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SCANNED AUG 2 1 2012

Preparer **Use Only**

Form

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047 2011

Open to Public Inspection

١.	For the 2011	calendar year, or tax year beginning, and ending			
	Check if applicable	C Name of organization		D Employ	er identification number
٦,	Address change	COCOA AMERICAN LEGION INC			
٦,	Name change	Doing Business As		59-	0700781
\exists	-	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telepho	ne number
ַ '	Initial return	22 LEGION LANE			
<u></u>] ·	Terminated	City or town, state or country, and ZIP + 4			
٦,	Amended return	COCOA FL 32922		G Gross rece	pts \$193,697
Ħ	Application pending	F Name and address of pnncipal officer			ffiliates? Yes X No
╝,	Application pending		H(a) Isthisag	roup return for a	ffiliates? Yes X No
			H(b) Are all af	filiates included	Yes No
			If "No	o," attach a list	(see instructions)
ı	Tax-exempt statu	501(c)(3) X 501(c) (19) ◄ (insert no) 4947(a)(1) or 527			
	Website >	N/A	H(c) Group ex	emption number	r >
`	Form of organizati	on X Corporation Trust Association Other ▶ L	Year of formation		M State of legal domicile
		Summary			
_	1	describe the organization's mission or most significant activities			
_		RIOTIC VETERANS ORGANIZATION			
2	''	KIOIIC VBIERRED ORGANIZATION			
Пап					
<u>@</u>	ļ	. 📇			
ő	2 Check	this box 🕨 💹 if the organization discontinued its operations or disposed of more than 25%	% of its net asset	1	•
∞ ∞	3 Numbe	r of voting members of the governing body (Part VI, line 1a)		3	
es	4 Numbe	r of independent voting members of the governing body (Part VI, line 1b)		4	0
Ϋ́	5 Total n	umber of individuals employed in calendar year 2011 (Part V, line 2a)		5	4
Activities & Governance	6 Total n	umber of volunteers (estimate if necessary)		6	0
`	7a Total u	nrelated business revenue from Part VIII, column (C), line 12		7a	0
	b Net un	related business taxable income from Form 990-T, line 34		7b	0
			Pnor Ye		Current Year
Ф	8 Contrib	utions and grants (Part VIII, line 1h)		7,955	2,018
Revenue	9 Progra	m service revenue (Part VIII, line 2g)	6	5,552	3,779
ě	10 Investr	nent income (Part VIII, column (A), lines 3, 4, and 7d)		2	2
œ	11 Other	evenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	5	8,606	115,541
	12 Total r	evenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	13	2,115	121,340
		and similar amounts paid (Rart IX column (A) tines 1-3)		0	0
	14 Benefi	s paid to or for members (Pate Column (A)) ine 4)		0	0
'n	45 0-1	s, other compensation, employee benefits (Part IX column (A), lines 5–10)	4	0,741	38,327
Se	16a Profes	sional fundraising fees (Part IX, column (A), line 11€)		0	0
xpenses	b Total f	undraising expenses (Part X, Column (D) Line 25)			
Ñ		expenses (Part IX, columntA); lines 11a-11d, 14f-24e)	7	9,356	91,837
		xpenses Add lines 13–17 (must-equal Part X, column (A), line 25)		0,097	130,164
		ue less expenses Subtract line 18 from line 12		2,018	-8,824
5		10 1000 0xportiodo "Odditade linio 10 Walli linio 12	Beginning of Cu		End of Year
ets	20 Total a	ssets (Part X, line 16)	4	8,560	38,425
Ass	21 Total I	abilities (Part X, line 26)		3,142	1,831
Net Assets or	22 Net as	sets or fund balances Subtract line 21 from line 20	4	5,418	36,594
		Signature Block			
		of perjury, I declare that I have examined this return, including accompanying schedules and statement	ts, and to the best of	of my knowled	ige and belief, it is
tr	ue, correct, and	complete Declaration of preparer (other than officer) is based on all information of which preparer has	s any knowledge	,	•
-		Man & TEN de la			
Q i 4	gn 🕨	Signature of officer			
	- \	Alan & Honday			
пе	ere	Type or pnnt name and title			
	Dec.15				
Pai		Type preparer's name Preparer's Signature Preparer's Signature			

May the IRS discuss this return with the preparer shown above? (see instructions For Paperwork Reduction Act Notice, see the separate instructions.

