# **Return of Organization Exempt From Income Tax**

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

OMB No. 1545-0047 2020

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made

▶ Go to www.irs.gov/Form990 for instructions and the latest informa

ate roundations)	
public.	Open to Public
ition.	Inspection
12/31	. 20 20

Α	For the 2	020 calend	dar year, or tax year beginning	01/01	, 2020, and end	ing 1	<u>2/3</u> 1	, 20 20	
В	Check if ap	oplicable:	C Name of organization VETERAL	NS OF FOREIGN WARS (	OF THE UNITED	STATES DEP	T ( D Emplo	yer identificati	on number
	Address ch	nange	Doing business as					54-6054863	3
	Name char	nge	Number and street (or P.O. box if	mail is not delivered to street	address)	Room/suite	E Teleph	one number	
•	Initial return	n	PO Box 10206					703-361-555	54
	Final return	/terminated	City or town, state or province, co	ountry, and ZIP or foreign post	al code				
	Amended r	return	Manassas, VA, 20108				<b>G</b> Gross	receipts \$	123,269
	Application	n pending	F Name and address of principal offi	icer: Francis Cannon VFV	V Post 7589	H(a) Is this	a group return fo	r subordinates?	Yes 🔽 No
			PO Box 10206, Manassas, VA	20108		H(b) Are a	all subordinate	es included?	Yes 🗌 No
ı	Tax-exemp	ot status:	501(c)(3) 501(c) ( 19	) ◀ (insert no.)	17(a)(1) or 527	If "No," at	tach a list. Se	e instructions	
J	Website:	www.vf	fw7589.org			H(c) Grou	p exemption	number ▶	1735
K	Form of org	ganization: 🗸	Corporation Trust Associate	tion ☐ Other ►	L Year of form	mation: 1946	M State	of legal domicile	: VA
P	art I	Summa	ry		•				
	1 B	Briefly des	cribe the organization's missi	ion or most significant a	activities: To pr	omote veterar	n's causes,	provide assis	stance to
e	1		n filing VA claims. Too provide						
Governance			e Scouting. Gifts for troops dep						
Jerr	2	heck this	box ▶ ☐ if the organization	discontinued its operat	ions or dispose	ed of more tha	an 25% of	its net asset	S.
ó	3 N	lumber of	voting members of the gove	rning body (Part VI, line	1a)		. 3		580
જ	4 N	lumber of	independent voting member	s of the governing body	/ (Part VI, line 1	b)	. 4		580
ies	5 T	otal numb	per of individuals employed in	n calendar year 2020 (Pa	art V, line 2a)		. 5		0
Activities &	6 T	otal numb	per of volunteers (estimate if r	necessary)			. 6		35
Ac	1		ated business revenue from F				. 7a		0
			ted business taxable income				. 7b		0
						Prior Y	/ear	Current	Year
Φ	<b>8</b> C	ontributio	ons and grants (Part VIII, line	1h)			8,870		13,922
Š	9 P	rogram s	ervice revenue (Part VIII, line	2g)			3,316		1,986
Revenue	<b>10</b> Ir	nvestment	t income (Part VIII, column (A)	), lines 3, 4, and 7d) .			0		0
Œ	<b>11</b> C	Other reve	nue (Part VIII, column (A), line	179,266		20,058			
	1		ue-add lines 8 through 11 (m				191,452		35,966
	<b>13</b> G	ants and	d similar amounts paid (Part I)	X, column (A), lines 1-3	)		10,964		4,348
	1		aid to or for members (Part IX				0		0
Ø	<b>15</b> S	alaries, ot	her compensation, employee b	penefits (Part IX, column	(A), lines 5-10)		0		0
nse	<b>16a</b> P	rofession	al fundraising fees (Part IX, co	olumn (A), line 11e) .			0		0
Expenses	b T	otal fundr	raising expenses (Part IX, colu	umn (D), line 25) ▶	0				
ш	17 C	ther expe	enses (Part IX, column (A), line	es 11a-11d, 11f-24e)			185,208		37,001
	18 T	otal expe	nses. Add lines 13-17 (must	equal Part IX, column (A	A), line 25) .		196,172		41,349
	<b>19</b> R	Revenue le	ess expenses. Subtract line 1	8 from line 12			-4,720		-5,383
Net Assets or Fund Balances						Beginning of C	Current Year	End of	Year
sets	<b>20</b> T	otal asset	ts (Part X, line 16)				844,435		816,417
t As	<b>21</b> T	otal liabili	ties (Part X, line 26)				34,515		11,880
<u> </u>	<b>22</b> N		or fund balances. Subtract li	ne 21 from line 20 .			809,920		804,537
Pa	art II	Signatu	re Block						
			, I declare that I have examined this re e. Declaration of preparer (other than					ny knowledge a	nd belief, it is
-tru	e, correct, a	and complete	e. Declaration of preparer (other than	officer) is based off all informa	ation of which prepa	arer rias arry knov	vieuge.		
O: -									
Siç	-	Signati	ure of officer			D	ate		
He	ere		ard Raskin, Quartermaster						
		Type o	or print name and title						
Pa	id	Print/Type	e preparer's name	Preparer's signature		Date		if PTIN	
	eparer						self-emp	oioyea	
	e Only	Firm's nan	me <b>&gt;</b>			Fir	m's EIN ▶		
		Firm's add				Ph	one no.		
Ma	y the IRS	discuss	this return with the preparer s	shown above? See instr	ructions			Ye	s No

