

VETERANS FOR PEACE INC

Davis Associates CPAs
4119 N Hwy 67
Florissant, MO 63034
(314)653-0008

# **Davis Associates CPAs**

4119 N Hwy 67 Florissant, MO 63034 www.DavisAssociatesCPA.com Phone: (314)653-0008 | Fax: (314)653-0019

November 11, 2020

Veterans For Peace Inc 3407 S Jefferson Ave, STE 219 Saint Louis, MO 63118

Veterans For Peace Inc:

Enclosed is the 2019 federal return for a tax-exempt organization, prepared for Veterans For Peace Inc from the information provided. This return will be e-filed with the IRS once we receive a signed Form 8879-EO, IRS e-file Signature Authorization for an Exempt Organization.

The organization's federal return reflects neither a refund nor a balance due.

Thank you for the opportunity to be of service. For further assistance with your tax needs, contact our office at (314)653-0008.

Sincerely,

Darlene M. Davis

Darlene M Davis CPA Davis Associates CPAs

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Veterans For Peace Inc 3407 S Jefferson Ave, STE 219 Saint Louis, MO 63118

Your privacy is important to us. Read the following privacy policy.

We collect nonpublic personal information about you from various sources, including:

- \* Interviews regarding your tax situation
- \* Applications, organizers, or other documents that supply such information as your name, address, telephone number, Social Security Number, number of dependents, income, and other tax-related data
- \* Tax-related documents you provide that are required for processing tax returns, such as Forms W-2, 1099R, 1099-INT and 1099-DIV, and stock transactions

We do not disclose any nonpublic personal information about our clients or former clients to anyone, except as requested by our clients or as required by law.

We restrict access to personal information concerning you, except to our employees who need such information in order to provide products or services to you. We maintain physical, electronic, and procedural safeguards that comply with federal regulations to guard your personal information.

If you have any questions about our privacy policy, contact our office at (314)653-0008.

Sincerely,

Darlene Mr. Davis

Darlene M Davis CPA Davis Associates CPAs

IRS e-file Signature Authorization for an Exempt Organization

	-	_	
or calendar year 2019, or fiscal year beginning			. and endin

Department of the Treasury	▶ Do not send	o to the IRS. Reep for your records.		2019
Internal Revenue Service	► Go to www.irs.gov/F	Form8879EO for the latest information.		
Name of exempt organization			Employer identit	ication number
Veterans For Peac	e Inc		01-041590	61
Name and title of officer				
Garrett Reppenhac	gan, Executive Director			
Part   Type of R	eturn and Return Information	(Whole Dollars Only)		
		EO and enter the applicable amount, if any,	from the return of	
		that line for the return being filed with this form		you
		t enter -0-). But, if you entered -0- on the retur		n
	o not complete more than one line in Part		.,	•
4- F 000 de de la la		000 75 1340 5 (13.5 40)		4
1a Form 990 check here	_			
2a Form 990-EZ check he		orm 990-EZ, line 9)		2b
3a Form 1120-POL check		20-POL, line 22)		3b
4a Form 990-PF check he		ent income (Form 990-PF, Part VI, line 5)		4b
5a Form 8868 check here	b Balance Due (Form 8868, li	ne 3c)		5b
<del></del>	on and Signature Authorization			
Under penalties of perjury,	I declare that I am an officer of the above	organization and that I have examined a cor	by of the	
		and statements and to the best of my knowle		'y
		Part I above is the amount shown on the copy ervice provider, transmitter, or electronic retu		11
		S <b>(a)</b> an acknowledgement of receipt or reason		' <i>)</i>
		or refund, and (c) the date of any refund. If a		
		iate an electronic funds withdrawal (direct de		
		for payment of the organization's federal taxe		
		o revoke a payment, I must contact the U.S.		
		ayment (settlement) date. I also authorize th ve confidential information necessary to ans		Jris
		ntification number (PIN) as my signature for		
	licable, the organization's consent to elect		<b>g</b>	
Officer's PIN: check one b	oox only			
X   authorize Davi	a Bassaistas CDBs	to enter my PIN 63034	ac my cianat	ura
A raddionze Davi	s Associates CPAs ERO firm name	to enter my PIN 63034 Enter five numbers, I	as my signat	มเด
		do not enter all zeros		
on the organization	s's tax year 2019 electronically filed return.	. If I have indicated within this return that a co	opy of the return is	;
		rt of the IRS Fed/State program, I also autho	orize the aforemen	tioned
ERO to enter my P	'IN on the return's disclosure consent scre	en.		
<b></b>				
		gnature on the organization's tax year 2019 on the start and the state agency(les) regulations.		
	program, I will enter my PIN on the return's		ing chanties as pa	/LOI
ino mo rodrotato j	Jogram, 1 mill officer my 1 m 1 of the folder m	3 discission competit solution.		
Officer's signature	inn and Authoritination	Date	<u>▶ 11-11-20</u>	120
	ion and Authentication			
•	r six-digit electronic filing identification			
lumber (EFIN) followed by	your five-digit self-selected PIN.	4.3	36087 6303	84 enter all zeros
			20 1100	
certify that the above nume	ario entry is my DINI which is my clarature	on the 2019 electronically filed return for the	a organization	
		e with the requirements of Pub. 4163, Modern		
	RS e-file Providers for Business Returns.			
RO's signature		Dain	<b>▶</b> 11-11-20	120
- Table organization of the control		Date		40
	ERO Must Retain	This Form - See Instructions		
		to the IRS Unless Requested To	Do So	

# Form **990**

(Rev. January 2020)

Department of the Treasury

# **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.

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

OMB No. 1545-0047

2019

Open to Public Inspection

		2019 calendar v	ear, or tax year beginni	ng		, 2019, a	nd ending		, 20
				erans For Peace In	)C			D Emplo	yer identification number
		applicable:		erans for reace in	<u> </u>				01-0415961
=		change	Doing business as	a If It a delicered to percet of	ddeann)		Room/suite	E Teleph	one number
∐ N	ame ch	ange		. box if mail is not delivered to street a	outess;	İ	219		(314) 725-6005
∐ tr	itial ret	urn	3407 S Jefferso				243	G Gross	
∐ F	inal ret	urn/terminated		nce, country, and ZIP or foreign postal	code			\$	497,591
<u></u> ⊢ A	mende	d return	Baint Louis, MO				1,17		T
<u></u>	pplicati	on pending		cipal officer: Gerry Condon				this a group return f re all subordinate	
			Same as C above		<u> </u>				
I T	ax-exer	npt status: X 501		) 🖣 (insert no.) 📗 4947(a)(1	) or 527				t. (see instructions)
J V	/ebsite		<u>eteransforpeace</u>	[] .				Group exemption	
		T	poration Trust Asso	ciation Other	L Y	ear of formation	n: 1985	M State of leg	al domicile: MO
Pa	t I	Summary						- C1:	
	1	Briefly describe t	the organization's missio	n or most significant activities	: Stop	war as	a means of	t confile	ct resolution.
ģ	Į								
Activities & Governance									
Ē									
Š	2	Check this box	if the organization	discontinued its operations or					1.2
ڻ مع	3	Number of voting	g members of the goverr	ning body (Part VI, line 1a)				<del>                                     </del>	13
တ္ဆ	4	Number of indep	endent voling members	of the governing body (Part V	/I, line 1b)			4	1.3
Ħ	5	Total number of	individuals employed in o	calendar year 2019 (Part V, lir	ne 2a) ·			5	8
댡	6	Total number of	volunteers (estimate if n	ecessary) · · · · · ·				6	50_
ď	78	Total unrelated b	ousiness revenue from P	art VIII, column (C), line 12		• • • • •		7a	0
	k		isiness taxable income f					7b	0
							Prior	Year	Current Year
	8	Contributions an	d grants (Part VIII, line 1	h)			•	374,755	355,139
힏	9		revenue (Part VIII, line					197,619	136,644
E II	10	Investment inco	me (Part VIII, column (A	), lines 3, 4, and 7d)			•	1,522	2,941
Revenue	11	Other revenue (	Part VIII. column (A), line	es 5, 6d, 8c, 9c, 10c, and 11e)	)			6,426	2,867
Œ	12	Total revenue -	add lines 8 through 11 (m	nust equal Part VIII, column (A	A), line 12)			580,322	497,591
	13		lar amounts paid (Part I)				-	1,700	1,000
	14		or for members (Part IX,						0_
	15			benefits (Part IX, column (A)	, lines 5-10)			246,925	242,576
es			draising fees (Part IX, co						0
SUS	1		expenses (Part IX, colu		1	12,043			
Expenses			(Part IX, column (A), line					393,952	410,240
Ш	17			qual Part IX, column (A), line	25)		•	642,577	653,816
	18		openses. Subtract line 1				•	(62,255)	
	19	Revenue less ex	kpenses. Outdate into i	O ROTT UNO 12			Beginning of	Current Year	End of Year
S	20	Total assets (Pa	rt V lino 16)					387,296	225,432
Sset	20	Total liabilities (F						8,073	2,761
Net Assets or	21		nd balances. Subtract li	ne 21 from line 20				379,223	222,671
	22 rt	Signature		K Z T HOM IN C ZC					
34 3		I I I I I I I I I I I I I I I I I I I	that I have examined this return	n, including accompanying schedules	and statements, an	d to the best o	f my knowledge an	d belief, it is	
true,	correc	, and complete. Declara	tion of preparer (other than office	per) is based on all information of which	h preparer has any	/ knowledge.		<u>.</u>	
			t Reppenhagan						11-11-2020
Sig	n	Signature of						Da	ite
Her		17		Executive Director					
116	-		name and title	HYBORCTAR DITTORDA					
		Print/Type prepare		Preparer's signature	[	Date	C	Check if	PTIN
Pai	Al .	1 " ' '		Darlene M Davis CP	,   1	1-11-20	1	elf-employed	P00644326
		<u> </u>	<del> </del>		<u> </u>		Firm's Ell		
	Finishame - Davis hassociated								
USE	; Un	ly Firm's address		_			]		653-0008
		1		nt MO 63034					X Yes No
May	the IF	(S discuss this retu	im with the preparer sho	wn above? (see instructions)					

orm	990 (2019) Veterans For Peace Inc	01-0415961	Page 2
	t III Statement of Program Service	ce Accomplishments	<b>1</b>
		se or note to any line in this Part III	· · · <u>      </u>
1	Briefly describe the organization's mission:		
	Stop war as a means of conflict	resolution.	
2	Did the organization undertake any significant nr	ogram services during the year which were not listed on the	
۷.	prior Form 990 or 990-F7?		No
	If "Yes," describe these new services on Schedul		
3	Did the organization cease conducting, or make:	significant changes in how it conducts, any program	<b></b> ,
_	services?		No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service acc	omplishments for each of its three largest program services, as measured by	
	expenses. Section 501(c)(3) and 501(c)(4) organ	nizations are required to report the amount of grants and allocations to others,	
	the total expenses, and revenue, if any, for each	program service reported.	
		420 098 including grants of \$ ) (Revenue \$ 497,	,591 )
4a	(Code:) (Expenses \$	420,098 including grants of \$) (Revenue \$497, s through trainings, website, weekly enews, 3 time yearly	<u></u> ,
	Support over 100 local chapter	Hundreds of local actions exposing the true costs of war of	carried
	newsletter, annual convention.	oject funds installation and maintenance of water purificat	ion
	evetems in schools, hospitals,	mosques in Iraq that have been damaged in the US invasion.	<u>.</u>
	Systems III Bonosts, Hopers		
	(C. ) (F	including grants of \$) (Revenue \$	)
4b	(Code:) (Expenses \$	midding grants or \$\psi	,
	(Code: ) (Expenses \$	including grants of \$) (Revenue \$	)
4c	(Code:) (Expenses $\psi$		
اء ۾	Other program services (Describe on Schedule	0.)	
4d		ng grants of \$ ) (Revenue \$ )	
4e	Total program service expenses	420,098	

