#### 990

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

OMB No. 1545-0047 2017

Department of the Treasury Internal Revenue Service

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.

**Open to Public** 

A	For th	ne 2017 calend	lar year, or tax year	beginning		, 2017, and e	endina	, 20		
В		if applicable:		Veterans For Peac	e Inc	, ,	g	D Employer identification no.		
	Address	s change	Doing business as					01-0415961		
	Name c	hange		P.O. box if mail is not delivered to	street address)		Room/suite	E Telephone number		
	Initial return 1404 N Broadway							•		
	Final re	turn/terminated		province, country, and ZIP or foreign	n nostal code			(314) 725-6005 G Gross receipts		
	Amende	ed return		s, MO 63102	11 poola, 0000			· ·		
П	Application conding.							\$ 580,641		
			Same as C	<del></del>	Solidon		H(a) Is this a group retu			
1	Tax-exe	mpt status:	501(c)(3) 501(c)		4947(a)(1) or	527	H(b) Are all subordia			
J	Website		veteransfor	·	1 4547(a)(1) 01 L	] 52/		sch a list. (see instructions)		
ĸ			Corporation Trust			1, 1/2 // // //	H(c) Group exemp			
	ırt I	Summar		Nesociation Clothel &		L Year of formation:	.985 M State of	legal domicile; MO		
	1			mission or most significant	Lastivition: at					
4.	'	Drieny descri	be the organizations	mission of most significant	activities: Sta	op war as a m	eans of confl	lict resolution		
& Governance										
<u>ra</u>										
ΛeΓ	,	Charle this h	<b>\</b> \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \							
တိ	2	Check this bo	x ► ii the organi	zation discontinued its oper	rations or disposed		t	1		
00	3			governing body (Part VI, lin			<u></u>	3 13		
Activities	4			embers of the governing boo		•		4 13		
Š	5			yed in calendar year 2017 (		* * * * * * * * * * *		5 8		
Aci	6		of volunteers (estim	**			1	6		
-	7a			from Part VIII, column (C),				7a 0		
	b	Net unrelated	business taxable in	come from Form 990-T, line	34		7	7b 0		
	1.	_					Prior Year	Current Year		
a	8	0.58,290								
Ž	9			= -		L	426,7	62 130,607		
Revenue	10			mn (A), lines 3, 4, and 7d)			7,1			
ď	11			A), lines 5, 6d, 8c, 9c, 10c,			6,1			
	12			n 11 (must equal Part VIII, c			1,098,3			
	13	Grants and si	milar amounts paid (	Part IX, column (A), lines 1-	-3)		1,9			
	14	Benefits paid	0							
Ø	15	Salaries, othe	233,3	40 235,632						
Expenses	16a	Professional f	undraising fees (Par	IX, column (A), line 11e)				0		
Per	b			K, column (D), line 25)		97,700				
Ä	17	Other expense	es (Part IX, column (	A), lines 11a-11d, 11f-24e)			641,9	29 440,252		
	18			must equal Part IX, column			877,2			
	19			line 18 from line 12		<i></i> .	221,1			
Net Assets or Fund Balances							Beginning of Current Yea			
ets	20	Total assets (F	Part X, line 16)				558,8			
ASS	21	Total liabilities	(Part X, line 26)				10,10			
誓	22	Net assets or	fund balances. Subt	ract line 21 from line 20 .		<i></i>	548,74			
Pai	t II	Signatur					540,71	*5  432,076		
Unde	r penaltic	es of perjury, I decla	are that I have examined th	is return, including accompanying	schedules and statemer	nts, and to the best of my	nowledge and belief, it is			
true,	correct, a	and complete. Decla	aration of preparer (other the	nan officer) is based on all informat	ion of which preparer ha	as any knowledge,				
		Micha	el T McPhears	on			ļ			
Sigr	1	Signature					Da	ale		
Here	•	Michae	el T McPhears	on, Executive Dir	eator					
			int name and title	on, Executive Dir	.eccor					
	L	Print/Type prepa		Preparer's signature		Date	Т П			
aid	•		M Davis CPA	, <u> </u>	a CDA		Check if	T		
	arer			Parlene M Davi	S CPA	11-15-2018	self-employed	P00644326		
	Only			Associates CPAs			Firm's EIN			
	,	riims audiess		N Hwy 67			Phone no.			
/lav H	ne IRS	discuss this ro		ssant MO 63034 r shown above? (see instru	ictions)		314-	653-0008		
, 41	· ~ · · · · ·		····· Truit alle prepare	TOTAL BOOKET LICE INSIIII	Part 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			IXI YAC I NA		

	n 990 (2017) Veterans For Peace Inc		<b>01-0415961</b> Pag
Pē	rt III Statement of Program Service	•	
4	Check if Schedule O contains a response	or note to any line in this Part III	
1	Briefly describe the organization's mission:	•	
	Stop war as a means of conflict :	resolution	
2	Did the organization undertake any significant progra	am services during the year which were no	t listed on the
	prìor Form 990 or 990-EZ?		
	If "Yes," describe these new services on Schedule O		<del>-</del>
3	Did the organization cease conducting, or make sign	nificant changes in how it conducts, any pro	gram
	services?	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomp		
	expenses. Section 501(c)(3) and 501(c)(4) organizate the total expenses, and revenue, if any, for each program of the total expenses.		rants and allocations to others,
	the total expenses, and revenue, it any, for each pro-	дтатт вегисе теропец.	
Ia	(Code: ) (Expenses \$ 44	2,573 including grants of \$	) (Revenue \$
	Support over 100 local chapters t		
	newsletter, annual convention. Hu	indreds of local actions ex	posing the true costs of war
	carried out by chapters. Iraq Wat		
			that have been damaged in the US
	invasion.		
b	(Code: ) (Expenses \$	including grants of \$	) (Revenue \$
;	(Code:) (Expenses \$	including grants of \$	) (Revenue \$
-	Other program services (Describe in Schedule O.)		
_	(Expenses \$ including grain Total program service expenses >		enue \$ )
	Total program service expenses	112 572	

# Form 990 (2017) Veterans For Peace Inc Part IV Checklist of Required Schedules

<u> </u>	Oncokiist of Nequired Schedules			
	le the appoint the described in a set of 5047 VOV. 40477 VVV.44.	<u></u>	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	١.		
2		1	X	
3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	ļ <u> </u>
				177
4	candidates for public office? If "Yes," complete Schedule C, Part I  Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	3		X
•	election in effect during the tax year? If "Yes," complete Schedule C, Part II			1,7
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	4	-	X
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III · · · · · · · · · · · · · · · · ·	5		v
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	-	-	X
	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		<sub>v</sub>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	<u> </u>	-	<u>X</u>
	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,"	<b>-</b>		<u> </u>
	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			- 23
	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		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
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.			7 1
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	Χ	
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		Χ
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
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		_X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
t	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
4.0	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		_X_
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		į	
JL.		12a		X
D	Was the organization included in consolidated, independent audited financial statements for the tax year? If		l	
13	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
is I4a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
b b	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
	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	146	ł	v
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	14b		<u>X</u>
-	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	13	+	<u> </u>
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Х	
7	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
8	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
9	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		Χ

#### Veterans For Peace Inc 01-0415961 Page 4 Checklist of Required Schedules (continued) Part IV Yes No 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a Χ 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 Χ 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 Χ Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the 23 organization's current and former officers, directors, trustees, key employees, and highest compensated X 23 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than 24a \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a 24a Χ ь 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 to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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 Χ 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? Χ 25b 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or Χ 26 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III Х Was the organization a party to a business transaction with one of the following parties (see Schedule L, 28 Part IV instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV ........ 28a Χ A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Χ 28b An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Χ 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," 32 Χ 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations Χ 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, Χ 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? X 35a 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 Χ 35b 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 Χ 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,