BREVARD ACCOUNTING GROU

150 FORTENBERRY RD STE MERRITT ISLAND, FL

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rm 99b (20 1 1)'COCOA AMERICAN	LEGION INC	59-0700781	Page
Part III	Statement of Program Se Check if Schedule O conta	rvice Accomplishments ins a response to any question in	this Part III	X
	scribe the organization's mission. TIC VETERANS ORGA			
prior Forr	n 990 or 990-EZ?	t program services during the year which	were not listed on the	Yes X N
Did the o		ake significant changes in how it conducts	, any program	Yes X N
Describe expenses	the organization's program service s Section 501(c)(3) and 501(c)(4) o	accomplishments for each of its three larg rganizations and section 4947(a)(1) trusts benses, and revenue, if any, for each prog	are required to report the amount of	
a (Code PROVII)(Expenses \$ DE SERVICES TO VET	47,395 including grants of \$) (Revenue \$	
) (D.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
k b (Code [.])(Expenses \$	including grants of \$) (Revenue \$	
c (Code)(Expenses \$	including grants of \$) (Revenue \$	
4d Other pr (Expens	ogram services (Describe in Schedes \$ 80,348	lule O) including grants of \$) (Revenue \$)
	ogram service expenses ▶	127,743	, h	
4				Form 990 (

59-0700781 Form 990 (2011) COCOA AMERICAN LEGION INC Page 3 **Checklist of Required Schedules** Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," X complete Schedule A X 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to X 3 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) 4 election in effect during the tax year? If "Yes," complete Schedule C, Part II 4 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, X 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If X 6 "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space, X the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 X complete Schedule D, Part III Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part 9 X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," X 9 complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in temporarily restricted X 10 endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 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 a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," X 11a complete Schedule D, Part VI b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more X 11b of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more X 11c of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets Х 11d reported in Part X, line 16? If "Yes," complete Schedule D, Part IX X 11e e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part XX 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Х 12a Schedule D, Parts XI, XII, and XIII b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if X 12b the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional X Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 13 X 14a 14a Did the organization maintain an office, employees, or agents outside of the United States? b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate X foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14b 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any X 15 organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance 16 X 16 to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on 17 X 17 Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 X Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 18

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

X

X

19

20a

20b

19

If "Yes," complete Schedule G, Part III

Form 990 (2011) COCOA AMERICAN LEGION INC 59-0700781 Page 4 Part IV **Checklist of Required Schedules (continued)** Yes No 21 Did the organization report more than \$5,000 of grants and other assistance to any government or organization Х 21 in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States 22 Х on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated X employees? If "Yes," complete Schedule J 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b X through 24d and complete Schedule K. If "No," go to line 25 24a 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24<u>c</u> to defease any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I 25b 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or X disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 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 X entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) X a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete X Schedule L. Part IV 28b c 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 X 29 X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified X conservation contributions? If "Yes," complete Schedule M 30 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, X 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," X 32 complete Schedule N, Part II 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations Х sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 33 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, 34 X IV, and V, line 1 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a Did the organization receive any payment from or engage in any transaction with a controlled entity within the X 35b meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 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 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, X 37

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

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

X

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Pa	rt V	Statements Regarding Other IRS Filings and Tax Compliance			
		Check if Schedule O contains a response to any question in this Part V		Van	No.
1a	Enter the	number reported in Box 3 of Form 1096 Enter -0- if not applicable		Yes	No
b		number of Forms W-2G included in line 1a Enter -0- if not applicable			ĺ
C		rganization comply with backup withholding rules for reportable payments to vendors and			
ŭ		e gaming (gambling) winnings to prize winners?	1c		x
2a		number of employees reported on Form W-3, Transmittal of Wage and Tax			
		nts, filed for the calendar year ending with or within the year covered by this return 2a 4			
b		one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	<u></u>
		he sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the oi	rganization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," h	nas it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b_		
4a	At any tim	ne during the calendar year, did the organization have an interest in, or a signature or other authority			İ
	over, a fir	nancial account in a foreign country (such as a bank account, securities account, or other financial			l
	account)?	9	4a		X
b		enter the name of the foreign country			
		uctions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.			
5a		organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	-	X
Ь	•	axable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		
C		o line 5a or 5b, did the organization file Form 8886-T?	5c		
6a		organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		х
L	•	tion solicit any contributions that were not tax deductible? did the organization include with every solicitation an express statement that such contributions or	Va		
b		e not tax deductible?	6b		
7	-	ations that may receive deductible contributions under section 170(c).	- 5.5		
' a		organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
u		ices provided to the payor?	7a	x	
b		did the organization notify the donor of the value of the goods or services provided?	7b		X
c		organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
		to file Form 8282?	7c		X
d	If "Yes," ı	indicate the number of Forms 8282 filed during the year 7d			
е	Did the o	organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f		organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g		anization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	<u> </u>	X
h		anization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	ļ	X
8	•	ring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	_	ations. Did the supporting organization, or a donor advised fund maintained by a sponsoring		1	
	_	tion, have excess business holdings at any time during the year?	8		
9	•	ring organizations maintaining donor advised funds.	0-		
a		organization make any taxable distributions under section 4966?	9a	 	 -
b		organization make a distribution to a donor, donor advisor, or related person?	9b		
10		501(c)(7) organizations. Enter fees and capital contributions included on Part VIII, line 12			
a		fees and capital contributions included on Part VIII, line 12 cepts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	\dashv		
11		501(c)(12) organizations. Enter			
		come from members or shareholders			
a b		come from other sources (Do not net amounts due or paid to other sources	$\overline{}$	1	
-		amounts due or received from them)			
12a	•	4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	1	
b		enter the amount of tax-exempt interest received or accrued during the year 12b			
13		501(c)(29) qualified nonprofit health insurance issuers.			
а		ganization licensed to issue qualified health plans in more than one state?	13a		
-		ee the instructions for additional information the organization must report on Schedule O			
b		e amount of reserves the organization is required to maintain by the states in which			
_		nization is licensed to issue qualified health plans			
С	_	e amount of reserves on hand		<u> </u>	
14a	Did the o	organization receive any payments for indoor tanning services during the tax year?	14a	-	X
_b		has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
DAA			Fo	_{om} 99	0 (2011)