Part I	Statement of Program Service Accomplishments  Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	To foster camaraderie among United States veterans of overseas conflicts. To serve our veterans, the military and our community.
	To advocate on behalf of all veterans. To be a veterans' voice in the community.
	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	f "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	Describe the organization's program service accomplishments for each of its three largest program services, as measured be expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others the total expenses, and revenue, if any, for each program service reported.
4a	Code:) (Expenses \$including grants of \$) (Revenue \$)
	Donations to local veterans and families for basic needs. Support for local community programs and functions. Support and
	sponsor local National Guard units.
4b	Code:) (Expenses \$including grants of \$) (Revenue \$)
	To be a veterans' voice in the community. Attend local, regional state and national conferences.
4c	Code:) (Expenses \$including grants of \$) (Revenue \$)
	Placement of flags on veterans' graves. Distribution of Buddy Poppies. Remind the community of the "Price of Freedom" veterans
	paid in deference of our nation.
4d	Other program services (Describe on Schedule O.)
	Expenses \$ 0 including grants of \$ 0 ) (Revenue \$ 0 )
4e	Total program service expenses ▶ 0

Part	V 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		_
2	Is the organization required to complete Schedule B, Schedule of Contributors See instructions?	2		~
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		_
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," <i>complete Schedule C, Part II</i>	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		,
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		~
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	7		,
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	8		,
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? <i>If</i> "Yes," <i>complete Schedule D, Part IV</i>	9		~
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V </i>	10		,
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	,	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		,
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		,
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		,
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		~
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		,
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		,
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		V
13 14a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		V
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		,
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		_
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		~
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		~
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		,
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	,	
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		~
b	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		,

Part	Checklist of Required Schedules (continued)			
			Yes	No
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		~
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? If "Yes," complete Schedule J	23		~
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		~
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?	24d		
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," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		V
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		,
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," complete Schedule L, Part IV	28a		~
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		~
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		~
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		~
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M </i>	30		~
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		~
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		~
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I </i>	33		~
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		~
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," <i>complete Schedule R, Part V, line</i> 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		~
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O.	38	~	
Part				
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable   1a   0		.03	110
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	~	