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

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

38

37

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### 17) Veterans For Peace Inc Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Part V

	Check it Schedule O contains a response or note to any line in this Part V			
10	Enter the number reported in Box 2 of Four 4000 False 0 '/ 4 P A		Yes	No
1a	i i i i i i i i i i i i i i i i i i i	)		
t	The state of the s	)		
C	to t			
20	reportable gaming (gambling) winnings to prize winners?	1c	X	$\perp$
2a	The state of the s			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a	3		
b	The state of the s	2b		X
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	great	3a		X
b	provide any objective of the state of the st	3b		$\perp$
4a	y and the state of			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			İ
	account)?	4a		X
b	- The foreign doublet			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR).			1 1
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		1.1	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			:
	and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		X
đ	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			1
	sponsoring organization have excess business holdings at any time during the year?	8		İ
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		Х
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter:		1.1	
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		* * *	ı
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.	10a		
b	Enter the amount of reserves the organization is required to maintain by the states in which	ĺ		
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	ĺ	1	
	hand a second and a second a s	14a		Χ
	KINA III. VELA III. III. III. III. III. III. III. II	14a 14b		
		174		

Veterans For Peace Inc 01-0415961 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 13 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent 13 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? Χ Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, or trustees, or key employees to a management company or other person? Х 3 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders? X 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Χ Are any governance decisions of the organization reserved to (or subject to approval by) members, b stockholders, or persons other than the governing body? 7b Χ Did the organization contemporaneously document the meetings held or written actions undertaken during 8 the year by the following: Each committee with authority to act on behalf of the governing body? 8h Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c 13 Did the organization have a written whistleblower policy? . . . . . . . . . . . . . . . . Did the organization have a written document retention and destruction policy? 14 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a **b** Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a Χ 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? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(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 in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 19 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:

Shelly Rockett (314)725-6005, 1404 N Broadway, Saint Louis, MO 63102

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Veterans For Peace Inc

01-0415961

<sup>2</sup>aαe 7

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

			(C)							
(A)	(B)	(do	Position (do not check more than one box, unless person is both an officer and a director/trustee)				(D)	(E)	(F)	
Name and Title	Average hours per						Reportable compensation	Reportable compensation from	Estimated amount of	
	week (list any hours for	Cilic	.c. a.,	<b>Q</b>	10010	1711 G31CC	,	from	related	other
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	32 1 2 (D) 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1		the organization (W-2/1099-MISC)	organizalions (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Gerry Condon	2.00									
President		Х		X				0	0	0
(2) Barry_Ladendorf	2.00_			ĺ						
Director		Х						0	0	0
(3) Mark Foreman	2.00									
Director		X						0	0	0
(4) Marti_Downing	2.00_	,,				i				
Director		X						0	0	0
(5) Patrick McCann	2.00	v	l	1					_	_
Director		X						0	0	0
(6) Joey King Director	2.00	Х								•
(7) Adrienne Kinne	2.00	Λ		$\dashv$				0	0	00
Vice President		Х		Χ						•
(8) Maurice Martin	2.00	2/2		- 23				0	0	0
Director	<u>Z</u> 00_	Х	-	ĺ	}			o	0	0
(9) Monisha Rios	2.00	23		$\dashv$					<u>_</u>	<u>U</u>
Director	=	Х						o	0	0
(10)Kourtney Andar	2.00				_			<u> </u>	-	
Treasurer	=	Х		X	İ			o	0	0
(11)Monique Salhab	2.00		_							
Secretary		Χ		X	- [	ĺ		o	o	0
(12)Dan Shea										* *
Director		X						o	o	0
(13)Brian Trautman	2.00									
Director		Χ	_	_	_	]		o	0	0
(14)										

Note of the compensation	Par	t VII Section A. Officers, Directors, Trustees,	Key Employ	ees, a	nd F	ligh	est (	Compe	nsa	ited Employees (	continued)		
Complete Scheduled   For any individual listed on line 1s, is the sum of reportable compensation from the organization is trans transcribed employee on line 1s? If "I'ves," complete Scheduled   For such hardwidted employee on line 1s? If "Yes," complete Scheduled   For such hardwidted (employee)   For such hardwidted (employee			(B) Position (do not check more than one								1		
(16) (17) (18) (19) (20) (21) (22) (23) (24) (25) (25) (26) (27) (27) (28) (29) (29) (29) (29) (29) (29) (29) (29			week (list any hours for related organizations below dotted	office	er and	a dir	ector/t	trustee)	Former	from the organization	related organizations	(	amount of other ompensation from the organization and related rganization
(17) (18) (19) (20) (21) (22) (23) (24) (25) (26) (27) (28) (29) (29) (29) (29) (29) (29) (20) (20) (20) (21) (22) (23) (24) (25) (25) (26) (27) (28) (29) (29) (29) (20) (20) (20) (20) (20) (21) (22) (23) (24) (25) (25) (26) (27) (28) (29) (29) (20) (20) (20) (20) (21) (22) (22) (23) (24) (25) (25) (26) (27) (27) (28) (28) (29) (29) (20) (20) (20) (20) (21) (22) (22) (23) (24) (25) (25) (26) (27) (27) (28) (29) (29) (20) (20) (20) (20) (21) (21) (22) (22) (23) (24) (25) (25) (26) (27) (27) (28) (29) (20) (20) (20) (21) (21) (22) (22) (23) (24) (25) (25) (26) (26) (27) (27) (27) (28) (29) (20) (20) (21) (21) (22) (22) (23) (24) (24) (25) (25) (26) (26) (27) (27) (27) (27) (27) (27) (27) (27	(15)		<u> </u>										
(18) (19) (20) (21) (22) (23) (24) (25) (26) (27) (28) (29) (29) (29) (29) (29) (29) (20) (20) (20) (20) (21) (22) (23) (24) (25) (26) (27) (28) (28) (29) (29) (29) (29) (20) (20) (20) (20) (20) (20) (20) (20	<u>(16)</u>						-						
(29)  (21)  (22)  (23)  (24)  (25)  1b Sub-total  c Total from continuation sheets to Part VII, Section A  d Total (add lines 1b and 1c)  2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization  3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual  4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual  6 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual  7 Section B. Independent Contractors  1 Complete this table for your five highest compensation for the calendar year ending with or within the organization's tax year.  (A) (a) (b) (c)	<u>(17)</u> _	~~							-				
(20) (21) (22) (23) (24) (25)  1b Sub-total  1 Total from continuation sheets to Part VII, Section A  1 Total (add lines 1) and 1c)  2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization   3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual  4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  5 Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A) (B) (B) (C)	<u>(18)</u>												
(22)  (23)  (24)  (25)  1b Sub-total  1 Total from continuation sheets to Part VII, Section A  1 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization is any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual  4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual for services rendered to the organization? If "Yes," complete Schedule J for such person  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  5 Cection B. Independent Contractors  1 Complete this table for your five highest compensation for the calendar year ending with or within the organization's tax year.  (A) (B) (B) (C)	<u>(19)</u> _												
(22)  (23)  (24)  (25)  1b Sub-total  c Total from continuation sheets to Part VII, Section A  d Total (add lines 1b and 1c)  2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization  Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual  4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  5 Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A) (8) (6)	(20)_												
(23)   (24)   (25)   (25)   (25)   (25)   (25)   (25)   (26)   (27)	(21)												
25    1b   Sub-total	(22)												
1b Sub-total	(23)								-	1			
1b Sub-total  c Total from continuation sheets to Part VII, Section A  d Total (add lines 1b and 1c)  2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶  3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual  4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  5 Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A) (B) (C)	(24)											]	
Total from continuation sheets to Part VII, Section A  Total (add lines 1b and 1c)  Total (add lines 1b and 1c)  Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization  Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual  For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  Section B. Independent Contractors  Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  (B)  (C)	(25)												
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 0  Yes  3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	C	Total from continuation sheets to Part VII, Section Total (add lines 1b and 1c)	n A					•••		0	0		
Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	2	Total number of individuals (including but not limited t	o those listed	d above	e) wł	ho re	ceiv	ed mor	e ti	nan \$100,000 of		1	
organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	3											3	Yes
for services rendered to the organization? If "Yes," complete Schedule J for such person	4	organization and related organizations greater than \$	150,000? <i>If</i> "	Yes," c	отр	lete	Sch	edule J	for	such		4	
Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  (B)  (C)	5											5	
compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  (B)  (C)	ectio	on B. Independent Contractors		,			,						
New and love and the state of t	1	compensation from the organization. Report compens											
Name and dustriess address  Description of services  Compensation					-								
		wanie and dusiness address								Description of se	rvices	Comp	ensation
Total number of independent contractors (including but not limited to those listed above) who	2	Talalanaharafiada											