59-0700781 Form 990 (2011) 'COÇOA AMERICAN LEGION INC Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI

<u>Sec</u>	tion A. Governing Body and Management			
4-	Establish sumbar of order manch as of the supposed bady at the and of the tourse	F	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are meteral differences in victims rights among members of the governing body as	-		
	If there are material differences in voting rights among members of the governing body, or			
	If the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b			
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?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct			
•	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		$\frac{x}{x}$
6	Did the organization have members or stockholders?	6		<u>x</u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	-		
14	one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	7.4		
•	stockholders, or persons other than the governing body?	7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following.			
a	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	100		
•	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Co			
	tion bit offices (This obotion b requests information about policies not required by the informat revenue oc	<u>, , , , , , , , , , , , , , , , , , , </u>	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	10.5		
-	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10ь		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	İ	X
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,"	1		
_	describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		Х
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a]	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b	1	
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ NONE			
18	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.			
	Own website Another's website Upon request			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy,			
	and financial statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization ▶ AMERICAN LEGION POST 22 22 LEGION LANE			
C	COA FL 32922			

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

Check if Schedule O contains a response to any question 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 orga (A) Name and Title	(B) Average hours per week (describe hours for	(d bo off	o not x, unli	Pos check ess pe	c) ition more erson i lirecto	than o	ne an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		organization and related organizations
(1) KEN WAKEFIELD		\vdash		 	 -					
ADJUNCT/SECR	1.00	1						0	0	(
(2) JOHN W WALKER							_			
FIRST V/P	1.00							0	0	(
(3) THOMAS LISTY										
FINANCE OFFI	3.00							0	0	(
(4) ALAN HENDRY										
COMMANDER	5.00							0	0	(
(5)										
(6)										
(7)										
(8)										
(9)										
(10)	<u> </u>									
(11)										
(12)		<u> </u>			-					
(13)										
(14)	 		<u> </u>		<u> </u>					

Pai	t VII , Section A. Officers	, Directors, Trus	tees	s, Ke	y Er	nplo	yees	, aı	nd Highest Compensated	Employees (continued)		_
	(A) Name and title	(B) Average hours per week (describe hours for	bo of	x, unle	Pos check ess pe nd a d	rson :: :recto	than or s both r/truste	an e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the	
		related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		organization and related organizations	
(15)												
(16)												
(17)												
(18)												_
(19)												
(20)												_
(21)												_
(22)												
(23)												
(24)			 									
(25)												
1b c	Sub-total Total from continuation shee	ets to Part VII. S	ectio	on A				<u>▶</u>				_
d	Total (add lines 1b and 1c)							>				_
2	Total number of individuals (increportable compensation from				nose	liste	d abo	ove)) who received more than \$1	00,000 in		
3	Did the organization list any fo	rmer officer, dire	ctor,	or tr	uste	e, ke	y em	plo	yee, or highest compensated	t	Yes No	•
4	employee on line 1a? If "Yes," For any individual listed on line organization and related organ	1a, is the sum o	f rep	ortat	ole co	ompe	ensat	tion	and other compensation from	m the	3 X	
5	individual Did any person listed on line 1	-								dividual	4 X	
	for services rendered to the or	ganization? If "Ye									5 X	<u>. </u>
1	ction B. Independent Contract Complete this table for your five compensation from the organization.	e highest compe	nsate	ed in	depe	nde	nt co	ntra	actors that received more tha	in \$100,000 of		_
		(A) I business address	пре	isati	011 10	i tile	Care			(B) otion of services	(C) Compensation	
2	Total number of independent or received more than \$100,000								e listed above) who	0		
											- 000	