9) <u>Veterans For Peace Inc</u>
Checklist of Required Schedules 01-0415961

			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	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	5		
c	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	,		Х
6	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		х
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		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			41
Ū	complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
_	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		ж
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		ж
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
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	Х	
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		х
C				
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
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		Х
6	· ·	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	420		
	Schedule D, Parts XI and XII	12a	Х	
a	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		•
40	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X X
13	Did the organization maintain an office, employees, or agents outside of the United States?	14a		ж
14a b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			a h
	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		х
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		х
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	х	
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		х
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		х
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		Х
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u> </u>
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		_ <u>x</u> _

Part IV Checklist of Required Schedules (continued) Νo 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 X 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 23 Х 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 X Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c 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 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 X 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 or any of these persons? If "Yes," complete Schedule L, Part II 26 Х 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 X 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): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 28a A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If 28c Х 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Х 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 Х 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. Part I 31 Х 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," 32 Х 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 **X**.\_\_ 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, 34 х 35a 35a Х 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 X 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 Х 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 X 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O. 38 Part V Statements Regarding Other IRS Filings and Tax Compliance 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 4 b Enter the number of Form W-2G included in line 1a. Enter -0- if not applicable 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V No 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) X Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O 3b b At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a Х 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 Х 5a X C Does the organization have annual gross receipts that are normally greater than \$100,000, and did the 6a 6a X 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 6b Organizations that may receive deductible contributions under section 170(c). 7 Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a X 7b If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was Х If "Yes," indicate the number of Forms 8282 filed during the year d 7e Х Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f Х f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . . 7g х g 7h Х h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 8 8 Х sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. 9 9a X 9b Х Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? b Section 501(c)(7) organizations. Enter: 10 а Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities ...... b Section 501(c)(12) organizations. Enter: 11 а Gross income from other sources (Do not net amounts due or paid to other sources 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a If "Yes," enter the amount of tax-exempt interest received or accrued during the year b Section 501(c)(29) qualified nonprofit health insurance issuers. 13 13a 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. 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 X 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a If "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 tax on payment(s) of more than \$1,000,000 in remuneration or 15 15 excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 х 16 If "Yes," complete Form 4720, Schedule O.

Form	990 (2019) Veterans For Peace Inc	01-04	159	51	Р	age 6
	tVI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below					
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See inst					
	Check if Schedule O contains a response or note to any line in this Part VI					. X
Saci	tion A. Governing Body and Management					
360	Holl A. Coverning Dody and Management				Yes	No
4.	Enter the number of voting members of the governing body at the end of the tax year 1a	1	13			
1a	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					
			İ			
	committee, explain on Schedule O.  Enter the number of voting members included in line 1a, above, who are independent		13			
b	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	L				
2				2		х
_	any other officer, director, trustee, or key employee?  Did the organization delegate control over management duties customarily performed by or under the direct		ŀ			
3	supervision of officers, directors, or trustees, or key employees to a management company or other person?			3		x
	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			4		x
4				5		x
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			6		x
6	Did the organization have members or stockholders?		•			
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			7a		x
	one or more members of the governing body?		!	1.4		<u> </u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,		ļ	7b	:	
	stockholders, or persons other than the governing body?		•	10	AND C	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during					
	the year by the following:			93399944 Om	\$150 KK	SCHOOLS
а	The governing body?			8a 8b	X	
b	Each committee with authority to act on behalf of the governing body?		• •	ວນ	<u> </u>	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			9		
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	*	•••	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)					Γ
			1	10a	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		• •	IVA	ж	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			40h		
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		• •	10b	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the for	m'?	• •	11a	X	Ville with
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	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to con-	flicts? •	• •	12b		Х
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"					
	describe in Schedule O how this was done		• •	12c		Х
13	Did the organization have a written whistleblower policy?		• •	13		Х
14	Did the organization have a written document retention and destruction policy?			14	8000480	X
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		X
b	Other officers or key employees of the organization		• •	15b	gar-Aragan.	X
	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	1000000000	X
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		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 50	)1(c)				
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.					
	X Own website X Another's website X Upon request Other (explain on Schedule O)					
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest poli	су,				
	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	<b>&gt;</b>				

Shelly Rockett (314)725-6005, 3407 S. Jefferson Ave. #219, Saint Louis, MO 63118

Page	7
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01-0415961 Veterans For Peace Inc Form 990 (2019) Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Part VII Independent Contractors 

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

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

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.

				(	(C)		İ			
	(B)	Position						(D)	(E)	(F)
(A)	Average					nan one s both ar		Reportable	Reportable	Estimated amount
Name and title	hours			•		/trustee)		compensation	compensation	of other
	per week							from the organization	from related organizations	compensation from the
	(list any	악둜	ā	Q	₹ 6	en 표	Fo	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and
	hours for related	direc	tituti	Officer	y em	ploy	Former	-		related organizations
	organizations	Individual trustee or director	institutional trustee		Key employee	8 201				
	below	Stex	rus		8	pen				
	dotted line)	"	8			Highest compensated employee				
(1) Gerry Condon	_							_		_
President		X		Х				00	<u> </u>	0
(2) Marti Downing	_	l								0
Director		X						0_	0	0
(3) Joey King	_	1							0	o
Director		X						0	<u> </u>	<u> </u>
(4) Adrienne Kinne	_	ı							0	0
Vice President		X	ļ	X				0	U U	<u> </u>
(5) Dave Logsdon	_	I				1			0	0
Director		X				<del> </del>		0	<u> </u>	<u> </u>
(6) Gary Butterfield	_	§						0	0	0
Treasurer		Х	-	Х	ļ	<del> </del>		0	<u> </u>	
(7) Michael Dempsey	5.00	1						0	. 0	0
Director		<u> </u>	<u> </u>		-	ļ		U	<u> </u>	
(8) Jessie Medvan	5.00	1						٥	0	0
Director		X		ļ	<del> </del>	ļ <u> </u>	├	<u> </u>	<u> </u>	
(9) Daniel Craig	5.00	<b>{</b>						0	0	0
Director		X		-			ļ <u> </u>	<u> </u>		
(10)Willie Hager	5.00							0	0	0
Director		X	$\vdash$	<del> </del>	-		<u> </u>	<u> </u>	<u> </u>	
(11)George Johnson	_							0	0	0
Director	10.00	X		<del> </del>	<del> </del>	ļ	$\vdash$	<u> </u>		
(12)Garrett Reppenhagen	40 .00	'l						0	0	0
Executive Director		X	-							<u> </u>
(13)Patrick McCann	5.00	1						0	0	0
Secretary		-	-	X			+-	1	ļ	
(14)		]			ļ					
		<u></u>		1	<u> </u>			<u></u>		Form 000 (2010)

Part	Section A. Officers, Directors, Trustees,  (A)  Name and litle	(B) Average hours per week	(do n box,	ot che unles	Position of check more than one unless person is both an er and a director/trustee)				(D) Reportable compensation from the organization	(E) Reportal compensa from relat organizat	tion ied	(F) Estimated amount of other compensation from the
			individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-N		organization and related organizations
<u>(15)</u>												
<u>(16)</u>												
(17)												
<u>(18)</u>							-					
<u>(19)</u>												
<u>(20)</u>												
(21)												
(22)										=		
(23)												
(24)												
(25)												
1b	Subtotal							• >				
c d	Total (add lines 1b and 1c)							• •	0		0	0
2	Total number of individuals (including but not limite	ed to those lis	ted ab	ove)	who	rec	eived ı	more	e than \$100,000 of			C
<del> </del>	reportable compensation from the organization											Yes No
3	Did the organization list any <b>former</b> officer, director employee on line 1a? <i>If</i> "Yes," <i>complete Schedule</i> .	r, trustee, key I for such ind	emplo Iividual	yee,	or n	gne	st com	ipen	sated 			3 X
4	For any individual listed on line 1a, is the sum of re	eportable con	npensa	ition	and	othe	er com	pen	sation from the			
	organization and related organizations greater than	\$150,000? /	f "Yes,	" con	nplei	e So	chedul	e J ti	or such			4 x
5	Did any person listed on line 1a receive or accrue	compensatio	n from	any	unre	elate	d orga	niza	ition or individual			
	for services rendered to the organization? If "Yes,"	complete Sci	hedule	J for	suc	h pe	rson					5 X
	on B. Independent Contractors  Complete this table for your five highest compensations.	ntad indonen	dent co	ntra	ctors	tha	t recei	ived	more than \$100.00	00 of		
1	compensation from the organization. Report comp	ensation for	the cal	enda	ar ye	ar e	nding	with	or within the organ	zation's tax	year.	
	(A)								(B)			(C)
*********	Name and business addre	ss						1	Description of servi	ces		Compensation
								1				
2	Total number of independent contractors (including received more than \$100,000 of compensation from	g but not limi	ted to t	hose	liste	ed al	bove)	who				