2a Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements, filed for the calendar year anding with or within the year covered by this return 2 o 1 if at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).  3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  5a Did and the said is the said of the organization have an interest in. or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account or a financial account in a foreign country (such as a bank account, securities account, or other financial account or a financial account in a foreign country (such as a bank account, securities account, or other financial account or a financial account in a foreign country (such as a bank account, securities account, or the financial account in a foreign country (such as a bank account, securities account, or other damanical accountry and a financial accountry and the security of the organization and the security of the organization file form 8865.T?  5a Does the organization appropriation file form 8865.T?  5a Does the organization sevel acquirements for Fince 8865.T?  5b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  5b If "Yes," indicate the number of Forms 8262 filed during the year and services provided 7.  5c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	Part '	Statements Regarding Other IRS Filings and Tax Compliance (continued)				
Statements, filled for the calendar year ending with or within the year covered by this return 2 0 b If at least one is reported on line 2a, did the organization file all required federal enployment tax returns?  Note: if the sum of lines 1 and 2a is greater than 250, you may be required to e-file (see instructions)  3 Did the organization have unrelated business gross income of \$1,000 or more during the year?  b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O  4A At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or their financial accountry)  b If "Yes," enter the name of the foreign country [Yes to as a bank account, securities account, or their financial accountry)  b Pose instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accountry (FBAR).  5a Was the organization aparty to a prohibited tax shetter transaction at any time during the tax year?  5b V b Did any texable party notify the organization that it was or is a party to a prohibited tax shetter transaction of any type to the organization she are annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  7 Organization shall are year evelve deductible contributions under section 170(c).  a Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file form 8282?  b If "Yes," indicate the number of Forms 2282 filed during the year  c Did the organization sell, exchange, or ot					Yes	No
Statements, filled for the calendar year ending with or within the year covered by this return 2 0 b If at least one is reported on line 2a, did the organization file all required federal enployment tax returns?  Note: if the sum of lines 1 and 2a is greater than 250, you may be required to e-file (see instructions)  3 Did the organization have unrelated business gross income of \$1,000 or more during the year?  b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O  4A At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or their financial accountry)  b If "Yes," enter the name of the foreign country [Yes to as a bank account, securities account, or their financial accountry)  b Pose instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accountry (FBAR).  5a Was the organization aparty to a prohibited tax shetter transaction at any time during the tax year?  5b V b Did any texable party notify the organization that it was or is a party to a prohibited tax shetter transaction of any type to the organization she are annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  7 Organization shall are year evelve deductible contributions under section 170(c).  a Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file form 8282?  b If "Yes," indicate the number of Forms 2282 filed during the year  c Did the organization sell, exchange, or ot	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax				
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).  3 Did the organization have unrelated business gross income of \$1,000 or more during the year?  4 At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country   Such as a bank account, securities account, or other financial accounts?  5 Be instructions for filing requirements for finCPN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5 Did any taxable party notify the organization that it was or is a party to a prohibited atx shelter transaction?  6 Did best the organization and a promotive that were not tax deductible as charitable contributions?  6 Did best the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?  7 Organizations shat may receive deductible contributions under section 170(c).  8 Did the organization services a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor?  9 If "Yes," did the organization notify the donor of the value of the goods or services provided?  9 If "Yes," indicate the number of Forms 8282 filed during the year  9 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  10 If "Yes," indicate the number of Forms 8282 filed during the year  10 Did the organization sell, exchange, or otherwise dispose of tangible personal benefit contract?  11 Did the organization received a contribution of qualified intellectual property, did the organization file Form 1047?  12 Did the organization received a contribution of activity or indirectly, to pay premiums, directly or indirectly, on a personal benefit contract?  12 Did the			2a 0			
Sa   V   1f "Yes," has it filled a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O   3b   3b   4a   At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account?)   1f "Yes," refer the name of the foreign country   See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial account?   See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial accounts (FBAR).   Sa   V   See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).   Sa   V   See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).   Sa   V   See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).   Sa   V   See instructions of filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).   Sa   V   See instructions of filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).   See instructions of filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).   See instructions of filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).   See in Section 501 (cit and year) and year of the value of the part to a contribution of the very selection and party to a contribution of the very selection and party to a contribution of the very selection and party to a contribution of the value of the goods or services provided?   To it the organization exceive any funds, directly or indirectly, to pay premiums on a personal benefit contract?   To it the organization every every pay premiums, directly or indirectly, on a personal benefit contract?   To it the organiz	b	If at least one is reported on line 2a, did the organization file all required federal employment to	ax returns? .	2b		
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O  A At any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country   See instructions for filing requirements for inficEM Form 114, Report of Foreign Bank and Financial accounts (FBAR).  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  c If "Yes," to line 5a or 5b, did the organization file Form 8865-T?  6 Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(e).  b If "Yes," did the organization notify the donor of the value of the goods or services provided?  c Did the organization sell, exchange, or otherwise dispose of fangible personal property for which it was required to file Form 8292?  d If "Yes," indicate the number of Forms 8282 filed during the year  e Did the organization receive any funds, directly or indirectly, on a personal benefit contract?  7 Did the organization receive any funds, directly or indirectly, on a personal benefit contract?  7 Did the organization maintaining donor advised funds, of the organization file a Form 1947  The sponsoring organizations maintaining donor advised funds, directly or indirectly, on a personal benefit contract?  7 Till the organization receive any funds, directly or indirectly, on a personal benefit contract?  7 Till the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instr	uctions)			
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts; before the foreign country   b   l'*Yes," enter the name of the foreign country   b   leves," enter the name of the foreign country   b   leves," enter the name of the foreign country   b   leves," enter the name of the foreign country   b   loan y taxable party notify the organization file Form 8886-T?   b   bid any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?   5b   v   l'*Yes," to line 5a or 5b, did the organization file Form 8886-T?   c   l'*Yes," did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?   c   li'*Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?   organization and party for goods and services provided to the payor?   organization and party for goods and services provided to the payor?   organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor?   organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8982?   organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8982?   organization sell, exchange, or otherwise dispose of tangible personal benefit contract?   organization sell, exchange, or otherwise dispose of tangible personal benefit contract?   organization sell, exchange, or otherwise dispose of tangible personal benefit contract?   organization sell-excess any payments of indirectly, or pay premiums on a personal benefit contract?   organization organization with the p	3a	Did the organization have unrelated business gross income of \$1,000 or more during the year	?	За		~
a financial account in a foreign country (such as a bank account, securities account, or other financial account?)  Bif "See," enter the name of the foreign country be see instructions for filling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  If "Yes" to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  If "Yes," did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  If "Yes," did the organization include with every solicitation an express statement that such contributions or girts were not tax deductible?  Organizations that may receive deductible contributions under section 170(c).  Did the organization stat may receive deductible contributions under section 170(c).  If "Yes," did the organization notify the donor of the value of the goods or services provided?  C Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  If "Yes," indicate the number of Forms 8282 filed during the year  Did the organization receive a contribution of qualified intellectual property, did the organization benefit contract?  If the organization receive a contribution of qualified intellectual property, did the organization benefit contract?  If the organization receive a contribution of cas, boats, arplanes, or other vehicles, did the organization than the property of the sponsoring organization make a distribution to a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  Sponsoring organization sell, exchange of the property of the prop	b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on So	chedule O .	3b		
b If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR),  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	er authority over,			
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b Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  c If "Yes" to line 5a or 5b, did the organization file Form 8885-T?  b Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit and you contributions that were not tax deductible as charitable contributions?  b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  a Did the organization receive a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor?  b If "Yes," idid the organization notify the donor of the value of the goods or services provided?  c Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 a required?  h If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  h If the organization have excess business holdings at any time during the year?  Sponsoring organizations make any taxable distributions under section 4966?  b Did the sponsoring organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12  a Gross income from ether sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  b Treys, "enter the amount of tax-exempt interest received or accrued during the year   12b   12a	b	If "Yes," enter the name of the foreign country ▶				
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c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  d if "Yes," indicate the number of Forms 8282 filed during the year  Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 1098-C?  Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds.  Did the sponsoring organization make any taxable distributions under section 4966?  Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12  Gross income from members or shareholders  B Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  11a  Section 501(c)(12) organizations. Enter:  a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  11b  12c  Section 501(c)(12) organizations caccumed during the year  11b  12a  Section 501(c)(2) qualified honprofit health insurance issuers.  a Is the organization increased to issue qualified health plans in more than one state?  Note: See the instructions for additional information the organization must report on Schedule O.  B Enter the amount of reserves the organization is required to maintain by the states in which the organization receive any payments for indoor tanning services during the tax year?  If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.  If "Yes," has it filed a For	h					
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d If "Yes," indicate the number of Forms 8282 filed during the year  Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?  Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds.  Did the sponsoring organizations maintaining donor advised funds.  Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter:  Initiation fees and capital contributions included on Part VIII, line 12  Gross receipts, included on Form 990, Part VIII, line 12  Gross income from members or shareholders  In Section 501(c)(12) organizations. Enter:  Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  Section 497(a)(1) non-exempt charitable trusts, is the organization filing Form 990 in lieu of Form 1041?  If "Yes," enter the amount of tax-exempt interest received or accrued during the year.  Is the organization is licensed to issue qualified health plans in more than one state?  Note: See the instructions for additional information the organization must report on Schedule O.  Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  Enter the amount of reserves on hand  Is "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.  Is the organization subject to the section 4960 ta	C		or willer it was	70		
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f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make excess business holdings at any time during the year?  9 Sponsoring organizations maintaining donor advised funds.  a Did the sponsoring organization make any taxable distributions under section 4966?  b Did the sponsoring organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12  c Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 501(c)(12) organizations. Enter:  a If "Yes," enter the amount of tax-exempt interest received or accrued during the year.  11b  12c  13 Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization icensed to issue qualified health plans in more than one state?  Note: See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans in more than one state?  13a  14a  1bi If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.  15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?  If "Yes," see instructions and file Form 4720, Schedule N.		- ·		7e		
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Initiation fees and capital contributions included on Part VIII, line 12	а			9a		
a Initiation fees and capital contributions included on Part VIII, line 12	b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related pers	on?	9b		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.  10b  11 Section 501(c)(12) organizations. Enter:  a Gross income from members or shareholders.  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.  13 Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note: See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  13b  13b  13b  14a V  b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.  15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?  15 V  If "Yes," see instructions and file Form 4720, Schedule N.	10	Section 501(c)(7) organizations. Enter:				
11 Section 501(c)(12) organizations. Enter:  a Gross income from members or shareholders	а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
a Gross income from members or shareholders	b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities .	10b			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	11	Section 501(c)(12) organizations. Enter:				
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14a Did the organization receive any payments for indoor tanning services during the tax year?		- · · · · · · · · · · · · · · · · · · ·				
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O .  15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?		L				
Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?						~
excess parachute payment(s) during the year?				14b		
If "Yes," see instructions and file Form 4720, Schedule N.	15		remuneration or			
				15		~
The lighted organization an adjugational incitiution cubicat to the coation /UGV evoles tay on not investment income?   16     /	40					
If "Yes." complete Form 4720. Schedule O.	16	Is the organization an educational institution subject to the section 4968 excise tax on net investig "Yes" complete Form 4720. Schedule O	sument income?	16		-