Part VIII Statement of Revenue

		Check if Schedule O contains a response or	note to any line in th				
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
रह रह	18	a Federated campaigns 1a	ı				
Contributions, Gifts, Grants and Other Similar Amounts		b Membership dues 1b	134,606				
S, G		c Fundraising events 1c	;				
Gift iar	1	d Related organizations · · · · · · · 1d					
S.E.		e Government grants (contributions) · · 1e	!				
er S	1	f All other contributions, gifts, grants,					
ള		and similar amounts not included above 1f	274,504				
g d	1	g Noncash contributions included in lines 1a-1f: \$					
	<u> </u>	h Total. Add lines 1a-1f		409,110	A TALL THE STATE OF		
			Business Code				
ž	28	Educational and Promote	611710	74,730	74,730	)	
Program Service Revenue		o					
9	(	Convention	900099	55,877	55,877		
Ş	0	d					
Ë	6	)					
ğ	f	All other program service revenue					
		Total. Add lines 2a-2f		130,607		Language and the second	A STATE OF THE STA
	3	Investment income (including dividends, interest, and other similar amounts)		4,862			
	4	Income from investment of tax-exempt bond prod	ceeds >				
	5	Royalties					
	1	(i) Real	(ii) Personal				
	6a	Gross rents					
	b	Less: rental expenses · · ·					
	C	Rental income or (loss)					
	d	Net rental income or (loss)	>				
	7a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory	(93				
	b	Less: cost or other basis and sales expenses					
	С	Gain or (loss)	(93	<u>,                                    </u>			
	d	Net gain or (loss) · · · · · · · · · · · · · · · · · ·		(93	) (93	1	
enne	8a	Gross income from fundraising					
	ļ	events (not including \$					
Re		of contributions reported on line 1c).					
Other Rev		See Part IV, line 18 a					
<del> </del>	b	Less: direct expenses b					· .
	С	Net income or (loss) from fundraising events					
		Gross income from gaming activities.					
		See Part IV, line 19 a					
	b	Less: direct expenses b					
	l	Net income or (loss) from gaming activities					
:	10a	Gross sales of inventory, less returns and allowances a	36,155	·			
	b	Less: cost of goods sold b	27,493				
		Net income or (loss) from sales of inventory		8,662	8,662		
		Miscellaneous Revenue	Business Code		-,		
	11a						
1	b						***************************************
	С						
	đ	All other revenue					
į	e	Total. Add lines 11a-11d					
İ	12	Total revenue. See instructions	<u> </u>	553,148	144,038	0	0

#### Part IX Statement of Functional Expenses

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 Do not include amounts reported on lines 6b. 7b. (B) Total expenses Program service Management and Fundraising 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 2,137 2,137 Grants and other assistance to domestic individuals. See Part IV, line 22 ..... 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 5 Compensation of current officers, directors, 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) ..... 7 Other salaries and wages ....... 216,300 108,150 54,075 54,075 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 10 19,332 9,666 4,833 4,833 11 Fees for services (non-employees): Management 3,118 3,118 Legal b Accounting 10,105 10,105 Lobbying Professional fundraising services. See Part IV. line 17 е Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . . 25,456 25,456 12 6,359 6,359 13 Office expenses 40,387 22,689 8,849 8,849 14 22,105 11,053 5,526 5,526 15 16 <u>5,455</u> 21,822 10,912 5,455 17 52,095 26,047 13,024 13,024 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . . . . . . 139,879 139,879 20 21 22 Depreciation, depletion, and amortization ..... 245 245 23 4,508 2,254 1,127 1,127 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e, If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) Project Expenditures 24,395 24,395 þ Bank Charges 10,864 5,432 5,432 C Educational and Promotional 67,226 67,226 d Miscellaneous 9 All other expenses 11,679 6,374 494 4,811 25 Total functional expenses. Add lines 1 through 24e 678,021 442,573 137,748 <u>97,7</u>00 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here → 📙 if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

		Check if Screddle O contains a response or note to any line in this Part X	(A) Beginning of year		(B)
	1	Cash - non-interest-bearing			End of year
	2	Savings and temporary cash investments	30,620	1	35,442
	3	Pledges and grants receivable, net	472,003	3	347,254
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,		4	
		trustees, key employees, and highest compensated employees.		*	
		Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section		3	
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and			
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
		organizations (see instructions). Complete Part II of Schedule L			
	7	Notes and loans receivable, net		6	
Assets	8	Inventories for sale or use		7	
SS	9	•	9,232	8	9,232
٩	10a	` ` '	1,062	9	1,062
	100				
	b				
	11	1,200	1,909	10c	1,663
	12	Investments - publicly traded securities	44,019	11	44,720
	13	Investments - other securities. See Part IV, line 11		12	
	14	Investments - program-related. See Part IV, line 11		13	
	15	Intangible assets		14	
	16	Other assets. See Part IV, line 11		15	
	17	Total assets. Add lines 1 through 15 (must equal line 34)	558,845	16	439,373
	18	Accounts payable and accrued expenses	10,102	17	7,295
	19	Grants payable		18	
	I	<b>_</b>		19	
	20	Tax-exempt bond liabilities		20	
10	21 22	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	~~	Loans and other payables to current and former officers, directors,	나는 보고 있겠다. 네		
Ē		trustees, key employees, highest compensated employees, and			
Ë	22	disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24 25	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 of Schedule D		0.5	
	26			25	
	20	Total liabilities. Add lines 17 through 25	10,102	26	7,295
S		Organizations that follow SFAS 117 (ASC 958), check here   And complete lines 27 through 29, and lines 33 and 34.			
nce	27	Unrestricted net assets			
ala	27	l <sub>er</sub>	494,698	27	378,033
g l	28 29	Temporarily restricted net assets	54,045	28	54,045
ä	20	Permanently restricted net assets		29	
7.5		Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 20 through 24			
ts c	20	complete lines 30 through 34.			
SSe	30 24	Capital stock or trust principal, or current funds		30	
Net Assets or Fund Balances	31 32	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ne	33	Retained earnings, endowment, accumulated income, or other funds  Total net assets or fund balances		32	
		<u> </u>	548,743	33	432,078
	34	Total liabilities and net assets/fund balances	558,845	34	439,373