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Part VIII

Veterans For Peace Inc
Statement of Revenue

					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
	1a	Federated campaigns	1a					
et on	i	Membership dues	1b	132,345				
Contributions, Gifts, Grants and Other Similar Amounts	c	Fundraising events	1c					
S,G	d	Related organizations	1d					
ar Citt	6	Government grants (contributions)	1e	222,794				
II,	f	All other contributions, gifts, grants,						
atio er S		and similar amounts not included above	1f					
를 돌	g	Noncash contributions included in						
E D		lines 1a-1f	- ,	\$				
	h	Total. Add lines 1a-1f		>	355,139			
			-	Business Code				
8	\$	Educational and Promote	<u> </u>	511710	80,875	80,875		
Σg	b							
en S	C	Convention	_	900099	55,769	55,769		
Ze Z	d							
Program Service Revenue	e	All attack are grown as wise volumes	}					
а.	'.	All other program service revenue			300 044			
	g				136,644			
	3	Investment income (including dividends, intere other similar amounts)			1,731	1,731		
	4	Income from investment of tax-exempt bond p			1,/31	1,731		
	5	Royalties						
	•	(i) Real	T	(ii) Personal				
	6a			(ii) i cisonai				
	1	Less: rental expenses 6b						
	1	Rental income or (loss) 6c						
	d							
	79	Gross amount from (i) Securities		(ii) Other				
		sales of assets						
	h	other than inventory Less: cost or other basis  7a 1,2	210					
Ë	~	and sales expenses · · 7b						
Revenue	C	Gain or (loss) 7c 1,2	210					
8	d	Net gain or (loss) · · · · · · · · · · · · · · · · · ·		>	1,210	1,210		
her	8a	Gross income from fundraising						
ğ		events (not including \$						
		of contributions reported on line						
		1c). See Part IV, line 18	8a					
	l	Less: direct expenses	8b					
	l	Net income or (loss) from fundraising events	•••					
	9a	Gross income from gaming						
		activities, See Part IV, line 19	9a					
	1	Less: direct expenses	9b					
			$\ddot{\Box}$					
	10a	Gross sales of inventory, less returns and allowances	10a					
	h		10b					
		The state of the s						
		The modifie of Good Holli dates of the citory	·	Business Code				
গ্ৰ	112	Project Funds Managemen	6	00099	2,867	2,867		
ရှိ ရှိ	b				2,007	2,007		
Miscellanous Revenue	C		—  -					
Re G		All other revenue	. r					
Σ		Total. Add lines 11a-11d			2,867			
		Total revenue, See instructions			497.591	142.452	0	0

01-0415961

**Statement of Functional Expenses** Part IX Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX . . . . . . . . . (D) Fundraising (B) (C) Do not include amounts reported on lines 6b, 7b, Total expenses Program service Management and expenses 8b, 9b, and 10b of Part VIII. expenses general expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 1,000 1,000 Grants and other assistance to domestic 2 individuals. See Part IV, line 22 ..... Grants and other assistance to foreign 3 organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Compensation of current officers, directors, 5 trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 56,145 56,145 112,288 . . . . . . . . . . . . . . 224,578 Other salaries and wages 7 Pension plan accruals and contributions (include 8 section 401(k) and 403(b) employer contributions) 9 4,500 4,500 17,998 8,998 10 Fees for services (nonemployees): 11 Management Legal 11,833 11,833 C Accounting d Professional fundraising services. See Part IV, line 17 Other, (If line 11g amount exceeds 10% of line 25, column 350 350 700 (A) amount, list line 11g expenses on Schedule O.) 1,400 3,402 3,402 12 3,942 3,942 26,913 19,029 13 Information technology · · · · · 14 15 5,507 5,507 11,013 22,027 16 13,751 13,751 27,500 55,002 17 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 164,977 Conferences, conventions, and meetings 164,977 19 20 21 245 Depreciation, depletion, and amortization 245 22 5,618 5,618 22,470 11,234 . . . . . . . . . . . . . . . . . . 23 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.) 23,440 23,440 Project Expenditures 4,976 4,976 9,952 Bank Charges 15,360 15,360 C Consulting/Contract Services 13,764 13,764 27,528 d Computer Services 22,230 25,691 2,417 1,044 All other expenses e Total functional expenses. Add lines 1 through 24e · · · 121,675 112,043 420,098 653,816 25 Joint costs. Complete this line only if the 26 organization reported in column (B) joint costs from a combined educational campaign and ▶ X if fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)

art )	X	Balance Sheet			П
		Check if Schedule O contains a response or note to any line in this Part X	(A)		(B)
			Beginning of year		End of year
		Cash - non-interest-bearing	50,207	1	38,650
	1	Savings and temporary cash investments	272,743	2	123,625
	2	Pledges and grants receivable, net		3	
	3	Accounts receivable, net		4	
İ	4	Loans and other receivables from any current or former officer, director,			
	5	trustee, key employee, creator or founder, substantial contributor, or 35%			
		trustee, key employee, creator or tourider, substantial contributor, or or to		5	
	_	controlled entity or family member of any of these persons			
	6	Loans and other receivables from other disqualified persons (as defined		6	
ĺ		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		7	
2	7	Notes and loans receivable, net	16,838	8	14,898
Assers	8	Inventories for sale or use	1,062	9	
₹	9	Prepaid expenses and delened onengo	1,002		
	10a	Land, buildings, and equipment: cost or other			
		Dasis. Complete Fait VI of Concedio 5	1,418	10c	1,173
ļ	b	Less: accumulated depreciation 10b 7,756	45,028	11	47,086
Ì	11	Investments - publicly traded securities	45,026	12	2,7,000
	12	Investments - other securities. See Part IV, line 11		13	
١	13	Investments - program-related. See Part IV, line 11		14	
	14	Intangible assets		15	
ļ	15	Other assets. See Part IV, line 11	207 206	16	225,432
	16	Total assets. Add lines 1 through 15 (must equal line 33)	387,296 8,073	17	2,761
	17	Accounts payable and accrued expenses	8,073	18	2,701
	18	Grants payable		19	
1	19	Deferred revenue		20	
	20	Tax-exempt bond liabilities		21	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		<u> </u>	
တ္ထု	22	Loans and other payables to any current or former officer, director,		Veri veri	
		trustee, key employee, creator or founder, substantial contributor, or 35%		22	
Liabilities		controlled entity or family member of any of these persons		23	
_	23	Secured mortgages and notes payable to unrelated third parties		<del>                                     </del>	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X		25	
		of Schedule D		25 26	0.761
1	26	Total liabilities. Add lines 17 through 25	8,073	20	2,761
		Organizations that follow FASB ASC 958, check here			
စ္တ		and complete lines 27, 28, 32, and 33.			
ا پر	27	Net assets without donor restrictions	278,803	27	120,901
33	28	Net assets with donor restrictions	100,420	28	101,770
ᇢᅵ		Organizations that do not follow FASB ASC 958, check here			
Ē		and complete lines 29 through 33.		20	
ö	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	<u> </u>
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds		31	
3	32	Total net assets or fund balances	379,223	32	222,671
<u>a</u> 1		Total liabilities and net assets/fund balances	387,296	33	225,432

Form	990 (2019) Veterans For Feace Inc	1-0415961		ras	ge 12
Par	t XI Reconciliation of Net Assets				[v]
	Check if Schedule O contains a response or note to any line in this Part XI	1			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		197,5	
2	Total expenses (must equal Part IX, column (A), line 25)	2		553,8	
3	Revenue less expenses. Subtract line 2 from line 1	3		156,2	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		379,2	223
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 on Schedule O)	9		(;	<u>327)</u>
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10		222,0	<u> 571</u>
Pai	t XII Financial Statements and Reporting				П
	Check if Schedule O contains a response or note to any line in this Part XII				Щ_
		ı	1,750 to	Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other	_			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.		NEW COLUMN	201/2/201/2	1001(00)
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	207243	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:	:			
	Separate basis Consolidated basis Both consolidated and separate basis				9900
b	Were the organization's financial statements audited by an independent accountant?		2b	X	Tanahah
	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:				
	X Separate basis Consolidated basis Both consolidated and separate basis		Vilybid.	4441	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			ļ	
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	2500000	Х
	If the organization changed either its oversight process or selection process during the tax year, explain on				
	Schedule O.			HATEAN)	a statist 
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Single Audit Act and OMB Circular A-133?		3a		X
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 on Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990 (2	2019)

EEA

	Acknowledgement and General Information for Entities That File Returns Electronically	2019
Name(s) as shown on return		Employer Identification Number
Veterans For I		**-***5961
Entity address  3407 S Jeffe  Saint Louis,  Thank you for particle.  1. x 2019 886 The electronic  2. x 8868 an electronic s	MO 63118  articipating in IRS e-file.  8 income tax return for Federal was filed on the services were provided by Davis Associates CPAs	electronically
	E DO NOT SEND A PAPER COPY OF ENTITY'S RETURN YOU DO, IT WILL DELAY THE PROCESSING OF THE RE	

# Form **8868**

(Rev. January 2020)

Department of the Treasury Internal Revenue Service

# Application for Automatic Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Name of exempt organization or other filer, see instructions. Taxpayer identification number (TIN) Type or print 01-0415961 Veterans For Peace Inc Number, street, and room or suite no. If a P.O. box, see instructions. File by the due date for STE 219 3407 S Jefferson Ave filing your City, town or post office, state, and ZIP code. For a foreign address, see instructions. return. See instructions. Saint Louis, MO 63118 Enter the Return Code for the return that this application is for (file a separate application for each return) lo. **Application** Return Application Return Code Is For Code Is For Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 02 Form 1041-A 80 Form 990-BL Form 4720 (other than individual) 09 Form 4720 (individual) 03 Form 5227 10 Form 990-PF 04 05 Form 6069 11 Form 990-T (sec. 401(a) or 408(a) trust) 12 Form 990-T (trust other than above) 06 Form 8870 The books are in the care of ► Shelly Rockett, 3407 S. Jefferson Ave. #219, Saint Louis, MO 63118

Te	elephone No. ▶ 21.47256005 FAX No. ▶		
o lf:	elephone No. ▶ 314-725-6005 FAX No. ▶ the organization does not have an office or place of business in the United States, check this box		▶ □
		. If this is	
	this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)		
	e whole group, check this box · · · · · · ▶ 🗌 . If it is for part of the group, check this box · · · · ▶ 🔲 and a	uacn	
a list	with the names and TINs of all members the extension is for.		
1	I request an automatic 6-month extension of time until		
2	If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return  Change in accounting period		
3a	If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less		
	any nonrefundable credits. See instructions.	3a	\$
b	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and		
	estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$
c	Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by		
ŭ	using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	<b>S</b>
	ion: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form		

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2020)

#### **SCHEDULE A**

(Form 990 or 990-EZ) Department of the Treasury

**Public Charity Status and Public Support** 

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

➤ Attach to Form 990 or Form 990-EZ.