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No"

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Section 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 580 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 on Schedule O. Enter the number of voting members included on line 1a, above, who are independent . 1b 580 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 3 supervision of officers, directors, trustees, or key employees to a management company or other person? . Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 1 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 Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b V R Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O . . . . . Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a **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 Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **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 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 Did the organization have a written whistleblower policy? . . . . . . . . . . . . 13 14 14 Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official . . . . . . . . . . . . . . . 15a 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a v 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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ► VA 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website ✓ Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 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 Richard Raskin, (703)361-5554

Part VI

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

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

Check this box if neither the organization no	Tarry relate	u org	arıız			ompe	115a	Ted any current	Jilicer, director,	or trustee.
					C)					
(A)	(B)	(do n	ot of		ition		200	(D)	(E)	(F)
Name and title	Average hours per week	box,	(do not check more than one box, unless person is both a officer and a director/trustee			an tee)	Reportable compensation from the	Reportable compensation from related	Estimated amount of other compensation	
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and related organizations
Wayne Moore	30.00									
Commander (President)	0.00			~				0	0	0
Louis Filippone	5.00									
Senior Vice Commander (Vice President)	0.00			~				0	0	0
Bob Knight	5.00									
Junior Vice Commander	0.00			~				0	0	0
Richard Raskin	30.00									
Quartermaster (Treasurer)	0.00			~				0	0	0
Peter MacLeod	2.00									
Trustee	0.00			~				0	0	0
David Mattingly	2.00									
Trustee	0.00			~				0	0	0
Tina Bilem	2.00									
Trustee	0.00			~				0	0	0
Ronald Knowles	10.00									
Chaplain	0.00			~				0	0	0
Ronald Link	30.00									
Adjutant	0.00			~				0	0	0
		-								
		-								

Total from continuation sheets to Part VII, Section A  Total (add lines 1b and 1c).	Part	VII Section A. Officers, Directors, 1	Γrustees, I	Key I	Em	plo	yee	s, an	d F	lighest Compe	nsated I	Emplo	yees (co	ntinued)
Name and title    Control check more than one part week   Part Vall   Part Val							•							
Name and title    Average   Dox, unless person is both an incompensation of other compensation of the com		(A)	(B)	(do n	ot of				ano	(D)	(E)		(F	)
Park week   Park		Name and title	_	١,						1				
Substotal				office	er and	d a d	lirect	or/trust						
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the Subtotal    Total from continuation sheets to Part VII, Section A				direc	l tt	cer	em/	hes	mer	(W-2/1099-MISC)	(W-2/1099	-MISC)		
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d Total (add lines 1b and 1c)			VII. Sectio	n A					<b>•</b>					
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization    3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	_				Ċ				<b>•</b>	0		0		0
reportable compensation from the organization ▶ 0  3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	2								e) w		e than \$1	00.000	of	
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	_	, ,							-,	0		,		
employee on line 1a? If "Yes," complete Schedule J for such individual  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  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  Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 or 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  Compensation  Compensation  Total number of independent contractors (including but not limited to those listed above) who													Y	es No
employee on line 1a? If "Yes," complete Schedule J for such individual  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  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  Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 or 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  Compensation  Compensation  Total number of independent contractors (including but not limited to those listed above) who	3	Did the organization list any former of	officer, dire	ector.	tru	iste	e, k	cev e	mpl	lovee, or highes	st compe	nsated		
organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual									•		-			~
organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	For any individual listed on line 1a, is the	sum of re	portal	ble	con	npe	nsatic	n a	and other compe	nsation fr	om the		
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														
for services rendered to the organization? If "Yes," complete Schedule J for such person		individual											4	<b>'</b>
Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 or compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  (B)  (C)  Compensation  None  2 Total number of independent contractors (including but not limited to those listed above) who	5	Did any person listed on line 1a receive of	or accrue co	ompe	nsa	tion	fro	m any	/ un	related organizat	tion or inc	ividual		
1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 or compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  (B)  (C)  Compensation  None  2 Total number of independent contractors (including but not limited to those listed above) who		<del>_</del>	? If "Yes," c	compl	ete	Sch	hedi	ule J t	or s	such person .			5	· ·
compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  Name and business address  None  Compensation  Compensation  Compensation  Compensation  Compensation  Compensation  Compensation  Compensation  Compensation	Secti	on B. Independent Contractors												
(A) Name and business address  None  Total number of independent contractors (including but not limited to those listed above) who	1													
None  None  Total number of independent contractors (including but not limited to those listed above) who		compensation from the organization. Rep	ort compen	satio	n foi	r the	e ca	lenda	r ye	ear ending with or	within the	e orgar	nization's t	ax year.
None  2 Total number of independent contractors (including but not limited to those listed above) who														
2 Total number of independent contractors (including but not limited to those listed above) who		Name and business add	iress							Description of serv	/ices		Compensation	on
	None													
		<del></del>	<i>p</i>				, .		L	p	<b>.</b> .			
raceived mare than \$100,000 at companion from the examination	2	received more than \$100,000 of compens							) th	nose listed abov 0	e) wno			