	n 990 (2017) Veterans For Peace Inc	01-04159	61	F	age 12
F	······································				F 7
1	Check if Schedule O contains a response or note to any line in this Part XI  Total revenue (must equal Part VIII, column (A), line 12)				
2	Total expenses (must equal Part IX, column (A), line 25)			<u>553,</u>	
3	Revenue less expenses. Subtract line 2 from line 1	L		678,	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))				873)
5	Net unrealized gains (losses) on investments			548,	743
6	Donated services and use of facilities				
7	Investment expenses				
8	Prior period adjustments				
9	Other changes in net assets or fund balances (explain in Schedule O)				
10	- ,	9		8,	208
,0	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
Pa	rt XII Financial Statements and Reporting	. 10		432,	078
					F1
	Check if Schedule O contains a response or note to any line in this Part XII			* * *	<del>. L</del>
4	Accounting method used to prepare the Form 990: X Cash Accrual Other			Yes	No
•					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		- 1		
29				,,	
20	Were the organization's financial statements compiled or reviewed by an independent accountant?		•   2a	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or		1		
	reviewed on a separate basis, consolidated basis, or both:  Separate basis  Consolidated basis  Both consolidated and separate basis				
h					
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
_	Separate basis Consolidated basis Both consolidated and separate basis				1.73
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight		'		
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?	• • • • •	2c		X
	If the organization changed either its oversight process or selection process during the tax year, explain in				
٥	Schedule O.				
за	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				]
L	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 in Schedule O and describe any steps taken to undergo such audits		3b		
EEA			Form	990 C	2017)

Form **990** (2017)

#### **SCHEDULE A**

**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.

OMB No. 1545-0047

2017

Open to Public

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

Attach to Form 990 or Form 990-EZ. Internal Revenue Service ► Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Name of the organization Employer identification number

	art I	Posson for Public Char	tu Ctotus /All	raanizationa must		_ 41=!= := =	01-0415	961	
L		Reason for Public Char					in.) See instruction	ons.	
	orga	inization is not a private foundation be							
1	닏	A church, convention of churches, o							
2	닏	A school described in section 170(k							
3	Ц	A hospital or a cooperative hospital							
4		A medical research organization ope	erated in conjunction	n with a hospital describ	ed in <b>secti</b> e	on 170(b)(	1)(A)(iii). Enter the		
	_	hospital's name, city, and state:							
5	Ш	An organization operated for the ber	efit of a college or	university owned or oper	ated by a g	overnmen	tal unit described in		
		section 170(b)(1)(A)(iv). (Complete	Part II.)						
6		A federal, state, or local government	or governmental u	nit described in section	170(b)(1)(	4)(v).			
7		An organization that normally receive					m the general public		
		described in section 170(b)(1)(A)(vi					• • • • • • • • • • • • • • • • • • • •		
8		A community trust described in sect							
9		An agricultural research organization			rated in cor	iunction w	ith a land-grant colleg	e	
		or university or a non-land-grant colle						-	
		university:				,,			
10	X	An organization that normally receive	s: (1) more than 33	3 1/3% of its support from	n contributi	ons. memb	ership fees, and gros	s	
		receipts from activities related to its							
		support from gross investment incom							
		acquired by the organization after Ju					2 4011100000		
11		An organization organized and opera							
12	П	An organization organized and opera					carry out the nurnose	30	
		of one or more publicly supported org							
		Check the box in lines 12a through 1							
	а	Type I. A supporting organization							
		the supported organization(s) the						,	
		supporting organization. You mu			, oo	1001010 0: 1	. 40.000 07 1710		
	b	Type II. A supporting organizatio	•		h its sunno	rted organi	zation(s) by baying		
		control or management of the su						4	
		organization(s). You must comp			roons that	00114101 01 1	nanage the supported	4	
	С	Type iii functionally integrated			nection with	and func	tionally integrated with	•	
		its supported organization(s) (see						*,	
	d	Type III non-functionally integr						(e)	
		that is not functionally integrated.							
		requirement (see instructions). Y					and an according to	3	
	е	Check this box if the organization					Tyne II Tyne III		
		functionally integrated, or Type III				, a 19pc i,	Type II, Type III		
	f	Enter the number of supported organi							
		Provide the following information about							
		Name of supported organization	(ii) EIN	(iii) Type of organization	flut is the	organization	(v) Amount of monetary	(vi) Amount of	
	•••		(,	(described on lines 1-10	1	ur governing	support (see	other support (see	
				above (see instructions))	docun	nent?	instructions)	instructions)	
					Yes	No			
					1				
(A)									
(B)						1			
(C)									
(D)									
(D)					J		ĺ		
(E)									
Total					i	i J			

Part II	Support Schoolule for Organizations Described in Castiana 470(1)(4)(4)(1)	4-071 3771444 17 13
artii	Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and	170(b)(1)(A)(vi)
	(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	
ection A.	Public Support	

Cal	endar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")			1			
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	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)						
6	Public support. Subtract line 5 from line 4 · · ·						
	ndar year (or fiscal year beginning in)	(a) 2013	(h) 2044	(-) 004F	4.0040	( ) 0047 T	
7	Amounts from line 4	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc. (se	e instructions)				12	
13	First five years. If the Form 990 is for the organization, check this box and stop here	ganization's first, s	. <b></b>	or fifth tax year as	a section 501(c)(3	\	▶□
Sec	tion C. Computation of Public Sup	oport Percent	age				
14	Public support percentage for 2017 (line 6, co		• • • • • • • • • • • • • • • • • • • •	) · · · · · · · ·		14	%
15	Public support percentage from 2016 Schedu					15	%
16a	33 1/3% support test - 2017. If the organizat						
	box and stop here. The organization qualifies						▶ 🗍
b	33 1/3% support test - 2016. If the organizati						F
470	this box and <b>stop here</b> . The organization qua						▶ ∐
17a	10%-facts-and-circumstances test - 2017. I						
	10% or more, and if the organization meets th						
	Part VI how the organization meets the "facts-			•			ونامنتع
<b>.</b>	organization						▶ ∐
b	10%-facts-and-circumstances test - 2016. I						
	15 is 10% or more, and if the organization me						
	Explain in Part VI how the organization meets						
18	supported organization  Private foundation. If the organization did no						▶ 📙
	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.)

	ection A. Public Support						
	lendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	397,494	415,325	394,224	658,290	409,110	2,274,44:
2	sold or services performed, or facilities furnished in any activity that is related to the	,					
	organization's tax-exempt purpose	76,108	111,456	94,660	426,762	130,607	839,593
3	Gross receipts from activities that are not an 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 organization without charge					7,7,7	
6	Total. Add lines 1 through 5	473,602	526,781	488,884	1,085,052	539,717	3,114,036
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						3/1111
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 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.)						3,114,036
***************************************	ction B. Total Support						
	endar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6 · · · · · · · · · · · · · · · ·	473,602	526,781	488,884	1,085,052	539,717	3,114,036
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	821	1,398	1,357	6,900	4,862	15,338
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b · · · · · · · · · · ·	821	1,398	1,357	6,900	4,862	15,338
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on		•			2,002	157556
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)		100	30			130
	Total support. (Add lines 9, 10c, 11, and 12.)	474,423	528,279	490,271	1,091,952	544,579	3,129,504
	First five years. If the Form 990 is for the orgal organization, check this box and stop here		ond, third, fourth, o	r fifth tax year as a	section 501(c)(3)		
	tion C. Computation of Public Sup						
	Public support percentage for 2017 (line 8, colu		ne 13, column (f))		• • • • • •	15	99.51 %
	Public support percentage from 2016 Schedule				<u>  </u>	16	99.64 %
	tion D. Computation of Investment						
	Investment income percentage for 2017 (line 10		•	* * * *		17	0.00 %
	nvestment income percentage from 2016 Sche				L	18	0.00 %
1	33 1/3% support tests - 2017. If the organization is not more than 33 1/3%, check this box and	stop here. The c	organization qualifie	s as a publicly sup	ported organization	1	▶ 🏻
łi	33 1/3% support tests - 2016. If the organization ine 18 is not more than 33 1/3%, check this box	and stop here. T	he organization qua	alifies as a publicly	supported organiza	3%, and ation	▶ 🔲
	Private foundation. If the organization did not o	check a box on line	14, 19a, or 19b, cl	heck this box and s	ee instructions		· · · · <b>▶</b> 🔲
EΑ						Schodula A /Farm	990 or 990 EZ1 2017

#### Part IV Supporting Organizations

(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.)