Open to Public

OMB No. 1545-0047

2019

Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information. Employer identification number

Inspection

		Organization					01-0415961	
		Reason for Public Charity	Status (All ord	anizations must co	mplete t	his part.)	See instructions.	
Par	LII	ization is not a private foundation becau	se it is: /For lines 1	through 12, check only o	ne box.)			
	rgan	zation is not a private foundation becau	sociation of churchs	es described in section 1	, 70(b)(1)(A)	(i).		
1	빔	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).  A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)						
2	$\vdash$	A hospital or a cooperative hospital serv	ica arasnization de:	scribed in section 170(b)	(1)(A)(iii).			
3	님	A medical research organization operate	nd in conjunction wi	th a hospital described in	section 17	O(b)(1)(A)(	iii), Enter the	
4	Ц		ed in conjunction wi	era nospital deserbed in		*(=)(-)(-)(-)(		
	П	hospital's name, city, and state:  An organization operated for the benefi	h of a gollogo or uni	versity owned or operate	d by a gove	ernmental u	nit described in	
5	П			versity owned or operator	u D, u go			
		section 170(b)(1)(A)(iv). (Complete Pa	TIII.) inii	locaribad in eastion 178(	h)/1)/Δ\/ <sub>V</sub> \			
6	Ц	A federal, state, or local government or	governmental unit u	filescribed in <b>section</b> 1700	nmental ur	nit or from ti	ne general public	
7		An organization that normally receives		i its support ironi a gover	IBIIGIIICII CI	II. O. II O. II.	io gonores parame	
	$\overline{}$	described in section 170(b)(1)(A)(vi). (	Complete Part II.)	Complete Part II )				
8	Ц	A community trust described in section	1/0(b)(1)(A)(VI). (\	Jumplete Fattii.) 470/61/41/Alliv) operated	l in coniunc	tion with a l	and-grant college	
9	Ш	An agricultural research organization de	scriped in <b>section</b>	inetwetions) Enter the	nama citu	and state o	f the college or	
		or university or a non-land-grant college	e of agriculture (see	instructions). Enter the	maine, ony,	and state o	, the compact	
		university:		(00) - file august from a	ontributions	s members	thin fees, and gross	
10	X	An organization that normally receives:	(1) more than 33 1	/3% of its support from C	a (2) bas a	o mare the	n 33 1/3% of its	
		receipts from activities related to its exe	empt functions - sul	oject to certain exception	s, and (z) n	11 tov) from	hucineces	
		support from gross investment income	and unrelated busi	ness taxable income (les	S Section 5	in tax) iion	i pusiriosous	
		acquired by the organization after June	30, 1975. See <b>sect</b>	ion 509(a)(2). (Complete	(Part III.)	\/A\		
11		An organization organized and operated	d exclusively to test	tor public safety. See sec	s)euc noix	)(4). . of ortoo	urn, out the numbers	
12		An organization organized and operate	d exclusively for the	e benefit of, to perform to	e functions	(a) (a) Soo	ecetion 509(a)(3)	
		of one or more publicly supported organ	lizations described	in section 509(a)(1) or se	ection busi	(a)(z). See :	inne 120, 12f and 12g	
		Check the box in lines 12a through 12a	I that describes the	type of supporting organ	ization and	compiete ii	mes ize, izi, anu izg.	
	а	Type I. A supporting organization of	perated, supervised	d, or controlled by its supp	orted orgal	nization(s),	typically by giving	
		the supported organization(s) the	power to regularly a	ppoint or elect a majority	of the aire	ctors or trus	stees of the	
		supporting organization. You mus	t complete Part IV,	Sections A and B.		_t4t_	-(a) bu bardaa	
	b	Type II. A supporting organization	supervised or contro	olled in connection with its	supported	organizatio	n(s), by naving	
		control or management of the sup	porting organization	vested in the same pers	sons that co	ontrol or ma	nage the supported	
		organization(s). You must comple	ete Part IV, Section	ıs A and C.			n translatur	
	С	Type III functionally integrated.	A supporting organiz	zation operated in connec	tion with, a	nd functions	ally integrated with,	
		its supported organization(s) (see i	nstructions). <b>You m</b>	iust complete Part IV, S	ections A,	D, and E.	( )	
	d	Type III non-functionally integra	led. A supporting or	rganization operated in co	ennection w	ith its suppo	orted organization(s)	
		that is not functionally integrated.	The organization ge	nerally must satisfy a dis	tribution re	quirement a	and an attentiveness	
		requirement (see instructions). You	ı must complete P	Part IV, Sections A and D	), and Part	V.		
	e	Check this box if the organization	received a written o	letermination from the IR	S that it is a	a Type I, Ty	pe II, Type III	
		functionally integrated, or Type III	non-functionally inte	egrated supporting organ	ization.			
	f	Enter the number of supported organize						
	g	Provide the following information about	t the supported org	anization(s).				
		i) Name of supported organization	(ii) EIN	(iil) Type of organization	1 ' '	organization	(v) Amount of monetary	(vi) Amount of other support (see
		<b>,</b>		(described on lines 1-10 above (see instructions))	listed in you docum	ur governing nent?	support (see instructions)	instructions)
				above (see instructions))			·	
					Yes	No		
							!	
(A)								
(B)								
(C)								
(D)								
					-			
(E)								

Page 2 Veterans For Peace Inc Schedule A (Form 990 or 990-EZ) 2019 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support (c) 2017 (d) 2018 (e) 2019 (f) Total (b) 2016 (a) 2015 Calendar year (or fiscal year beginning in) ▶ Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf ..... The value of services or facilities furnished by a governmental unit to the organization without charge ..... Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4 Section B. Total Support (f) Total (c) 2017 (d) 2018 (e) 2019 (a) 2015 (b) 2016 Calendar year (or fiscal year beginning in) ▶ Amounts from line 4 · · · · · · · · · · · Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from Net income from unrelated business activities, whether or not the business is regularly carried on . . . . . . . . . . . . . 10 Other income. Do not include gain or loss from the sale of capital assets Total support. Add lines 7 through 10 . . 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage 14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) . . . . . . . . . % 15 16a 33 1/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this b 33 1/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check 17a 10%-facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly 

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

instructions

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.

If the organization fails to qualify under the tests listed below, please complete Part II.)

	If the organization fails to qualify	under the te	sts listed belo	w, please co	inpiete Fart i	1.7	
Sec	tion A. Public Support					( ) 0040	/A Total
Cale	endar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	(f) Total
	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")	394,224	658,290	409,110	501,283	436,014	2,398,921
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	94,660	426,762	130,607	71,091	55,769	778,889
3	Gross receipts from activities that are not an	1					
	unrelated trade or business under section 513 •						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the		ļ				
	organization without charge						
6	Total. Add lines 1 through 5	488,884	1,085,052	539,717	572,374	491,783	3,177,810
	Amounts included on lines 1, 2, and 3			ĺ			
	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified		•	•			
	persons that exceed the greater of \$5,000					ļ	
	or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						3,177,810
Se	ction B. Total Support		,			1 20040	(5) Total
	endar year (or fiscal year beginning in) ▶	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	(f) Total
9	Amounts from line 6	488,884	1,085,052	539,717	572,374	491,783	3,177,810
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources · ·	1,357	6,900	4,862	7,949	5,808	26,876
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses			-			
	acquired after June 30, 1975						
C	Add lines 10a and 10b	1,357	6,900	4,862	7,949	5,808	26,876
11	Net income from unrelated business						
	activities not included in line 10b, whether		Lista Control of the				
	or not the business is regularly carried on					1	
12	Other income. Do not include gain or			1			
	loss from the sale of capital assets						
	(Explain in Part VI.)	30					30
13	Total support. (Add lines 9, 10c, 11,		7-				0 004 55
	10 \	490,271	1,091,952	544,579	580,323	497,591	3,204,716
14	First five years. If the Form 990 is for the or	ganization's firs	it, second, third	i, tourth, or tifth	tax year as a	Section bull(c)(d	'' <u> </u>
	organization, check this box and stop here						
Se	ction C. Computation of Public Suppo	ort Percentag	e	(5)		15	00.16.9/
15	Public support percentage for 2019 (line 8,	column (f), divid	ded by line 13,	column (f))		16	99.16 %
16	Public support percentage from 2018 Sched	dule A, Part III,				10	99.30 %
Se	ction D. Computation of Investment Ir	come Perce	ntage	10 1 /	E)	17	1 00 %
17	Investment income percentage for 2019 (line	e 10c, column (1	f), divided by lir	ne 13, column (	1))	17	1.00 %
18	Investment income percentage from 2018 St	chedule A. Part	III. line 17				1.00 %
198	22 4 128/ aumort tasts - 2010, if the organiz	ration did not ch	eck the box on	ı line 14, and IIr	ie 15 is more ii	iaii oo 1/070, af	ioiine tion · · ▶ 🏾
	47 is not more than 33 1/3% check this hox	and stop here.	The organizat	ion qualifies as	a publicly sup	porteu organiza	uon •• <b>► <u>ix</u></b>
b	an 4200/ number toote 2018 If the organiz	ration did not ch	ieck a box on li	ne 14 or line 18	Ja, and line to	is more man 55	1/370, and
	line 18 is not more than 33 1/3%, check this	box and stop h	ere. The organ	nization qualifie	s as a publicly	aupportations	<b>-</b> _
20	Private foundation. If the organization did r	ot check a box	on line 14, 19a	a, or 190, check	cuis dox and s	ee manuchons	

**Supporting Organizations** Part IV

(Complete only if you checked a box in line 12 on 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.)

O 1: A A !	Cupporting	Organizations
Section A. Ali	Supporting	Olyanizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? 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.
- 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).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- 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.
- 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.
- 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.
- 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 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.
- 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 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?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its 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.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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).
- 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).
- 9a 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.
  - 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 which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
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	t IV Supporting Organizations (continued)			
ı al	CITAL OUPPOINTS OF SUMMER CONTROL OF SUMER CONT		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)		444	
	below, the governing body of a supported organization?	11a		
h	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.	11c		
Sec	tion B. Type I Supporting Organizations			
		Programme in	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 <b>Part VI</b> 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.			bijibiji
		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,	2		all the
	supervised, or controlled the supporting organization.			L
Sec	tion C. Type II Supporting Organizations		Yes	No
	and the directors		, 65	
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 <b>Part VI</b> how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	1	14 (42.55)	The state of
	the supported organization(s).	<u> </u>		<u> </u>
Sec	ction D. All Type III Supporting Organizations		Yes	No
	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	10001000	100000000	
1	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?	1		<u> </u>
_	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	100000		
2	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how			
	the organization maintained a close and continuous working relationship with the supported organization(s).			
•	By reason of the relationship described in (2), did the organization's supported organizations have a	2	10019700	35545457
3	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 <b>Part VI</b> the role the organization's			
	supported organizations played in this regard.	3		
Sec	ction F. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see inst	ructio	ns).	
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The state of the second and the seco	ee inst	ructio	ins).
2	Activities Test. Answer (a) and (b) below.	essentia e	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	1 545944	g seiseasia
k	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	2000		
	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	~1		
	activities but for the organization's involvement.	2b	1,042,000	
3	Parent of Supported Organizations. Answer (a) and (b) below.			
a	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	2-		
	tructors of each of the supported organizations? Provide details in Part VI.	3a		
k	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	3b		48833
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	วน	1	

1 Check here if the organization satisfied the Integral Part Test as a qualifying t			in Part VI). <b>See</b>
instructions. All other Type III non-functionally integrated supporting organiz			
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Yea
1 Net short-term capital gain	1		(Optional)
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 Yea (optional)
Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c 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	10000000		
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		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functionally	integrat	ed Type III supporting o	organization (see
instructions)	٠	Mr salabaranga	J

Par	Type III Non-Functionally Integrated 509(a)(3	) Supporting Organiz	ations (continued)	
	tion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exer	npt purposes		
2	Amounts paid to perform activity that directly furthers exemp			
	organizations in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	ons	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions, Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	e organization is respons	ive	i
	(provide details in Part VI). See instructions.			
	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount		/#\	(iii)
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019			
_	(reasonable cause required - explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2019			
	From 2014			
	From 2015			
	From 2016			
	From 2017			
	From 2018			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
s	Applied to 2019 distributable amount			
	Carryover from 2014 not applied (see instructions)			
<u>:</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from			
•	Section D, line 7: \$			
a	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
<u></u>	Remaining underdistributions for years prior to 2019, if			
-	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h			
_	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			
-	and 4c.			
8				
_	Excess from 2015			
	Excess from 2016 · · · ·			
	Excess from 2017			
	Excess from 2018			

e Excess from 2019

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.)					
	·					
,						
· · · · · · · · · · · · · · · · · · ·						

#### **SCHEDULE C**

(Form 990 or 990-EZ)

#### **Political Campaign and Lobbying Activities**

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

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

- ► Complete if the organization is described below. ➤ Attach to Form 990 or Form 990-EZ.
  - ➤ Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C. Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B. Section 527 organizations: Complete Part I-A only.