Part VIII	Statement of Revenue
-----------	----------------------

		Check if Schedule	Осо	ntains a re	spon	ise or note to an	y line in this Pa	rt VIII....		
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ts ts	1a	Federated campaig	ns .		1a	0				
ran	b	Membership dues			1b	3,611				
۾ ۾	С	Fundraising events			1c	0				
r A	d	Related organization	ns .		1d	0				
<u>a</u> ' <u>a</u>	е	Government grants	(cont	ributions)	1e	0				
Sin	f	All other contribution								
E E		and similar amounts no	ot inclu	uded above	1f	10,311				
를 돌	g	Noncash contribution								
Contributions, Gifts, Grants and Other Similar Amounts		lines 1a-1f			1g	\$ 0				
о в	h	Total. Add lines 1a-	-1f .		•	▶	13,922			
o l	_					Business Code				
Š	2a									
Ser	b									
gram Ser Revenue	C C									
Jra Re	d e									
Program Service Revenue	f	All other program se					1,986	1,986		0
<u>-</u>	g	Total. Add lines 2a-				•	1,986	1,700		J
	3	Investment income					.,,,,			
	•	other similar amoun	-	_						
	4	Income from investr								
	5	Royalties				▶				
				(i) Real		(ii) Personal				
	6a	Gross rents	6a	18	3,928	0				
	b	Less: rental expenses	6b		0	0				
	С	Rental income or (loss)			3,928	0				
	d	Net rental income o	r (loss	r'			18,928	18,928	0	0
	7a	Gross amount from		(i) Securit	ies	(ii) Other				
		sales of assets								
_	_	other than inventory	7a							
Revenue	b	Less: cost or other basis	76							
Ş.	•	and sales expenses . Gain or (loss)	7b 7c		0	0				
		Net gain or (loss)			- 0					
Other		Gross income from		ndraising	•					
ᅙ	oa	events (not including		0						
		of contributions rep		d on line						
		1c). See Part IV, line			8a					
	b	Less: direct expens	es .		8b					
	С	Net income or (loss)	) from	fundraisin	g eve	ents 🕨				
	9a	Gross income f								
		activities. See Part I			9a	88,433				
		Less: direct expens			9b	87,303				
		Net income or (loss)			tivitie	es ▶	1,130	1,130	0	0
	10a	Gross sales of in			40-					
	L	returns and allowan			10a					
	b c	Less: cost of goods Net income or (loss)			10b					
		iver income or (ioss)	, 11011	Jaico UI III	v <del>G</del> i ILC	Business Code				
Miscellaneous Revenue	11a					Daomioso Oode				
nue	b									
scellaneo Revenue	C									
isc. Re	d	All other revenue			·					
Σ	e	Total. Add lines 11a	a–11d	l		▶	0			
	12	Total revenue. See					35,966	22,044	0	0

# Part IX Statement of Functional Expenses

			_				_				(4)	<b>(D)</b>		(0)			
			Check	if Schec	alut	0	con	tains	a re	espons	e or note to any line	e in this Part IX .					 ~
Sec	tion 5	07(	c)(3) an	a 501(c)(	(4) C	ırga	nıza	tions	mu	st com	olete all columns. All	other organizations	mus	st complete col	umn (Æ	1).	

					<u> </u>
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 .				
2	Grants and other assistance to domestic individuals. See Part IV, line 22	4,348			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	1,010			
4 5	Benefits paid to or for members  Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
0					
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
9	(A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion				
	= -	7.000			
13	Office expenses	7,833			
14	Information technology				
15	Royalties				
16	Occupancy	6,871			
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	593			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	17,169			
23	Insurance	17,107			
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
_	y amount, not into 246 expenses on conedule O.)				
a					
b					
С					
d					
е	All other expenses	4,535			
25	Total functional expenses. Add lines 1 through 24e	41,349	0	0	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)				
	following SOP 98-2 (ASC 958-720)				000