#### Section A. All Supporting Organizations

- 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.
- 2 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.
- b 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.
- c 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.
- **4a** 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.
- **b** 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.
- c 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.
- 5a 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).
- **b** 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?
- c 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.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 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**.
- **b** 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**.
- c 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
	1		
	2	-	<u></u>
	3a		
	3b		ļ
	3с		
	4a	1 1 2 4 4 4	
	4b		
			3.3
	4c		
	5a		
	5b 5c		
	50		
		:	
	6		
	7		
	8		
	9a		
	9b		
	9c		
	10a		
	10b		
*			

Pa	art IV Supporting Organizations (continued)			<u>~</u>
		_	Yes	No
11	and the second of the second o			
i	a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
	b A family member of a person described in (a) above?	11b		<u> </u>
~	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 V	//. 11c	<u></u>	
<b>5</b> e	ction B. Type I Supporting Organizations		1	<del></del>
4	Did the directors trustees or membership of one or membership of		Yes	No
1	the second of the post of the			
	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.	1		
	engamental and times conditions of receives one, if any, applied to such powers during the tax year.		1	
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	ction C. Type II Supporting Organizations	·	<del></del>	L
_		_	Yes	No
1	The state of the s			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
<u> </u>	the supported organization(s).	1	<u>L</u>	
Set	ction D. All Type III Supporting Organizations		1	
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		Yes	No
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior	tov		
	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		
_				- :
2	y who disposed by the dappointed			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI ho			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			1.1
	significant voice in the organization's investment policies and in directing the use of the organization's			1 1
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
	ction E. 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 (s	ee instrud	tions	;).
a b				
C				
	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity. Activities Test. <b>Answer (a) and (b) below.</b>		Yes	nons). <b>No</b>
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		res	140
_	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>			
	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	Ī	
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the		ļ	
	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		
	Parent of Supported Organizations. Answer (a) and (b) below.			
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	1 1		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Or	gani	zations	
1  Check here if the organization satisfied the Integral Part Test as a qualifying	n true	t on Nov. 20, 1970 (evala	in in Dart VII) Coo
instructions. All other Type III non-functionally integrated supporting organ	izatio	ins must complete Section	ne ∆ through ⊏
		1	(B) Current Year
Section A - Adjusted Net Income		(A) Prior Year	(optional)
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	- <del>  -</del>		
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		
			(B) Current Year
Section B - Minimum Asset Amount		(A) Prior Year	(optional)
Aggregate fair market value of all non-exempt-use assets (see	T		(Optional)
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	1.4		Takan katebaran
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		
	- 0		
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-		rated Type III supporting	organization (acc
instructions).	cg	area type in auppoining i	organization (SEE

	art V Type III Non-Functionally Integrated 509(a)	(3) 6	01-04	115961 Page
1	Irt V Type III Non-Functionally Integrated 509(a) ection D - Distributions	(3) Supporting Organ	izations (continuea)	T 0
1	Amounts paid to supported organizations to accomplish ex	ampt purposes		Current Year
2	Amounts paid to supported organizations to accomplish ex			
_	organizations, in excess of income from activity	ibr bailboses or subborred		
3	Administrative expenses paid to accomplish exempt purpose	see of supported organiza	tions	
4	Amounts paid to acquire exempt-use assets	ses of supported organiza	ILIOTIS	
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in <b>Part VI</b> ). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which t	he organization is respon	SİVA	
	(provide details in <b>Part VI</b> ). See instructions.	are organization to respon	3140	
9	Distributable amount for 2017 from Section C, line 6			
10	······································			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017			
	(reasonable cause required - explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2017			A PART OF THE PART
а				
	From 2013			
	From 2014			
	From 2015			
	From 2016			
f	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2017 distributable amount			
i	Carryover from 2012 not applied (see instructions)			
<u>j</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from			
	Section D, line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2017 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, 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 2017. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
7	Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j			
0	and 4c.			
	Breakdown of line 7:			
	Excess from 2013 Excess from 2014			
	Excess from 2014		·	

d Excess from 2016 e Excess from 2017

#### **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 Inspection

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.

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 Tax) (see separate instructions), then

•	Section 501(c)(4), (5), or (6) organization	s: Complete Part III			
	ne of organization	or complete i air iii.		Employe	r identification number
V	eterans For Peace Inc			01-04:	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		nization is exempt under sect	ion 501(c) or i	s a section 527 org	anization.
1	Provide a description of the organization definition of "political campaign activities	i's direct and indirect political campaign a			
2	Political campaign activity expenditures	(see instructions)			
3	Volunteer hours for political campaign ac	ctivities (see instructions)			
Pa	irt I-B Complete if the orga	nization is exempt under sect	ion 501(c)(3).		
1	Enter the amount of any excise tax incur	red by the organization under section 49	55	<b>&gt;</b> \$	
2	Enter the amount of any excise tax incur	red by organization managers under sec	tion 4955 • • •	····· ▶ \$	
3	If the organization incurred a section 495	55 tax, did it file Form 4720 for this year?			· Yes No
4a	Was a correction made?				· Yes 🗍 No
b					
Pa		nization is exempt under sect		cept section 501(c)(	3).
1	Enter the amount directly expended by the				
	activities			▶ \$	
2	Enter the amount of the filing organizatio				
	527 exempt function activities			<b>&gt;</b> \$	
3	Total exempt function expenditures. Add	lines 1 and 2. Enter here and on Form 1	120-POL,		
	line 17b				
4	Did the filing organization file Form 1120	•			
5	Enter the names, addresses and employ				
	organization made payments. For each o				
	the amount of political contributions recei				
	as a separate segregated fund or a politic	cal action committee (PAC). If additional	space is needed, p	rovide information in Part I	V
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization.  If none, enter -0
1)					
2)					
3)					
4)					
5)					
6)					