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

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

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy

<ul> <li>Tax) (see separate instructions), the</li> <li>Section 501(c)(4), (5), or (6) orga</li> </ul>					
Name of organization	nizations, complete rait iii.		Employer iden	tification number	
Veterans For Peace Inc				415961	
Part I-A Complete if the	e organization is exempt under	section 501(c			
	anization's direct and indirect political camp				
definition of "political campaign	·	·			
	nditures (see instructions)		. <i></i>		
	paign activities (see instructions)			**	
Part I-B Complete if the	e organization is exempt under	section 501(c	:)(3).		.,
	tax incurred by the organization under sect				
	tax incurred by organization managers und				
	ction 4955 tax, did it file Form 4720 for this				No
4a Was a correction made?				· · · Tyes	No
b If "Yes." describe in Part IV.					
Part I-C Complete if the	e organization is exempt under	section 501(c	c), except section 501(	c)(3).	
1 Enter the amount directly expen-	ded by the filing organization for section 52	7 exempt function			
activities			▶ \$		
2 Enter the amount of the filing org	ganization's funds contributed to other orga	nizations for section	1		
527 exempt function activities			<i></i>		
3 Total exempt function expenditure	res. Add lines 1 and 2. Enter here and on F	form 1120-POL,			
line 17b			<i>.</i>		
4 Did the filing organization file For	rm 1120-POL for this year?			· · · Yes	] No
5 Enter the names, addresses and	d employer identification number (EIN) of a	II section 527 politic	al organizations to which the fil	ing	
organization made payments. For	or each organization listed, enter the amou	nt paid from the filin	ig organization's funds. Also en	ter	
the amount of political contribution	ons received that were promptly and direct	ly delivered to a sep	parate political organization, suc	ch	
as a separate segregated fund of	or a political action committee (PAC). If add	itional space is nee	ded, provide information in Par	t IV.	
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received a promptly and directly delivered to a separate political organization.  If none, enter -0	ind e
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

	ule C (Form 990 or 990-EZ) 2019 Veterans For P	eace Inc			01-04159	61 Page 2
		is exempt und	der section 50	1(c)(3) and filed	Form 5768 (elect	ion under
Pai	t II-A Complete if the organization section 501(h)).	10 Oxompa and		( // /		
		affiliated group (ar	d list in Part IV eac	h affiliated group mem	ber's name,	
Α (	Check ► ☐ if the filing organization belongs to an address, EIN, expenses, and share or address.	if excess lobbying 6	expenditures).	•		
	. [The same of the	A and "limited conti	ol" provisions apply	<i>(</i> ,		
ВС	Check  (if the filing organization checked box.)  Limits on Lobby	ing Expenditures			(a) Filing	(b) Affiliated
	(The term "expenditures" me	ans amounts paid	or incurred.)		organization's totals	group totals
	Total lobbying expenditures to influence public opinion	on (grassroots lobb	ving) · · · ·			
1a	Total lobbying expenditures to influence a legislative	hady (direct lobby)	no) ····			
b			· · · · · · · · · · · · · · · · · · ·			
 C	total lobbying experiditation (200 miles					
d	Office exempt barboac expenditures					
e	Total exempt purpose expenditures (add lines 1c an					
t	Lobbying nontaxable amount. Enter the amount from	If the following table	e in Dour			
r	columns.	The lebbying	nontaxable amoun	if is:		
	If the amount on line 1e, column (a) or (b) is:	20% of the amo				
- 1	Not over \$500,000		15% of the excess	over \$500 000		
]	Over \$500,000 but not over \$1,000,000		10% of the excess of			
1	Over \$1,000,000 but not over \$1,500,000		5% of the excess or			
	Over \$1,500,000 but not over \$17,000,000		3% OF BIG EXCESS O	Ver \$1,000,000.		
	Over \$17,000,000	\$1,000,000.				
g	Grassroots nontaxable amount (enter 25% of line 1					
h	Subtract line 1g from line 1a. If zero or less, enter -					
i	Subtract line 1f from line 1c. If zero or less, enter -0					
j	If there is an amount other than zero on either line	th or line 1i, did the	organization lie Fo	MM 4720		☐ Yes ☐ No
	reporting section 4911 tax for this year?			section 501(h)		
	(Some organizations that made a sec	4-Year Averagii ction 501(h) ele	ction do not hav	e to complete all	of the five columns	below.
	(Some organizations that made a sec	the separate in	structions for li	nes 2a through 2f.	)	
	555	110 00pa. 2.5		_		
	Lobbyi	ng Expenditures	During 4-Year Ave	raging Period		
			(b) 2017	(c) 2018	(d) 2019	(e) Total
	Calendar year (or fiscal year	(a) 2016	(b) 2011	(0) 20 10	<b>(,</b>	• •
	beginning in)					
	, and the second				•	•
2a	Lobbying nontaxable amount					
b	Lobbying celling amount					
	(150% of line 2a, column (e))				en en en en en en en en en en en en en e	
С	Total lobbying expenditures					
d	Grassroots nontaxable amount					
е	Grassroots ceiling amount (150% of line 2d, column (e))					
f						

During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:  a Volunteers?  b Paid staff or management (include compensation in expenses reported on lines 1c through 1 Mailings to members, legislators, or the public?	i)?	es	No X	An	rount	
legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:  a Volunteers?  b Paid staff or management (include compensation in expenses reported on lines 1c through 1i	i)?					
legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:  a Volunteers?  b Paid staff or management (include compensation in expenses reported on lines 1c through 1i	i)?		<b>.</b>			
referendum, through the use of:  Volunteers?  Paid staff or management (include compensation in expenses reported on lines 1c through 1i	i)?					
Volunteers?  Paid staff or management (include compensation in expenses reported on lines 1c through 1	i)?		-v-l			
Paid staff or management (include compensation in expenses reported on lines 1c through 1	i)? · · · · · · ·		^			
Media advertisements?		х				
			х			
I Mailings to members, legislators, or the public?		x				
Publications, or published or broadcast statements?			X			
Grants to other organizations for lobbying purposes?		_	X			
Direct contact with legislators, their staffs, government officials, or a legislative body?			Х			
Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			Х			
Other activities?		<u> </u>	1705-250			
Total. Add lines 1c through 1i						
Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		200223103	X			
of "Yes," enter the amount of any tax incurred under section 4912						
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912						
If the fining organization incomed a cooler.		<u> </u>		otion	Manigation.	egasen.
Part III-A Complete if the organization is exempt under section 501	(c)(4), section 501(c)(	o), O	1 50	CHOIL		
501(c)(6).					Yes	No
				1	163	110
Welle Substantially all (50 % of more) dues received horizonation by members				2		$\vdash$
Did the ordanization make only in house loopying expenditor of a factor of the				3		<b></b>
Did the organization agree to carry over lobbying and political campaign activity expenditures	s from the prior year?	 5) ^	r eo			
Part III-B Complete if the organization is exempt under section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, and 3 are the organization is exempt under section 501 for the organization is exempt under section 501 for the organization agree to carry over lookying and pointed section 501 for the organization agree to carry over lookying and pointed section 501 for the organization agree to carry over lookying and pointed section 501 for the organization is exempt under section 501 for the organization is exempt under section 501 for the organization is exempt under section 501 for the organization is exempt under section 501 for the organization is exempt under section 501 for the organization is exempt under section 501 for the organization is exempt under section 501 for the organization is exempt under section 501 for the organization is exempt under section 501 for the organization is exempt under section 501 for the organization is exempt under section 501 for the organization is exempt under section 501 for the organization is exempt under section 501 for the organization is exempt under section 501 for the organization is exempt under section 501 for the organization is exempt under section 501 for the organization is exempt under section 501 for the organization is exempt under section 601 for the organization for the organizat	re answered "No" OR	(h) F	art	III-A. li	ne 3	. is
answered "Yes."	o anomorous income	<b>(</b> ,		•		
		.	1			
Dues, assessments and similar amounts from members		Ī				
	•					
political expenses for which the section 527(f) tax was paid).  a Current year		.	2a			
b Carryover from last year		.	2b			
b Carryover from last year		.	2c			
c Total		.	3			
Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e)	f the	ŀ			-	
If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of	a lohhving					
excess does the organization agree to carryover to the reasonable estimate of nondeductible and political expenditure next year?		.	4			
and political expenditure next year?		.	5			
Taxable arribulit of lobbying and pointed experience (e.e., 1)						
Part IV Supplemental Information  Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affilia	ted group list): Part II-A lines :	1 and				

#### **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 2019

Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection Employer identification number