Part X Balance Sheet

		Check if Schedule O contains a response or	note	to any line in this Par	tX		
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			38,731	1	27,882
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net		[		3	
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current of	r forn	ner officer, director,			
		trustee, key employee, creator or founder, subst controlled entity or family member of any of thes		5			
	6	Loans and other receivables from other disquaunder section 4958(f)(1)), and persons described	ified p	persons (as defined		6	
G	7	Notes and loans receivable, net		` / ` / ` /		7	
Assets	8	Inventories for sale or use				8	
Ass	9	Prepaid expenses and deferred charges				9	
-	10a	Land, buildings, and equipment: cost or other	· ·			Ť	
	IVa	basis. Complete Part VI of Schedule D	10a	899,557			
	b	Less: accumulated depreciation		111,022	805,704	10c	788,535
	11	•			000/101	11	700/000
	12	Investments—other securities. See Part IV, line 1		-		12	
	13	Investments-program-related. See Part IV, line		13			
	14	Intangible assets		-		14	
	15	Other assets. See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equa	ıl line :	33)	844,435	16	816,417
	17	Accounts payable and accrued expenses				17	
	18	Grants payable		18			
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities		20			
	21	Escrow or custodial account liability. Complete F		21			
Liabilities	22	Loans and other payables to any current or trustee, key employee, creator or founder, subst	antial	contributor, or 35%			
iab		controlled entity or family member of any of thes	•	<u> </u>		22	
_	23	Secured mortgages and notes payable to unrela		•	34,515		11,880
	24	Unsecured notes and loans payable to unrelated	•	0	24	0	
	25	Other liabilities (including federal income tax, parties, and other liabilities not included on lines	17–2	4). Complete Part X			
		of Schedule D		l I	0		
	26	<b>Total liabilities.</b> Add lines 17 through 25			34,515	26	11,880
Ses		Organizations that follow FASB ASC 958, che	ck he	re ▶ ∐			
auc	0.7	and complete lines 27, 28, 32, and 33.				07	
Bal	27					27 28	
둳	28					20	
Ξ		Organizations that do not follow FASB ASC 99	os, cn	eck nere ► 🛂			
o	29	and complete lines 29 through 33.  Capital stock or trust principal, or current funds		1	809,920	29	804,537
ts	30	Paid-in or capital surplus, or land, building, or ed		<b>F</b>	809,920		804,537
SSE	31	Retained earnings, endowment, accumulated inc		-	0	31	0
Net Assets or Fund Balances	32	Total net assets or fund balances			809,920		804,537
Š	33	Total liabilities and net assets/fund balances .			844,435		816,417

Part	XI Reconciliation 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)			3	5,966	
2	Total expenses (must equal Part IX, column (A), line 25)			4	1,349	
3	Revenue less expenses. Subtract line 2 from line 1					
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))			80	9,920	
5	Net unrealized gains (losses) on investments				0	
6	Donated services and use of facilities				0	
7	Investment expenses				0	
8	Prior period adjustments				0	
9	Other changes in net assets or fund balances (explain on Schedule O)				0	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))			80	4,537	
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII	<u>.                                    </u>				
				Yes	No	
1	Accounting method used to prepare the Form 990: 🗹 Cash 🔲 Accrual 🔲 Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain	in in				
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		~	
	If "Yes," check a box below to indicate whether the financial statements for the year were compile	d or				
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?	•	2b		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig		1 1			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c			
	If the organization changed either its oversight process or selection process during the tax year, explai Schedule O.	n on				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in	n the				
	Single Audit Act and OMB Circular A-133?		3a		~	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo					
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	s.	3b	000		

Form **990** (2020)

# SCHEDULE D (Form 990)

# **Supplemental Financial Statements**

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

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

VETE	RANS OF FOREIGN WARS OF THE UNITED STATES DE		54-6054863		
Par	t I Organizations Maintaining Donor Advi	sed Funds or Other Similar Fund	s or Acc	ounts.	
	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) .				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor	advisors in writing that the assets hel	d in dono	r advised	
	funds are the organization's property, subject to the	e organization's exclusive legal control?	?		
6	Did the organization inform all grantees, donors, ar				
	only for charitable purposes and not for the benefit				
	conferring impermissible private benefit?			· · · U Yes U No	
Par					
	Complete if the organization answered "				
1	Purpose(s) of conservation easements held by the c	= : : : : : : : : : : : : : : : : : : :			
	Preservation of land for public use (for example, recre	•		ally important land area	
	Protection of natural habitat	☐ Preservation of	a certified	d historic structure	
	☐ Preservation of open space				
2	Complete lines 2a through 2d if the organization hel	d a qualified conservation contribution	in the for		
	easement on the last day of the tax year.			Held at the End of the Tax Year	
а	Total number of conservation easements		. 2a		
b	Total acreage restricted by conservation easements				
С	Number of conservation easements on a certified hi	* *			
d	Number of conservation easements included in (				
			. 2d	1	
3	Number of conservation easements modified, trans	ferred, released, extinguished, or term	inated by	the organization during the	
_	tax year >				
4	Number of states where property subject to conserve				
5	Does the organization have a written policy reg violations, and enforcement of the conservation eas				
_					
6	Staff and volunteer hours devoted to monitoring, inspec	ting, nandling of violations, and emorcing	conservati	on easements during the year	
7	Amount of expenses incurred in monitoring, inspecting	a handling of violations, and enforcing o	onconyatio	n accoments during the year	
7	► \$	g, riandling of violations, and emorcing c	onservano	in easements during the year	
	Ť		170	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
8	Does each conservation easement reported on line 2 and section 170(h)(4)(B)(ii)?		ection 170		
9	In Part XIII, describe how the organization reports of		nd evnen	<del>_</del>	
3	balance sheet, and include, if applicable, the text of				
	organization's accounting for conservation easemen		noial otato	monto mai docombeo ino	
Part			Other Sin	nilar Assets.	
	Complete if the organization answered "				
1a	If the organization elected, as permitted under FAS		stateme	nt and halance sheet works	
	of art, historical treasures, or other similar assets				
	service, provide in Part XIII the text of the footnote t				
b	If the organization elected, as permitted under FAS	SB ASC 958, to report in its revenue st	tatement a	and balance sheet works of	
_	art, historical treasures, or other similar assets held				
	provide the following amounts relating to these item			•	
	(i) Revenue included on Form 990, Part VIII, line 1			▶ \$	
	<ul><li>(i) Revenue included on Form 990, Part VIII, line 1</li><li>(ii) Assets included in Form 990, Part X</li></ul>			<b>&gt;</b> \$	
2	If the organization received or held works of art,				
	following amounts required to be reported under FA			J. , p	
а				▶ \$	
b	Revenue included on Form 990, Part VIII, line 1 . Assets included in Form 990, Part X			<b>&gt;</b> \$	