	nedule C (Form 990 or 990-EZ) 2017 Veterans For	Peace Inc			01-0415	59 <b>61</b> Page 2
P	art II-A Complete if the organization	on is exempt un	der section 50	)1(c)(3) and filed	Form 5768 (ele	ction under
	section 501(h)).					
Α	Check ▶ ☐ if the filing organization belongs to			ich affiliated group mer	nber's name,	
	address, EIN, expenses, and sha					
В	Check ▶ ☐ if the filing organization checked b	ox A and "limited con	trol" provisions app	ly.		
		bying Expenditures			(a) Filing	(b) Affiliated
	(The term "expenditures"				organization's totals	group totals
1a	<ul> <li>Total lobbying expenditures to influence public or</li> </ul>	oinion (grass roots lol	obying)			
þ	Total lobbying expenditures to influence a legisla	tive body (direct lobb	ying) · · · ·			
C	Total lobbying expenditures (add lines 1a and 1b	)				
d	Other exempt purpose expenditures · · · ·					-
0	<ul> <li>Total exempt purpose expenditures (add lines 1c</li> </ul>	and 1d)		* * * * * * * * * *		
f	Lobbying nontaxable amount. Enter the amount to	from the following tab	le in both			
	columns.					
	if the amount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amour	nt is:		
	Not over \$500,000	20% of the amo	ount on line 1e.			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess of	over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000		10% of the excess of			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess ov	/er \$1,500,000,		
	Over \$17,000,000	\$1,000,000.				
g	Grassroots nontaxable amount (enter 25% of line	:1f)				· · · · · · · · · · · · · · · · · · ·
h	Subtract line 1g from line 1a. If zero or less, enter	r-0- • • • • • • • • • • • • • • • • • •				
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	e 1h or line 1i, did the	organization file Fo	orm 4720		
						☐ Yes ☐ No
		4-Year Averagin				
	(Some organizations that made a se				of the five columi	ns below.
				ies 2a through 2f.)		
	Lobby	ring Expenditures D	uring 4-Year Avera	aging Period		
	Calendar year (or fiscal year	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
	beginning in)		(4)	(5) = 5	(4) 2011	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column (e))					
	(100% of line 2d, codaffit (e))					
C	Total lobbying expenditures					
	_					
d	Grassroots nontaxable amount					
е	Grassroots ceiling amount					
-	(150% of line 2d, column (e))					
f	Grassroots lobbying expenditures				i	

TOI	ach "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(	a)	(b)
desc	ription of the lobbying activity.	Yes	No	Amount
1	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		+ 1, 1,	
	referendum, through the use of:			
a	Volunteers?		X	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Χ		
C	Media advertisements?		X	
d	Mailings to members, legislators, or the public?	X		
e	Publications, or published or broadcast statements?		Χ	
f	Grants to other organizations for lobbying purposes?		Χ	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		X	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Χ	•
i	Other activities?	X		
1	Total. Add lines 1c through 1i			
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Χ	
	if "Yes," enter the amount of any tax incurred under section 4912		5 Tal.	
	f "Yes," enter the amount of any tax incurred by organization managers under section 4912			
Par	f the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	1/5		
	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c 501(c)(6).	)(5), (	or se	ction
	σοτ(σ)(σ).			1:
1	Nere substantially all (90% or more) dues received nondeductible by members?			Yes No
	Were substantially all (90% or more) dues received nondeductible by members?			1
	of the organization make only in-nouse topoying expenditures of \$2,000 or less?			2
			• •	l
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?			3
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)	 )(5), c	rse	3 ction
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	 )(5), c	rse	3 ction
3 Part	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?    III-B	 )(5), c R (b)	r se Part	3 ction
3 Part	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?    III-B   Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Of answered "Yes."    Oues, assessments and similar amounts from members	 )(5), c R (b)	rse	3 ction
3 Part	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?    III-B   Complete if the organization is exempt under section 501(c)(4), section 501(c)    501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Of answered "Yes."    Oues, assessments and similar amounts from members	 )(5), c R (b)	r se Part	3 ction
3 Part	Old the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Ol answered "Yes."  Oues, assessments and similar amounts from members	)(5), c	Part	3 ction
3 Pari	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?    III-B   Complete if the organization is exempt under section 501(c)(4), section 501(c)    501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Of answered "Yes."    Oues, assessments and similar amounts from members	)(5), c	or second	3 ction
3 Part 1   2   3   6   6   6   6   6   6   6   6   6	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Of answered "Yes."  Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of solitical expenses for which the section 527(f) tax was paid).  Current year	 R (b)	or sec Part	3 ction
1   2   3   6   6   6   6   6   6   6   6   6	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Of answered "Yes."  Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of solitical expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year	 R (b)	1 2a 2b 2c	3 ction
1   2   3   6   6   6   7   7   7   7   7   7   7	Complete if the organization is exempt under section 501(c)(4), section 501(c)  Complete if the organization is exempt under section 501(c)(4), section 501(c)  501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Of answered "Yes."  Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of colitical expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Otal	 R (b)	or sec Part	3 ction
1   2   3   6   6   6   7   7   7   7   7   7   7	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?    III-B   Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Of answered "Yes."    Oues, assessments and similar amounts from members   Oues, assessments and assessments a	 R (b)	1 2a 2b 2c	3 ction
1   2   3   6   6   6   6   6   6   6   6   6	Complete if the organization is exempt under section 501(c)(4), section 501(c)  Sol(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Of answered "Yes."  Oues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of solitical expenses for which the section 527(f) tax was paid).  Current year  Sarryover from last year  Solitical expenses amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  Inotices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying	(b)	1 2a 2b 2c 3	3 ction
1   2   3   4   4   4   4   4   4   4   4   4	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Of answered "Yes."  Oues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of solitical expenses for which the section 527(f) tax was paid).  Current year Carryover from last year Outs, assessments and similar amounts from members Carryover section 162(e) nondeductible lobbying and political expenditures (do not include amounts of solitical expenses for which the section 527(f) tax was paid).  Current year Outs, assessments and the section 527(f) tax was paid).  Current year Outs, assessments and the section 5033(e)(1)(A) notices of nondeductible section 162(e) dues Inotices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	(b)	Part  1 2a 2b 2c 3	3 ction
3 Part  1   2   5   6   6   6   6   6   6   6   6   6	Complete if the organization is exempt under section 501(c)(4), section 501(c)  Sol(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Of answered "Yes."  Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of solitical expenses for which the section 527(f) tax was paid).  Surrent year  Sarryover from last year  Solitices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?  Saxable amount of lobbying and political expenditures (see instructions)	(b)	1 2a 2b 2c 3	3 ction
3 Part  1	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Of answered "Yes."  Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of solitical expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Otal  O	(b)	Part  1  2a  2b  2c  3  4  5	3 ction
3 Part  1	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?    III-B   Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Of answered "Yes."    Oues, assessments and similar amounts from members	(b)	Part  1  2a  2b  2c  3  4  5	3 ction
3 Part  1	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?    III-B   Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Of answered "Yes."    Oues, assessments and similar amounts from members	(b)	Part  1  2a  2b  2c  3  4  5	3 ction
3 Part  1	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?    III-B   Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Of answered "Yes."    Oues, assessments and similar amounts from members	(b)	Part  1  2a  2b  2c  3  4  5	3 ction
3 Part  1	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?    III-B   Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Of answered "Yes."    Oues, assessments and similar amounts from members	(b)	Part  1  2a  2b  2c  3  4  5	3 ction
3 Part  1	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?    III-B   Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Of answered "Yes."    Oues, assessments and similar amounts from members	(b)	Part  1  2a  2b  2c  3  4  5	3 ction
3 Part  1	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?    III-B   Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Of answered "Yes."    Oues, assessments and similar amounts from members	(b)	Part  1  2a  2b  2c  3  4  5	3 ction
3 Part  1   2   6   6   6   6   6   6   6   6   6	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?    III-B   Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Of answered "Yes."    Oues, assessments and similar amounts from members	(b)	Part  1  2a  2b  2c  3  4  5	3 ction
3 Part  1   2   6   6   6   6   6   6   6   6   6	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?    III-B   Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Of answered "Yes."    Oues, assessments and similar amounts from members	(b)	Part  1  2a  2b  2c  3  4  5	3 ction
3 Part  1   2   6   6   6   6   6   6   6   6   6	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?    III-B   Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Of answered "Yes."    Oues, assessments and similar amounts from members	(b)	Part  1  2a  2b  2c  3  4  5	3 ction

#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service **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.