Vector   V	Name o	of the organization	Employer identification number
Complete if the organization answered "Yes" on Form 990, Part IV, line 7.  Complete if the organization answered "Yes" on Form 990, Part IV, line 7.  Part III Conservation Essements on for public use (e.g., recreation or education) — Prosecution of antisotric public of project in the organization information and concradivisors in writing that the assets hald in donor advisors in writing that the assets hald in donor advisor in writing that the assets hald in donor advisor in writing that the assets hald in donor advisor of the organization inform all grantees, denors, and donor advisors in writing that the assets hald in donor advisor of the organization of the organization inform all grantees, denors, and donor advisors in writing that grant funds can be used only for charaltsee purposes and not for the branted of the donor or donor advisors or advisor, or for any other purpose conferring importalistic purposes and not for the branted of the donor or donor advisors or for any other purpose conferring importalistic purposes and not for the branted of the donor or donor advisors or for any other purpose conferring importalistic purposes and not for the branted of the donor or donor advisors or for any other purpose conferring importalistic purposes and not for the branted of the donor or donor advisors or for any other purpose conferring important and used in the protection of natural habitatic purposes and the public use (e.g., recreation or education) — Preservation of a historically important land used in Protection or natural habitatic purposes and the public use (e.g., recreation or education) — Preservation of a conservation or assemble to the least day of the lax year.  2 to Tala number of conservation easements and actified historic structure flat number of conservation easements and actified historic structure flat or the least day of the lax year.  4 Number of conservation easements modeled in (e) acquired after 77,600g, and not on a historic structure flated in the National Register  5 Number of conse	Vete	erans For Peace Inc	
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.  1 Total number at end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of contributions to (during year) 4 Aggregate value of great from (during year) 4 Aggregate value of end of year 5 Did the organization inform all clonors and donor advisors in writing that great funds control? 5 Did the organization inform all clonors and donor advisors in writing that great funds can be used only for chartable purposes and not for the benefit of the donor of donor advisor, or for any other purpose contenting inpermissible private benefit?  Part III Conservation Easements.  Complete if the organization answered "Yes" on Form 990, Part IV, line 7.  Purpose(9) conservation essements had by the organization (foched all that apply).  Preservation of land for public use (e.g., recreation or education)  Preservation of an form public use (e.g., recreation or education)  Preservation of a conflete thatoric attribution in the form of a conservation essement on the last day of the tax year.  Total number of conservation essements included in (c) accepted that preservation of a conservation essements on the last day of the tax year.  Total number of conservation essements included in (c) accepted after 7/250G, and not on a historic structure listed in the National Register  Number of conservation essements included in (c) accepted after 7/250G, and not on a historic structure listed in the National Register  Number of conservation essements modified, transferred, released, extinguished, or terminated by the organization during the valuation structure listed in the National Register  Number of conservation essements modified, transferred, released, extinguished, or terminated by the organization during the year by S.  Number of conservation essements modified to conservation essements of section 170(h)(4)(8)(N))  Preservation essements and the organization reports conservation essements of section 170(h)(4)(8)(N)  In Part XIII, desc		t I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Acco	ounts.
Total number at end of year   Aggregate value of contributions to (during year)   Aggregate value of contributions to (during year)   Aggregate value of contributions to (during year)   Aggregate value of contributions to (during year)   Aggregate value of contributions to (during year)   Aggregate value of contributions to (during year)   Aggregate value of or other semantic of the organization inform all donors and conor advisors in writing fittal the assets held in donor advised funds are the organization inform all grantees, donors, and conor advisors in writing that grant funds can be used only for charactel purposes and not for the herealf of the donor or conor advisor, or for any other purpose conferring impermissible private benefit?		Complete if the organization answered "Yes" on Form 990, Part IV, line 6.	
2 Aggregate value of contributions to (during year) 4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all grantees, donors, and donor advisors in writing that the assets held in donor advised funds are 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 donors advisor, or for any other purpose only for charitable purposes and not for the benefit?    Conservation   Easements			(b) Funds and other accounts
2 Aggregate value of contributions to (during year) 4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all grantees, donors, and donor advisors in writing that the assets held in donor advised funds are 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 donors advisor, or for any other purpose only for charitable purposes and not for the benefit?    Conservation   Easements	1	Total number at end of 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 held in donor advised hurds are the organization's properly, subject to the organization's exclusive legal control?  1 Did the organization inform all 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 advisors in writing that grant funds can be used only for charitable purposes and not for the benefit?  Part III Conservation Easements.  Complete if the organization answered "Yes" on Form 990, Part IV, line 7.  1 Purpose(s) of conservation easements held by the organization (check all that apply).    Preservation of land for public use (e.g., recreation or education)   Preservation of a confided historic structure   Preservation of a confided historic structure   Preservation of natural habitat   Preservation of ones papes   2 Complete inse 2 through 2 dif the organization held a qualified conservation contribution in the form of a conservation easements in the last day of the tax year.  2 Complete inse 2 through 2 dif the organization held a qualified conservation contribution in the form of a conservation easements in the last day of the tax year.  3 Total number of conservation easements is not a certified historic structure included in (a)   2c   3 Number of conservation easements included in (c) acquired after 7725/06, and not on a historic structure listed in the National Register   Number of conservation easements included in (c) acquired after 7725/06, and not on a historic structure listed in the National Register   Number of conservation easements included in (c) acquired after 7725/06, and not on a historic structure listed in the National Register   Number of conservation easements included in (c) acquired after 7725/06, and not on a historic structure included in the National Register   Number of conservation easements included in (c) acquired af	2		
4. 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 inform all grantees, donors, and donor advisors in writing that the assets held in donor advisors of the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charidable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermisable private benefit?    Part     Conservation Easements	_		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donors advised funds are the organization property, subject to the organization seculative legal control?  6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charifable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?  Part III			
funds are the organization's property, subject to the organization's exclusive legal control?   Yes   No		Did the organization inform all donors and donor advisors in writing that the assets held in donor advised	
6 Did the organization inform all grantess, donors, and donor advisors in writing that grant funds can be used only for charifable purposes and not for the bonefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?    Conservation Easements had by the organization answered "Yes" on Form 990, Part IV, line 7.    Purpose(s) of conservation easements had by the organization (check all that apply)   Preservation of a historically important land area   Preservation of land for public use (e.g., recreation or education)   Preservation of a cartified historic structure   Preservation of open space   Complete life the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.  2   Complete life lines 2 attrough 2 to the tax year.  3   Total number of conservation easements   2		funds are the organization's property, subject to the organization's exclusive legal control?	
only for charlable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?    Part     Conservation Easements.	6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used	
conferring impermissible private benefit?    Part II   Conservation Easements.   Complete if the organization answered "Yes" on Form 990, Part IV, line 7.    Purpose(s) of conservation easements held by the organization (check all that apply)   Preservation of a historically important land area   Protection of natural habitat   Preservation of land for public use (e.g., recreation or education)   Preservation of a cartified historic structure   Preservation of open space   Complete lines 2 at through 2 dif the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.    Total number of conservation easements   2a   2b   2b   2d   2d   2d   2d   2d   2d		only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose	
Conservation Easements.		conferring impermissible private benefit?	
Complete if the organization answered "Yes" on Form 990, Part IV, line 7.  1 Purpose(s) of conservation easements held by the organization (check all that apply).  □ Proservation of land for public use (e.g., recreation or education) □ Proservation of proservation of pen space  2 Complete lines 2 at 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.  2 Total number of conservation easements  3 Total acreage restricted by conservation easements  4 Number of conservation easements on a certified historic structure included in (a)  5 Number of conservation easements on a certified historic structure included in (a)  6 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year  8 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year  9 Number of states where property subject to conservation easement is located  1 Number of states where property subject to conservation easements it located  2 Number of states where property subject to conservation easements it located  3 Number of states where property subject to conservation easements it located  4 Number of states where property subject to conservation easements it holds?  5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcing conservation easements during the year  1 Number of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  2 Number of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  2 Number of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  2 Number of expenses incurred in monitoring, inspecting, handling of violations,	Pai	till Conservation Easements.	
Purpose(s) of conservation easements held by the organization (check all that apply).  Preservation of land for public use (e.g., racreation or education)  Preservation of pen 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.  The 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.  The 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.  The preservation of conservation easements as certified historic structure included in (a)  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  Number of states where property subject to conservation easement is located  Number of conservation easement of the conservation easement is located  Number of states where property subject to conservation easement is located  Number of states where property subject to conservation easements during the year located in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year located in monitoring in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year located in monitoring inspecting, handling of violations, and enforcing conservation easements during the year located in monitoring inspecting, handling of violations, and enforcing conservation easements during the year located in monitoring inspecting handling of violations, and enforcing conservation easements		Complete if the organization answered "Yes" on Form 990, Part IV, line 7.	
Preservation of land for public use (e.g., recreation or education)   Preservation of a historically important land area   Protection of natural habitat   Preservation of open space    2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easements on the last day of the tax year.  3 Total number of conservation easements   2a	1	Purpose(s) of conservation easements held by the organization (check all that apply).	
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.  a Total number of conservation easements  b Total acreage restricted by conservation easements  c Number of conservation easements on a certified historic structure included in (a)  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 conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year   Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year   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  Number of states where property subject to conservation easement is located  Number of states where property subject to conservation easements is holds?  Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  No  staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Namount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements and balance sheet, and include, if applicable, the text of the footnote to the organizat		Preservation of land for public use (e.g., recreation or education)	
Preservation of open space 2 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.  a Total number of conservation easements b Total acreage restricted by conservation easements C Number of conservation easements on a certified historic structure included in (a) 2 c   Number of conservation easements on a certified historic structure included in (a) 2 c   Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 3 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 ▶ Number of states where property subject to conservation easement is located ▶ Number of states where property subject to conservation easement is located ▶ Number of states where property subject to conservation easement is located ▶ Number of states where property subject to conservation easements in sevential easements of the conservation easements during the periodic monitoring, inspection, handling of violations, and enforcing conservation easements during the year ▶ No staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ No easech conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(li)?  I near XIII, describe how the organization reports conservation easements in its revenue and expense statement, and belance 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 eaced, as permitted under FASB ASC 958, not to report			of a certified historic structure
2 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.  1 Total number of conservation easements  2		Preservation of open space	
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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 FASB 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 FASB 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 X  If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:		<b>▶</b> \$	
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<ul> <li>(ii) Assets included in Form 990, Part X</li> <li>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 FASB ASC 958 relating to these items:</li> </ul>		(i) Revenue included on Form 990, Part VIII, line 1	· · · · · · · • \$
2 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 FASB ASC 958 relating to these items:		(ii) Assets included in Form 990, Part X	<b>&gt;</b> \$
following amounts required to be reported under FASB ASC 958 relating to these items:	2	If the organization received or held works of art, historical treasures, or other similar assets for financial ga	in, provide the
		following amounts required to be reported under FASB ASC 958 relating to these items:	
a Revenue included on Form 990, Part VIII, line 1	а	Revenue included on Form 990, Part VIII, line 1	, <b>▶</b> \$
b Assets included in Form 990, Part X · · · · · · · · · · · · · · · · · ·	_	Assets included in Form 990, Part X	<b>&gt;</b> \$