Schedu	le D (Form 990) 2020				Page 2
Part	Organizations Maintaining C	ollections of Art, H	istorical Treasures	s, or Other Similar As	ssets (continued)
3	Using the organization's acquisition, accollection items (check all that apply):	cession, and other red	ords, check any of the	ne following that make s	significant use of its
а	☐ Public exhibition	d	Loan or exchang	ge program	
b	☐ Scholarly research	е			
С	☐ Preservation for future generations				
4	Provide a description of the organization XIII.	n's collections and ex	plain how they further	r the organization's exer	mpt purpose in Par
5	During the year, did the organization so assets to be sold to raise funds rather th				
Part					
	Complete if the organization are 990, Part X, line 21.	nswered "Yes" on F	orm 990, Part IV, lir	ne 9, or reported an ar	mount on Form
1a	Is the organization an agent, trustee, coincluded on Form 990, Part X?				ot 🗌 Yes 🗌 No
b	If "Yes," explain the arrangement in Part	XIII and complete the	following table:		
				<u> </u>	Amount
С	Beginning balance			1c	
d	Additions during the year			1d	
е	Distributions during the year			1e	
f	Ending balance			1f	
2a	Did the organization include an amount of				
	If "Yes," explain the arrangement in Part	XIII. Check here if the	explanation has beer	n provided on Part XIII .	🗆
Par	t V Endowment Funds.				
	Complete if the organization ar	nswered "Yes" on F	orm 990, Part IV, lin	ne 10.	
		(a) Current year (b)	Prior year (c) Two year	ars back (d) Three years bac	k (e) Four years back
1a	Beginning of year balance				
b	Contributions				
С	Net investment earnings, gains, and losses				
d	Grants or scholarships				
е	Other expenditures for facilities and programs				
f	Administrative expenses				
g	End of year balance				
າ	Provide the estimated percentage of the	current vear end hala	nce (line 1a, column (	a)) held as:	
a	Board designated or quasi-endowment	=	ioc (iiiic 1g, colaitiii (	ajj ricia as.	
b	Permanent endowment ►	%			
C	Term endowment ▶ %	70			
C	The percentages on lines 2a, 2b, and 2c	should oqual 100%			
0-		•			L _
3a	Are there endowment funds not in the p organization by:				Yes No
	(i) Unrelated organizations				3a(i)
	( )				3a(ii)
b	If "Yes" on line 3a(ii), are the related orga			?	3b
4	Describe in Part XIII the intended uses of		dowment funds.		
Part	, , , , , , , , , , , , , , , , , , , ,				
	Complete if the organization ar	nswered "Yes" on F	orm 990, Part IV, lin	ne 11a. See Form 990	, Part X, line 10.
	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land	500,00	0		500,000
b	Buildings	284,0!			211,406
	Leasehold improvements	109.50		· · · · · · · · · · · · · · · · · · ·	72 629

6,000

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) .

0

1,500

. . ▶

0

4,500

Part VII	Investments – Other Securities.	N/ line 11b Coc.E	orm 000 Dort V line 10
	Complete if the organization answered "Yes" on Form 990, Part I  (a) Description of security or category  (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial	derivatives		
(2) Closely h	neld equity interests		
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E) (F)			
(G)			
(H)			
	mn (b) must equal Form 990, Part X, col. (B) line 12.) . ▶		
Part VIII	Investments—Program Related.	N/ II	000 B 1 V I' 10
	Complete if the organization answered "Yes" on Form 990, Part I		
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5) (6)			
(7)			
(8)			
(9)			
	mn (b) must equal Form 990, Part X, col. (B) line 13.) . ▶		
Part IX	Other Assets.	•	
-	Complete if the organization answered "Yes" on Form 990, Part I	IV, line 11d. See F	
	(a) Description		(b) Book value
(1)			
(2) (3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	mn (b) must equal Form 990, Part X, col. (B) line 15.)	<del></del>	<u> </u>
Part X	Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part I	IV, line 11e or 11f.	See Form 990, Part X,
1.	line 25.  (a) Description of liability		(b) Book value
(1) Federal in			(b) book value
(2)	iodine taxes		
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	mn (b) must equal Form 990, Part X, col. (B) line 25.)		<b>&gt;</b>
	r uncertain tax positions. In Part XIII, provide the text of the footnote to the orgar s liability for uncertain tax positions under FASB ASC 740. Check here if the text		