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

OMB No. 1545-0047

2017

Open to Public Inspection

Na	me of the organization			Employer identification number
V	eterans For Peace Inc			01-0415961
	art I Organizations Maintaining Donor Advis	sed Funds or Ot	her Similar Funds or A	Accounts.
	Complete if the organization answered "Ye			
			nor advised funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year) .			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisor	s in writing that the	assets held in donor advise	ď
	funds are the organization's property, subject to the orga			· · · · · · · · · · · · · · · · · · ·
6	Did the organization inform all grantees, donors, and dor			
	only for charitable purposes and not for the benefit of the			
				· · · · · · · · · · · · · · · · · · ·
P	art II Conservation Easements.			
	Complete if the organization answered "Y	es" on Form 990	, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organ	nization (check all th	nat apply).	
	Preservation of land for public use (e.g., recreation of	r education)	Preservation of a histo	orically important land area
	Protection of natural habitat		Preservation of a certi	
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a q	ualified conservatio	n contribution in the form of	a conservation
	easement on the last day of the tax year.			Held at the End of the Tax Yea
a	Total number of conservation easements			2a
Ŀ	Total acreage restricted by conservation easements			2b
C	Number of conservation easements on a certified historic	structure included	in (a)	2c
d	Number of conservation easements included in (c) acquire	red after 7/25/06, ar	nd not on a	
				2d
3	Number of conservation easements modified, transferred	l, released, extingui	shed, or terminated by the o	organization during the
	tax year ▶	_	•	<b>3 3 3 3 3 3 3 3 3 3</b>
4	Number of states where property subject to conservation	easement is locate	d 🕨	
5	Does the organization have a written policy regarding the	periodic monitoring	, inspection, handling of	
	violations, and enforcement of the conservation easemen			Yes N
6	Staff and volunteer hours devoted to monitoring, inspectir	ng, handling of viola	itions, and enforcing conser	
	<b></b>			, ,
7	Amount of expenses incurred in monitoring, inspecting, he	andling of violations	and enforcing conservation	n easements during the year
	<b>▶</b> \$		<del>"</del>	5 ,
8	Does each conservation easement reported on line 2(d) a	above satisfy the re-	quirements of section 170(h	)(4)(B)(i)
				Yes N
9	In Part XIII, describe how the organization reports conserve	vation easements ir	n its revenue and expense s	
	balance sheet, and include, if applicable, the text of the fo	otnote to the organi	ization's financial statements	s that describes the
	organization's accounting for conservation easements.			
Pa	rt III Organizations Maintaining Collection			r Other Similar Assets.
	Complete if the organization answered "Y			
1a	If the organization elected, as permitted under SFAS 116 (			
	works of art, historical treasures, or other similar assets he			
	public service, provide, in Part XIII, the text of the footnote			
b	If the organization elected, as permitted under SFAS 116 (	(ASC 958), to repor	t in its revenue statement ar	nd balance sheet
	works of art, historical treasures, or other similar assets he		tion, education, or research	in furtherance of
	public service, provide the following amounts relating to th	ese items:		
	(i) Revenue included on Form 990, Part VIII, line 1			• • • • • • • • • • • • • • • • • • •
	(ii) Assets included in Form 990, Part X			· · · · · · · • \$
2	If the organization received or held works of art, historical			ain, provide the
	following amounts required to be reported under SFAS 116	3 (ASC 958) relatin	g to these items:	
а	Revenue included on Form 990, Part VIII, line 1		- • • • • • • • • • • • • • • • •	▶ \$
b	Assets included in Form 990 Part X			<b>.</b>

	dule D (Form 990) 2017 Veterans For Peart III Organizations Maintaining C	eace Inc	\	touis at T			01-04	1596	<u>1</u>	Page
3								sset	is (conti	nued)
3	Using the organization's acquisition, accession, a	and other records, c	heck any	of the follow	ing that are	e a signific	ant use of its			
а	collection items (check all that apply):  Public exhibition	<u> </u>								
b	<u> </u>			nange progra	ams					
c	Preservation for future generations	e [] Oth	er							
4		tions and avalate bas								
7	Provide a description of the organization's collect XIII.	doris and explain no	w tney tu	rtner the org	anization's	exempt p	urpose in Part			
5	During the year, did the organization solicit or rec	coive denstions of a	t biotorio	at transceron	on albanis	· · · · -				
Ū	assets to be sold to raise funds rather than to be								[] <sub>V</sub>	п.,
Pa	rt IV Escrow and Custodial Arrang	iements	or the org	janization s t	JOHECHOTT?	• •		<del></del>	Yes	∐ N∈
	Complete if the organization an		n Form	990 Par	t IV line	Q or rer	orted an am	ount	on Forn	3
	990, Part X, line 21.		0	, 000, r a.	- 1 1 1 III IO	o, or 10p	ortou an ann	Junit	OIT I OIT	1
1a	is the organization an agent, trustee, custodian o	or other intermediary	for contr	ibutions or o	ther assets	pol				
		• • • • • • • • •							□ vos	∏No
b	If "Yes," explain the arrangement in Part XIII and					,		• • •	∐ res	[ ] IAI
	, , , , , , , , , , , , , , , , , , , ,	Tomproto tito romotin	ng tabio.				Δ	moun		
С	Beginning balance					10		inoun	<u> </u>	
d	Additions during the year					L	-			
е	Distributions during the year									
f	Ending balance									
2a	Did the organization include an amount on Form								. Tyes	∏ No
b										=
Pa	rt V Endowment Funds.	·								<u> </u>
	Complete if the organization an	swered "Yes" or	ո Form	990, Part	IV, line	10.				
		(a) Current year	i	rior year	(c) Two yea		(d) Three years bac	k (	(e) Four year	rs back
1a	Beginning of year balance						(-,	<del>"   '</del>	in roar your	- Duon
b	Contributions								-	
C	Net investment earnings, gains, and							$\top$		
	losses									
d	Grants or scholarships									
Đ	Other expenditures for facilities and									
	programs					İ				
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the current y	ear end balance (lin	e 1g, coli	umn (a)) hek	d as:					
а	Board designated or quasi-endowment	%								
b	Permanent endowment									
C	Temporarily restricted endowment	<u></u> %								
	The percentages on lines 2a, 2b, and 2c should ea	•								
3a	Are there endowment funds not in the possession	of the organization	that are h	eld and adn	ninistered fo	or the				
	organization by:								Yes	No
	(i) unrelated organizations							. [	3a(i)	
	(ii) related organizations							. [	3a(ii)	
b	If "Yes" on 3a(ii), are the related organizations liste	ed as required on Sc	hedule R	?				. [	3b	
	Describe in Part XIII the intended uses of the orga		nt funds.					1	· · · · · · · · · · · · · · · · · · ·	
Par										
	Complete if the organization ans	wered "Yes" on	Form !	990, Part	IV, line 1	1a. See	Form 990, P.	art X	, line 10	).
	Description of property	(a) Cost or other (investmen		(b) Cost or (ot	other basis her)	1	ccumulated preciation	(d	d) Book value	9
a	Land									
b	Buildings									
C	Leasehold improvements									
	Equipment				8,929		7,266		1	663
е	Other						,,			<del></del>
otal.	Add lines 1a through 1e. (Column (d) must equal	Form 990, Part X, c	olumn (B	), line 10c.)					1	663
EΑ			•					cheduk	e D (Form 99	