	ule D (Form 990) 2019 Veterans For		\ut Llint		<b>TO COLUMN</b>	- O+ O+	01-04			Page 2
	rt III Organizations Maintainin			······································				122612 (	SOFILI	iueuj
3	Using the organization's acquisition, accession	on, and other records, c	песк апу о	trie tollov	ving that ma	ke signin	cant use or its			
_	collection items (check all that apply):		٦ ٦	٦			_			
a	Public exhibition		a [		or exchange	program	S			
b	Scholarly research		e L	_ Other						
C	Preservation for future generations	#								
4	Provide a description of the organization's co	ilections and explain no	w tney turti	ner the org	janization's	exempt p	urpose in Part			
	XIII.									
5	During the year, did the organization solicit or				-					ш
<b>~</b> _	assets to be sold to raise funds rather than to		of the orga	nization's	collection?			• • 🛄	Yes	∐ No
Ра	rt IV Escrow and Custodial Arr	_		000 Da		0				
	Complete if the organization 990, Part X, line 21.						eported an ar	nount o	1 For	m
1a	Is the organization an agent, trustee, custodia	an or other intermediary	for contrib	utions or c	ther assets	not				
	included on Form 990, Part X?							[]	res -	☐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the follow	ing table:							
							1	Amount		
C	Beginning balance					. 10	:			
d	Additions during the year					. 10	3			
е	Distributions during the year					. 16	•			
f	Ending balance					. 1f				
2a	Did the organization include an amount on Fo	orm 990, Part X, line 21	for escrow	v or custoc	lial account	liability?		🗍	Yes	No
b	If "Yes," explain the arrangement in Part XIII.					-				
Pa	rt V Endowment Funds.			,						
	Complete if the organization	answered "Yes" o	n Form	990, Pa	rt IV, line	10.				
		(a) Current year	(b) Prior	ryear	(c) Two year	rs back	(d) Three years bar	ck (e) F	our year	s back
1a	Beginning of year balance						,	<u> </u>		
þ	Contributions									
C	Net investment earnings, gains, and									
•	losses · · · · · · · · · · · · · · · · · ·									
ď	Grants or scholarships									
e	Other expenditures for facilities and							•		
6	programs									
£	F 3									
f	Administrative expenses									· · ·
g	End of year balance Provide the estimated percentage of the curre	nt year and halansa (lie		mn (a)) ha	ld on					
2 -	•	•	ie ig, colui	nn (a)) ne	io as:					
a	Board designated or quasi-endowment	%								
þ	Permanent endowment	%								
С	Term endowment	1.40004								
	The percentages on lines 2a, 2b, and 2c shot									
3a	Are there endowment funds not in the posses	sion of the organization	that are he	eld and adi	ministered fo	or the				
	organization by:							<u> </u>	Yes	No.
	(i) Unrelated organizations · · · · · · ·							3a		
	(ii) Related organizations							· · 3a(		
b	If "Yes" on line 3a(ii), are the related organiza	·		eR? · ·		• • • •	· · · · · · · · ·	· · 3i	<u> </u>	
1	Describe in Part XIII the intended uses of the	-	ent funds.							
Pai	t VI Land, Buildings, and Equip							_		
	Complete if the organization	answered "Yes" o	n Form (	990, Pai	rt IV, line	11a. Se	ee Form 990,	Part X,	line 1	10.
	Description of property	(a) Cost or other	basis	(b) Cost or	other basis	1	Accumulated	(d) B	ook valu	е
		(investmen	t)	(of	her)	de	epreciation			
a	Land	• •								
b	Buildings									
C	Leasehold improvements									
d	Equipment				8,929		7,756		1	,173

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

1,173

Part VII	<b>Investments - Other Securities.</b> Complete if the organization answ	CIOU TOO OILLOINI	· · · · · · · · · · · · · · · · · · ·	
	(a) Description of security or category (including name of security)		(b) Book value	(c) Method of valuation: Cost or end-of-year market value
I) Financial d	lerivatives			
	ld equity interests			
) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	(b) must equal Form 990, Part X, col. (B) line 1	12.) ▶		
Part VIII	Investments - Program Related.	i iorad "Vaa" on Earm	000 Part IV II	ine 11c. See Form 990, Part X, line
	(a) Description of investment	vered tes on rom	(b) Book value	(c) Method of valuation:
	(a) Sescription of Artestinent			Cost or end-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(0)				
(6)				
(7)				
(7) (8)				
(7) (8) (9)	n /h) must aqual Form 990. Part X. col. /B) line	131		
(7) (8) (9) Total. (Column	n (b) must equal Form 990, Part X, col. (B) line			
(7) (8) (9) Fotal. (Column	Other Assets		990, Part IV, I	ine 11d. See Form 990, Part X, line
(7) (8) (9) Total. (Column	Other Assets		990, Part IV, I	ine 11d. See Form 990, Part X, line
(7) (8) (9) otal. (Column Part IX	Other Assets	vered "Yes" on Form	990, Part IV, I	
(7) (8) (9) Total. (Column Part IX	Other Assets	vered "Yes" on Form	990, Part IV, I	
(7) (8) (9) -otal. (Column Part IX  (1) (2)	Other Assets	vered "Yes" on Form	990, Part IV, I	
(7) (8) (9) Total. (Column Part IX	Other Assets	vered "Yes" on Form	990, Part IV, I	
(7) (8) (9) otal. (Column Part IX  (1) (2) (3)	Other Assets	vered "Yes" on Form	990, Part IV, I	
(7) (8) (9) otal. (Column Part IX  (1) (2) (3) (4)	Other Assets	vered "Yes" on Form	990, Part IV, I	
(7) (8) (9) rotal. (Column Part IX  (1) (2) (3) (4) (5)	Other Assets	vered "Yes" on Form	990, Part IV, I	
(7) (8) (9) rotal. (Column Part IX  (1) (2) (3) (4) (5) (6)	Other Assets	vered "Yes" on Form	990, Part IV, I	
(7) (8) (9) Total. (Column Part IX  (1) (2) (3) (4) (5) (6) (7) (8) (9)	Other Assets. Complete if the organization answ	vered "Yes" on Form (a) Description	990, Part IV, I	
(7) (8) (9) Fotal. (Column Part IX  (1) (2) (3) (4) (5) (6) (7) (8) (9) Fotal. (Column	Other Assets. Complete if the organization answ	vered "Yes" on Form (a) Description	990, Part IV, I	
(7) (8) (9) Fotal. (Column Part IX  (1) (2) (3) (4) (5) (6) (7) (8) (9) Fotal. (Column	Other Assets. Complete if the organization answ  n (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answ	vered "Yes" on Form  (a) Description		
(7) (8) (9) Total. (Column Part IX  (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X	Other Assets. Complete if the organization answ	vered "Yes" on Form  (a) Description	990, Part IV, I	(b) Book va
(7) (8) (9) otal. (Column Part IX  (1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Column Part X	Other Assets. Complete if the organization answers.  In (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answers.	vered "Yes" on Form  (a) Description  15.)	990, Part IV, I	(b) Book va
(7) (8) (9) otal. (Column Part IX  (1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Column Part X	Other Assets. Complete if the organization answers.  In (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answers.  (a) Description of liability	vered "Yes" on Form  (a) Description  15.)	990, Part IV, I	(b) Book va
(7) (8) (9) otal. (Column Part IX  (1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Column Part X	Other Assets. Complete if the organization answers.  In (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answers.  (a) Description of liability	vered "Yes" on Form  (a) Description  15.)	990, Part IV, I	(b) Book va
(7) (8) (9) Fotal. (Column Part IX  (1) (2) (3) (4) (5) (6) (7) (8) (9) Fotal. (Column Part X  I. (1) Federal (2)	Other Assets. Complete if the organization answers.  In (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answers.  (a) Description of liability	vered "Yes" on Form  (a) Description  15.)	990, Part IV, I	(b) Book va
(7) (8) (9) Fotal. (Column Part IX  (1) (2) (3) (4) (5) (6) (7) (8) (9) Fotal. (Column Part X  (1) Federal (2) (3)	Other Assets. Complete if the organization answers.  In (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answers.  (a) Description of liability	vered "Yes" on Form  (a) Description  15.)	990, Part IV, I	(b) Book va
(7) (8) (9) Fotal. (Column Part IX  (1) (2) (3) (4) (5) (6) (7) (8) (9) Fotal. (Column Part X  1. (1) Federal (2) (3) (4)	Other Assets. Complete if the organization answers.  In (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answers.  (a) Description of liability	vered "Yes" on Form  (a) Description  15.)	990, Part IV, I	(b) Book va
(7) (8) (9) Fotal. (Column Part IX  (1) (2) (3) (4) (5) (6) (7) (8) (9) Fotal. (Column Part X  1. (1) Federal (2) (3) (4) (5)	Other Assets. Complete if the organization answers.  In (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answers.  (a) Description of liability	vered "Yes" on Form  (a) Description  15.)	990, Part IV, I	(b) Book va
(7) (8) (9) Fotal. (Column Part IX  (1) (2) (3) (4) (5) (6) (7) (8) (9) Fotal. (Column Part X  1. (1) Federal (2) (3) (4) (5) (6)	Other Assets. Complete if the organization answers.  In (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answers.  (a) Description of liability	vered "Yes" on Form  (a) Description  15.)	990, Part IV, I	(b) Book va
(7) (8) (9) Fotal. (Column Part IX  (1) (2) (3) (4) (5) (6) (7) (8) (9) Fotal. (Column Part X  1. (1) Federal (2) (3) (4) (5) (6) (7)	Other Assets. Complete if the organization answers.  In (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answers.  (a) Description of liability	vered "Yes" on Form  (a) Description  15.)	990, Part IV, I	(b) Book va

01-0415961 Schedule D (Form 990) 2019 Veterans For Peace Inc Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements 497,591 1 Amounts included on line 1 but not on Form 990, Part VIII, line 12: Net unrealized gains (losses) on investments . . . . . . . . . . . . Donated services and use of facilities ........... 2b Recoveries of prior year grants ........ 2c 2d Other (Describe in Part XIII.) d Add lines 2a through 2d 3 497,591 Subtract line 2e from line 1 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4a Other (Describe in Part XIII.) 4b 4c Add lines 4a and 4b Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 5 497,591 Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Part XII Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements 653,816 1 Amounts included on line 1 but not on Form 990, Part IX, line 25: 2 Donated services and use of facilities ....... 2a 2b 2c Other (Describe in Part XIII.) 2e Add lines 2a through 2d 653,816 Subtract line 2e from line 1 3 Amounts included on Form 990, Part IX, line 25, but not on line 1: 4 4a Investment expenses not included on Form 990, Part VIII, line 7b ..... Other (Describe in Part XIII.) 4b 4c Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 653,816 Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

#### **SCHEDULE F** (Form 990)

### Statement of Activities Outside the United States

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990.