	Complete if the organization answered "Yes" on Form 990, F	Part IV, line 12a.	
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	1
C	Recoveries of prior year grants	2c	1
d	Other (Describe in Part XIII.)	2d	1
e	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:		3
		4a	
a b	Other (Describe in Part XIII.)		-
	Add lines <b>4a</b> and <b>4b</b>		10
с 5	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line		4c 5
_			-
rart			er neturn.
	Complete if the organization answered "Yes" on Form 990, F		
1			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	2b	-
С	Other losses		4
d	Other (Describe in Part XIII.)	2d	-
е	Add lines 2a through 2d		2e
3	Subtract line <b>2e</b> from line <b>1</b>		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	
			10
С	Add lines <b>4a</b> and <b>4b</b>		4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line		5
5 Part	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line <b>XIII Supplemental Information.</b>	9 18.)	5
<b>5 Part</b> Provid	Total expenses. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form 990, Part I, line</i> <b>XIII Supplemental Information.</b> de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.)	5 o; Part V, line 4; Part X, line
<b>5 Part</b> Provid	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line <b>XIII Supplemental Information.</b>	e 18.)	5 b; Part V, line 4; Part X, line
<b>5 Part</b> Provid	Total expenses. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form 990, Part I, line</i> <b>XIII Supplemental Information.</b> de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.)	5 b; Part V, line 4; Part X, line afformation.
<b>5 Part</b> Provice 2; Par	Total expenses. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form 990, Part I, line</i> <b>XIII Supplemental Information.</b> de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to	e 18.)	5; Part V, line 4; Part X, line of street in the street in
<b>5</b> Part Provio 2; Par	Total expenses. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line <b>XIII Supplemental Information.</b> de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part t	e 18.)	5 b; Part V, line 4; Part X, line information.
<b>5</b> Part Provio 2; Par	Total expenses. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line <b>XIII Supplemental Information.</b> de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part t	e 18.)	5 b; Part V, line 4; Part X, line information.
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<b>5</b> Part Provio 2; Par	Total expenses. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part t	e 18.)	5 p; Part V, line 4; Part X, line afformation.
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<b>5</b> Part Provio 2; Par	Total expenses. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part t	e 18.)	5 p; Part V, line 4; Part X, line afformation.
<b>5</b> Part Provio 2; Par	Total expenses. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part t	e 18.)	5 p; Part V, line 4; Part X, line afformation.
<b>5</b> Part Provio 2; Par	Total expenses. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part t	e 18.)	5 p; Part V, line 4; Part X, line afformation.
<b>5</b> Part Provio 2; Par	Total expenses. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part t	e 18.)	5 p; Part V, line 4; Part X, line afformation.
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### **SCHEDULE G** (Form 990 or 990-EZ)

## **Supplemental Information Regarding Fundraising or Gaming Activities**

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

VETE Par	Fundraising Activities. Form 990-EZ filers are n	Complete if th	ne organiza	ation answ	vered "Yes" on		6054863 line 17.
1 a b c d 2a b	Indicate whether the organizatio  Mail solicitations  Internet and email solicitation  Phone solicitations  In-person solicitations  Did the organization have a writtor key employees listed in Form  If "Yes," list the 10 highest paid compensated at least \$5,000 by	ten or oral agree 990, Part VII) or individuals or e	e f g = ement with r entity in coentities (fund	Solicitati Solicitati Special f any individual	on of non-goverrion of governmen fundraising event dual (including off with professional	nment grants t grants s icers, directors, trust fundraising services?	P ☐ Yes ☐ No
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody o	draiser have r control of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
1			Yes	No			
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total				•			
3	List all states in which the organ registration or licensing.	nization is regis	tered or lic	ensed to s	olicit contribution	ns or has been notifi	ed it is exempt from

Schedule G (Form 990 or 990-EZ) 2020 Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events (add col. (a) through col. (c)) (event type) (event type) (total number) Revenue Gross receipts . . . . 1 2 Less: Contributions . . 3 Gross income (line 1 minus line 2) . . . . . . . 4 Cash prizes . . . . 5 Noncash prizes Direct Expenses 6 Rent/facility costs . . . 7 Food and beverages . . 8 Entertainment . . . . Other direct expenses 10 Net income summary. Subtract line 10 from line 3, column (d) 11 Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (d) Total gaming (add col. (a) through col. (c)) (b) Pull tabs/instant Revenue (a) Bingo (c) Other gaming bingo/progressive bingo 1 Gross revenue . 46,974 40.950 88,433 Direct Expenses 2 Cash prizes . . . . . 42,511 29,160 71,671 3 Noncash prizes 830 830 4 Rent/facility costs . . . 8,194 8,194 5 Other direct expenses 6,608 6,608 100 % 100 % ~ Yes Yes Volunteer labor . . No 6 Direct expense summary. Add lines 2 through 5 in column (d) 7 87,303 Net gaming income summary. Subtract line 7 from line 1, column (d) . . . . . . . . . . 8 1,130 Enter the state(s) in which the organization conducts gaming activities: VA 9 -----✓ Yes No

Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? If "Yes," explain:	•	☐ Yes 🗹 No

If "No," explain:

cneau	ile G (Form 990 or 990-EZ) 2020		Page J
11	Does the organization conduct gaming activities with nonmembers?	✓ Yes	☐ No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?	☐ Yes	✓ No
13	Indicate the percentage of gaming activity conducted in:		
а	The organization's facility		100 %
b	An outside facility		0 %
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name ► Richard Raskin		
	Address ► 9304 Centreville Rd Manassas, VA 20110		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	☐ Yes	√ No
	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$ If "Yes," enter name and address of the third party:		
	Name ►		
	Address ▶		
16	Gaming manager information:		
	Name ► Richard Raskin		
	Gaming manager compensation ▶ \$0		
	Description of services provided ► Responsible for all operations of the bingo games and accountability of all more	nies.	
	☑ Director/officer ☐ Employee ☐ Independent contractor		
17 a b	Mandatory distributions:  Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ 833	✓ Yes	□ No
Part	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (i Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any addition See instructions.		

#### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

### Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Open to Public Inspection

**Employer identification number** 

VETERANS OF FOREIGN WARS OF THE UNITED STATES DEPT OF VIRGINIA 54-6054863 Form 990, Part VI, Section A, Line 6 - All members meet eligibility requirements IAW ruling set forth by Congress, IRS and VFW National Form 990, Part VI, Section A, Line 7a - Officers are elected annually IAW VFW By-Laws Form 990, Part VI, Section A, Line 7b - All decisions are made as guided by and IAW By-Laws of VFW Post 7589. Form 990, Part VI, Section A, Line 8a - Minutes of all meetings are provided to and approved by the membership. Form 990, Part VI, Section A, Line 8b - Minutes of all meetings are provided to and approved by the membership. Form 990, Part VI, Section B, Line 11b - All elected officers are given a copy of the Form 990. The 990 return is available for inspection by the public and all members. Form 990, Part IX, Line 24e - Other expenses include operational costs associated with charitable gaming.