	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial	derivatives		
(2) Closely-h	eld equity interests		
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Column (b	) must equal Form 990, Part X, col. (B) line 12.)	<u> </u>	
Part VIII	Investments - Program Relate Complete if the organization ar		IV, line 11c. See Form 990, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7) (8)			
(9)			
	must equal Form 990, Part X, col. (B) line 13.)	<b>•</b>	
Part IX	Other Assets.		
		swered "Yes" on Form 990 Part	IV, line 11d. See Form 990, Part X, line 15.
(1)		(a) Description	(b) Book value
(1)			
(2)			
(2) (3)			
(2) (3) (4)			
(2) (3) (4) (5)			
(2) (3) (4) (5) (6) (7) (8)			
(2) (3) (4) (5) (6) (7) (8) (9)		(a) Description	
(2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column	o (b) must equal Form 990, Part X, col. (B) i	(a) Description	
(2) (3) (4) (5) (6) (7) (8) (9)	(b) must equal Form 990, Part X, col. (B) i Other Liabilities.	(a) Description	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column	(b) must equal Form 990, Part X, col. (B) i Other Liabilities.	(a) Description	
(2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column	(b) must equal Form 990, Part X, col. (B) i Other Liabilities. Complete if the organization ans	(a) Description	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column	o (b) must equal Form 990, Part X, col. (B) in Other Liabilities.  Complete if the organization and line 25.  (a) Description of liability	(a) Description  line 15.)  swered "Yes" on Form 990, Part I	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column Part X	o (b) must equal Form 990, Part X, col. (B) in Other Liabilities.  Complete if the organization and line 25.  (a) Description of liability	(a) Description  line 15.)  swered "Yes" on Form 990, Part I	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) Fotal. (Column Part X  (1) Federal in (2) (3)	o (b) must equal Form 990, Part X, col. (B) in Other Liabilities.  Complete if the organization and line 25.  (a) Description of liability	(a) Description  line 15.)  swered "Yes" on Form 990, Part I	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column Part X  . (1) Federal in (2) (3) (4)	o (b) must equal Form 990, Part X, col. (B) in Other Liabilities.  Complete if the organization and line 25.  (a) Description of liability	(a) Description  line 15.)  swered "Yes" on Form 990, Part I	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column Part X  . (1) Federal in (2) (3) (4) (5)	o (b) must equal Form 990, Part X, col. (B) in Other Liabilities.  Complete if the organization and line 25.  (a) Description of liability	(a) Description  line 15.)  swered "Yes" on Form 990, Part I	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) (otal. (Column Part X)  . (1) Federal in (2) (3) (4) (5) (6)	o (b) must equal Form 990, Part X, col. (B) in Other Liabilities.  Complete if the organization and line 25.  (a) Description of liability	(a) Description  line 15.)  swered "Yes" on Form 990, Part I	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column Part X  (1) Federal in (2) (3) (4) (5) (6) (7)	o (b) must equal Form 990, Part X, col. (B) in Other Liabilities.  Complete if the organization and line 25.  (a) Description of liability	(a) Description  line 15.)  swered "Yes" on Form 990, Part I	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) Cotal. (Column Part X  (1) Federal in (2) (3) (4) (5) (6) (7) (8)	o (b) must equal Form 990, Part X, col. (B) in Other Liabilities.  Complete if the organization and line 25.  (a) Description of liability	(a) Description  line 15.)  swered "Yes" on Form 990, Part I	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) Cotal. (Column Part X  (1) Federal in (2) (3) (4) (5) (6) (7) (8)	o (b) must equal Form 990, Part X, col. (B) in Other Liabilities.  Complete if the organization and line 25.  (a) Description of liability	(a) Description  line 15.)  Swered "Yes" on Form 990, Part I	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X  (1) Federal in (2) (3) (4) (5) (6) (7) (8) (9) otal. (Column (b) n	o (b) must equal Form 990, Part X, col. (B) in Other Liabilities.  Complete if the organization and line 25.  (a) Description of liability	(a) Description  line 15.)  Swered "Yes" on Form 990, Part I	(b) Book value    V, line 11e or 11f. See Form 990, Part X,

	unia p (rum aau) 2017 Veterans For Peace Inc	01-0415961	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	Return.	
1		T & I	
2	Total revenue, gains, and other support per audited financial statements	1	
a	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants	- 1	
d	Other (Describe in Part XIII.)		•
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	:	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
C	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses p	er Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d -	Other (Describe in Part XIII.)		
е 3	Add lines 2a through 2d · · · · · · · · · · · · · · · · · ·	2e	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	3	
~ a			
b	Other (Describe in Part XIII.)		
c	Add lines 4a and 4b · · · · · · · · · · · · · · · · · ·	4.0	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	4c   5	
Pai	t XIII Supplemental Information.	9 [	
; Pa	de 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 rt XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.		
			<u></u>
			***************************************

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

### Statement of Activities Outside the United States

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

► Attach to Form 990.

OMB No. 1545-0047

2017

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number

Veterans For Peace	Inc			01-0	415961
Part I General Information Form 990, Pa	<b>rmation on Activit</b> ert IV. line 14b	ies Outside th	ne United States. Complet	e if the organization ans	swered "Yes" on
		ain records to su	bstantiate the amount of its gra	inte and other	
assistance, the grantees'	eligibility for the grants	s or assistance.	and the selection criteria used t	n award the	
grants or assistance?					· · TYes T No
2 For grantmakers. Descri	ibe in Part V the organ	ization's procedu	res for monitoring the use of its	s grants and other	
assistance outside the Un		•	•	<b>9</b>	
	e following Part I, line	3 table can be du	plicated if additional space is n	eeded.)	
(a) Region	(b) Number of offices in the	(c) Number of employees,	(d) Activities conducted in the region (by type) (such as,	(e) If activity listed in (d) is	(f) Total
	region	agents, and	fundraising, program services,	a program service, describe specific type of	expenditures for and investments
		independent contractors	investments, grants to recipients located in the region)	service(s) in the region	in the region
		in the region			
445					
(1)					
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14)					
15)					
16)					
17)					
a Sub-total · · · · · ·					
b Total from continuation					
sheets to Part I					
c Totals (add lines 3a and 3.	b)	İ			

Schedule F (Form 990) 2017

Part

Veterans For Peace Inc

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

Page 2

01-0415961

1 (a) Name of	-1-00149			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	בי וו משמווטושו שלשכם וא ווספתפת.	וומפתפת.		
organization	Section and EIN (if applicable)	(c) Kegion	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, apporaisal, other)
(1)		70000	THE PLANTAGE STATE OF THE PLANTAGE STATE OF	70000				
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(4)						4		
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(13)		17/4				T TANK SANA	7000000	***************************************
(14)						1.0		
(15)		1						
(16)		PRODUCT OF THE PRODUC			700			

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

က 1

Schedule F (Form 990) 2017

Veterans For Peace Inc

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 peopled. 01-0415961 Part III can be duplicated if additional space is needed. Schedule F (Form 990) 2017
Part III Grants

Fair marke Schedule F (Form 990) 2017 (h) Method of valuation (book, FMV, appraisal, other) (g) Description of noncash assistance none (f) Amount of noncash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients Middle East and (b) Region North Africa (a) Type of grant or assistance (1) Faiza H Y Alaraj <u>4</u> 2 ල **E** <del>(1</del>0 (11) (13) (14) 3 9 6 (12) (15) 8 (46) (17) (18) Ð

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Schedule F (Form 990	)2017 <b>Vet</b>	erans Fo	r Peace	Inc

01-0415961 Page 4

_	7 TOTAL TOTAL TOTAL TITLE	01-0415961	Page '
Par	t 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	☐ 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	☐ 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	☐ 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	☐ No
EA		Schedule	F /Form 990\ 2017

Schedule F (Form 990) 2017

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

Department of the Treasury

Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

Qualification 
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, line 19) Governing documents available to the public 04. Explanation of other changes in net assets or fund balances (Part XI, line 9) Accounting adjustment 05. List of other expenses (Part IX, line 24e) See overflow statement for detail 06. General explanation attachment 990 Part IV Line 16 - Water Purification Systems