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

Employer Identification number

/ete	rans For Peace Inc				01-0415	
Par	General Information o		Outside the L	Inited States. Complete if the	ne organization answered "\	es" on
	Form 990, Part IV, line			1 (1 ( ))	,	
1	For grantmakers. Does the organ other assistance, the grantees' eli					
	award the grants or assistance?			nce, and the selection cineria us		Yes No
	award the grants of assistance t					[] .00 [] .10
2	For grantmakers. Describe in Pa	rt V the organiz	ation's procedur	es for monitoring the use of its gr	ants and other assistance	
	outside the United States.					
3	Activities per Region. (The following	r	table can be du (c) Number of		*	(O Tabel
	(a) Region	(b) Number of offices in	employees,	(d) Activities conducted in the region (by type) (such as,	(e) If activity listed in (d) is a program service,	(f) Total expenditures for
		the region	agents, and independent	fundraising, program services, investments, grants to recipients	describe specific type of service(s) in the region	and investments in the region
			contractors in the region	located in the region)		
(1)						ļ
(0)						
(2)	,					
(3)				***		Anadona
<u> </u>						
(4)						
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(8)						
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11)						
12)						
12)						
13)						
14)						
f E\						
15)						
16)	2.2					
17)		-				
3a	Subtotal					
b	Total from continuation sheets to Part I					
	Table (add lines 2s and 2h)					

01-0415961

Page 2

Veterans For Peace Inc

Schedule F (Form 990) 2019 (i) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990 (h) Description of noncash assistance (g) Amount of noncash assistance Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Manner of cash disbursement Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt (e) Amount of cash grant (d) Purpose of grant by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter (c) Region Enter total number of other organizations or entities (b) IRS code section and EIN (if applicable) (a) Name of organization Schedule F (Form 990) 2019

| Part II | Grants **4** (15) £ 12) (13) (16) Ê ε (8) 6 9 3 (3) 4 (2)

EEA

Veterans For Peace Inc

Schedule F (Form 990) 2019

Veterans For Peace Inc

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

Schedule F (Form 990) 2019 Fair marke (h) Method of valuation (book, FMV, appraisal, other) (g) Description of noncash assistance none (f) Amount of noncash assistance (e) Manner of cash disbursement Transfer 1,505 (d) Amount of cash grant H (c) Number of recipients Middle East and (b) Region North Africa (1) Ibrahim Ismael Ibrahim (a) Type of grant or assistance 9 (13) (12) (13) (15) (16) <u>N</u> ල € (5) 9 3 8 <u></u> (<del>1</del>4) (17) 18 E A

chedul	F (Form 990) 2019 Veterans For Peace Inc	01-0415	961	Page 4
	IV Foreign Forms			
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)		Yes	⊠ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)		Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)		☐ Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)		Yes	⊠ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)		Yes	X No

Schedule F (Form	1 990) 2019 Page 5
Part V	Supplemental Information
T. SALES	Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method;
	Provide the information required by fact, line 2 (accounting method): Part III (accounting method): and
	amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and
	Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional
	Information. See instructions.

#### **SCHEDULE 0**

(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 For Peace Inc	01-0415961
01. Form 990 governing body review (Part VI, line 11)	
Organization's process to review Form 990	
Review will be done prior to mailing	
02. Form 990 availability to public (Part VI, line 18)	
Governing documents disclosure explanation available to the	public upon request
03. Governing documents, etc, available to public (Part VI,	
Governing documents available to the public	
	Anat VI line (1)
04. Explanation of other changes in net assets or fund bala	
Accounting adjustment	
05. List of other expenses (Part IX, line 24e)	
See overflow statement for detail	
See Over110" Statement ==	
06. General explanation attachment	
990 Part IV Line 16 - Water Purification Systems	

Management and General Off  Description  Office Expense Printing - Other  Management and General Off  Description  Office Expense Printing - Other  Management and General Off  Description  Office Expense Printing - Other  Office Expense Printing - Other	Total:  Total:	\$ \$ \$	Amount  1,000  1,000  1,000  Amount  9,887  1,946  11,833  Amount  2,445 4,931 5,439 6,214 19,029
Description Denations  Accounting Fees  Description Legal & Accounting Payroll fees  Program Services Office  Description Office Expense Printing - Newsletter/Journal Postage Printing - Other  Management and General Off  Description Office Expense Postage  Description Office Expense Postage  Description Office Expense Postage	Total:	\$\$ \$	Amount  1,000  1,000  1,000  Amount  9,887  1,946  11,833  Amount  2,445 4,931 5,439 6,214
Description Description Legal & Accounting Payroll fees  Program Services Office  Description Office Expense Printing - Newsletter/Journal Postage Printing - Other  Management and General Off  Description Office Expense Postage Program Services Office  Postage Printing - Newsletter/Journal Description Office Expense Postage  Description Office Expense	Total:	\$\$ \$	1,000 1,000 1,000 Amount 9,887 1,946 11,833 Amount 2,445 4,931 5,439 6,214
Accounting Fees  Description Degal & Accounting Deayroll fees  Program Services Office  Description	Total:	\$\$ \$	1,000 1,000 1,000 Amount 9,887 1,946 11,833 Amount 2,445 4,931 5,439 6,214
Accounting Fees  Description Legal & Accounting Payroll fees  Program Services Office  Description Office Expense Printing - Newsletter/Journal Postage Printing - Other  Management and General Off  Description Office Expense Postage  Postage  Description Office Expense  Description Office Expense	Total:	\$\$ \$	Amount 9,887 1,946 11,833  Amount 2,445 4,931 5,439 6,214
Accounting Fees  Description Legal & Accounting Payroll fees  Program Services Office  Description Office Expense Printing - Newsletter/Journal Postage Printing - Other  Management and General Office  Description Office Expense Postage  Postage  Description Office Expense  Postage  Description Office Expense	Total:	\$ \$ \$	Amount  9,887  1,946  11,833  Amount  2,445  4,931  5,439  6,214
Description Description Description Description Description Description Program Services Office Description	Total:	\$	9,887 1,946 11,833 Amount 2,445 4,931 5,439 6,214
Program Services Office  Program Services Office  Description Office Expense Printing - Newsletter/Journal Postage Printing - Other  Management and General Off  Description Office Expense Postage  Postage  Postage  Description Office Expense	Total:	\$	9,887 1,946 11,833 Amount 2,445 4,931 5,439 6,214
Program Services Office  Program Services Office  Description Office Expense Printing - Newsletter/Journal Postage Printing - Other  Management and General Off  Description Office Expense Postage  Postage  Description Office Expense  Description Office Expense	Total:	\$	1,946 11,833 Amount 2,445 4,931 5,439 6,214
Program Services Office  Description  Office Expense Printing - Newsletter/Journal  Postage Printing - Other  Management and General Off  Description  Office Expense  Postage  Postage  Description  Office Expense  Description  Office Expense	Total:	\$	Amount  2,445 4,931 5,439 6,214
Description Office Expense Printing - Newsletter/Journal Postage Printing - Other  Management and General Off Description Office Expense Postage  Description Office Expense Postage	Total:		2,445 4,931 5,439 6,214
Description Office Expense Printing - Newsletter/Journal Postage Printing - Other  Management and General Off Description Office Expense Postage  Description Office Expense Postage	Total:		2,445 4,931 5,439 6,214
Office Expense Printing - Newsletter/Journal Postage Printing - Other  Management and General Off Description Office Expense Postage  Description Office Expense	Total:		2,445 4,931 5,439 6,214
Printing - Newsletter/Journal Postage Printing - Other  Management and General Off  Description Office Expense Postage  Description Office Expense	Total:		4,931 5,439 6,214
Printing - Other  Management and General Off  Description Office Expense Postage  Description Office Expense	Total:	\$	5,439 6,214
Management and General Off  Description Office Expense Postage  Description Office Expense	Total:	\$	19,029
Management and General Off  Description  Office Expense  Postage  Description  Office Expense		\$	19,029
Description Office Expense Postage  Description Office Expense	fice		
Description Office Expense			
Office Expense Postage  Description Office Expense			Amount
<b>Description</b> Office Expense		\$	1,222 2,720
Office Expense	Total:	s	3,942
Office Expense	IOCAI.	٧==	
Office Expense			
Office Expense			
Office Expense			Amount
		\$	1,223 2,72
Postage	Total:	<u>_</u>	3,942
	TOCAL.	Y	

990	Overflow Statement		<b>2019</b> Page 2
me(s) as shown on return		FEIN	0415061
eterans For Peace	Inc	<u> </u>	1-0415961
	Program Services Occupa	ncy	
escription			Amount
ent .		<u> </u>	6,050 3,015
elephone			1,894
tilities epairs and Mainte	nance		54
epairs and marned		Total: \$	11,013
	Management and General Occ	cupancy	
escription			Amount
ent		\$	3,025
elephone			1,508 947
tilities Nadata			2
epairs and Mainte	nance	Total: \$	5,507
		10 car.	
	Fundraising Occupancy	Ľ	
escription		<u>.</u>	Amount 3,025
ent		Y	1,508
elephone tilities			94
epairs and Mainte	enance		2.
CPATIO and marno		Total: \$	5,50
	Program Conferences		
escription			Amount
onvention Expense	es COGS	<u> </u>	157,315 7,662
rogram expenses		Total: \$	164,97
		10041. Y	
escription			Amount 7 441
rogramming	7	\$	7,440
rogram- Golden Ru	116	Total: \$	23,440
		10041. 7	=

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990	Overflow Statement	Page 3	
ame(s) as shown on return	Inc	FEIN 01-04159	61
Veterans For Peace	THE		
	Bank Charges		
		Amount	
Description Bank Charges		\$	364
Merchant Fee		4,	558 54
Finance Charges		Total: \$4,	976
		<del></del>	
	Bank Charges		
Description		<u>Amount</u>	264
Bank Charges Merchant Service		<u> </u>	364 558
Finance Charge			54
		Total: \$4,	976
	Program Other Expense	s	
	110g1tim outon maponio	<u>-</u> Amount	
<b>Description</b> Entertainment and I	Meals	\$	887
Professional devel	opment		$\frac{105}{140}$
Dues, Books, Subsc Equipment Rental	riptions	1,	285
		Total: \$2,	417
	Management Other Expens	es	
Description		Amount	
Taxes and Licenses		\$ 1	2: 02:
Penalties			044
	Fundraising Other Expen	ses	
Description		Amount	~~
Fundraising		\$ 22, Total: \$ 22,	
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990 Overflow Statement	<b>2019</b> Page 4
Name(s) as shown on return	FEIN
Veterans For Peace Inc	01-0415961

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### Unrestricted Capital

Description		Amount	
Beg Fund Balance	\$	25	
Unrestricted		<u>277,099</u>	
Net Income		(156,22 <u>3</u> )	
	Total: \$	120,901	

## Temporary Restricted Capital

Description	Amount	
Deported Vets	\$	1,350
Other		100,420
Total:	\$	101,770
	`	

Description	Amount	
Accounting adjustment	\$ (32	<u>27</u> )
Total: S	<del>5</del> –32	_ ,