	
p Reimbursement paid to related organization(s) for expenses	1 p	Yes	
q Reimbursement paid by related organization(s) for expenses	1 q		No
	- ⊢	—	—

,	Lease of facilities, equipment, of other assets to related organization(s)	1	-	+
	Lease of facilities, equipment, or other assets from related organization(s)	1k		No No
	Performance of services or membership or fundraising solicitations for related organization(s)	-		No
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	•
0	Sharing of paid employees with related organization(s)	10	Yes	
р	Reimbursement paid to related organization(s) for expenses	1 p	Yes	;
q	Reimbursement paid by related organization(s) for expenses	1q		No
r	Other transfer of cash or property to related organization(s)	1r		No
s	Other transfer of cash or property from related organization(s)	1s		No
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds			
	(a) (b) (c) (d) Name of related organization Transaction type (a-s)	nount	ınvolv	ed
(1)AN	MERICAN LEGION DEPARTMENT OF OHIO B 23,164 ACTUAL			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	01	(e) e all partners section 501(c)(3) rganizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(1) General (managin partner	g >	(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
										Schedul	e R (Forn	1 99	0) 2018

