Vietnam Veterans of America Annual Financial Report

Complete and forward this form to:

Vietnam Veterans of America Attn: Finance Department 8719 Colesville Road, Suite 100 Silver Spring, MD 20910

301-585-4000 ext 126, Fax: 301-585-5542, e-mail - djohnson@vva.org

ANNUAL FINANCIAL REPORT INSTRUCTIONS

By July 15th of each year, all VVA State Councils and Chapters (including Incarcerated Chapters and Chapters which started during the fiscal year) must file a VVA Annual Financial Report with the VVA National Office, Finance Department. All VVA State Councils and Chapters must also file the appropriate tax form with the Internal Revenue Service and attach it to the Annual Financial Report. Verification of the IRS filing must accompany the VVA Financial Report for it to be considered complete. **Chapters must file a copy of their VVA Financial Report with their State Council.** State Councils and Chapters may need to file an annual report with their state; please check on your state requirements.

IRS filing requirements are:

Gross Income/Assets	Form to File
Less than \$50,000	990-N, 990-
Note: Organizations eligible to file the e-Postcard 990-N may choose to file a full return	EZ, or 990
Less than \$200,000 and total assets less than \$500,000	990-EZ or
	990
More than \$200,000 or total assets more than \$500,000	990
Gross income of \$1,000 or more from a regularly carried on unrelated	990-T
trade or business	

If the State Council/Chapter has filed an extension with the IRS for filing Form 990, you must send a copy of the extension to VVA to extend your time for complying with the VVA filing deadline. Completed returns must be filed with VVA by the end of the extension period.

FAILURE TO FILE BY JULY 15th WILL RESULT IN SUSPENSION OF THE STATE COUNCIL/CHAPTER.

VVA ANNUAL FINANCIAL REPORT FY 20 (3/1/____ Thru 2/28/____) Finance Fax: 301-585-5542

Finance e-mail: djohnson@vva.org

Complete the following:	
STATE COUNCIL:	/ CHAPTER NO:
Official Street Address:	PO Box:
City: State: Zip:	
State Council/Chapter Phone No:	Fax:
Please indicate whose phones these are:	
State Council/Chapter e-mail address	
Your State Council/Chapter must have its own chapter using the state council's; state council ATTACH A COPY OF THE	MBER (FEIN): ** FEIN. It must not use the FEIN of another organization (e.g., using the national organization's). 990-N E-MAIL ACCEPTED LETTER VERIFIYING 990, 990-T , or (check one)
Complete the following section.	
1. TOTAL REVENUE	\$
2. TOTAL EXPENSES	\$
Chapter # certifies that	s of America State Council or at he/she has read the foregoing State Council / Chapter his/her knowledge and belief, certifies that the information applete.
(name, title)	Phone No:
(name, title)	