Pa	rt VI	ll Statem	ent of Reve	nue	. <u>.</u>					
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
တ တ	10	Federated cam	201000	1a		╅		Tevende		372, 313, 01 314
Contributions, Gifts, Grants and Other Similar Amounts		Membership du	. •	1b		-				
ပ် နို		Fundraising eve		1c		\dashv				
Z g				1d		ᅱ				
2 2		Related organiz		1e						
Sis		Government grants ('''	···					
漢힐	'	All other contributions and similar amounts		1f	2,0	18				
물링	_			<u> </u>	2,0.	-				
52	_	Noncash contribution Total. Add lines		11 \$			2,018			
	- "	TOTAL AUG IIITE	5 Ia-II		Busn. Co	10	2,010			
e l	2a	MISCELLA	MPOHE		Busil. Co.		3,779	3,779		
Š	b	MISCELLIA	MEOOS							
<u>S</u>	c				<u> </u>	_				
<u>S</u>	d					1				
Program Service Revenue					-	\neg				
gra	f	All other progra	ım service rever	nue		T				
F		Total. Add line			<u></u>		3,779			
\neg	3		ome (including o	lıvıdends	, interest,					
		and other similar				•	2	2		
	4		vestment of tax-	exempt l	ond proceeds	▶ [
	5	Royalties			· •	▶ [
		. [(ı) Real		(s) Personal					
	6a	Gross rents								
	b	Less rental exps								
	С	Rental inc or (loss)	-							
	_d	Net rental inco	me or (loss)							·····
	7a	Gross amount from sales of assets	(i) Securities		(ii) Other	_				
		other than inventory								
	b	Less cost or other		1						
		basis & sales exps								
	С	Gain or (loss)								
	d	Net gain or (los	ss)	_	1	>				······
an	8a	Gross income fro	m fundraising eve	nts						
		(not including \$								
Sev.			eported on line 1c)						
Other Reven		See Part IV, line		a _						
ë		Less direct ex	•	ь		\dashv				
_		Net income or			vents					
	9a	Gross income fro				j				
		See Part IV, line		a _						
	l .	Less direct ex	•	b∟		\vdash				
		Net income or		ing activi	ues					· · · · · · · · · · · · · · · · · · ·
	10a	Gross sales of	-	_	107 0	ا ۾				
		returns and all		a L	187,8 72,3					
		Less cost of g		b L		:	115,541	115,541		
	᠆ᡩ	Net income or	(loss) from sale cellaneous Revenue	o or inver	Busn Co	ode	113,341	110,541		
	11a		COMMITTED IN THE PRINCE		Justi CC					
	11a b									
					 					
	d	All other reven	III A		 					
	l e	Total. Add line								
	12		s Tra-Tru s. See instruction	ns			121,340	119,322	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) but are not required to complete columns (B), (C), and (D)

	Check if Schedule O contains a response	to any question in this Part I			
	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U S See Part IV, line 22				
3	Grants and other assistance to governments,		İ		
	organizations, and individuals outside the				
	U S See Part IV, lines 15 and 16	-			
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
_	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	33,952	33,952		
7	Other salaries and wages	33,332	33,332		· · · · · · · · · · · · · · · · · · ·
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)			·	
9	Other employee benefits	4,375	4,375		
10	Payroll taxes	4,3/3	1/3/3		
11	Fees for services (non-employees)				
a	Management				
b	Legal	2,700	2,700		
ч С	Accounting Lobbying	2,700	27.00	, <u>.</u>	
d	Professional fundraising services See Part IV, line 17				
e f	Investment management fees				
	Other				
g 12	Advertising and promotion				
13	Office expenses	3,593	3,593		
14	Information technology	0,000			
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates			· - * * * ·	_
22	Depreciation, depletion, and amortization	2,650	229	2,421	
23	Insurance	6,368	6,368		
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)				
а	REPAIRS	32,238	32,238		
b	UTILITIES	19,217	19,217		
С	DUES AND SUBSCRIPTIONS	9,112	9,112		
d	AUTO	8,250	8,250		
е	All other expenses	7,709	7,709		
25	Total functional expenses Add lines 1 through 24e	130,164	127,743	2,421	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part	X Balance Sheet	(A)		(B)
		Beginning of year		End of year
1		32,210	1	25,455
2			2	
3			3	
4			4	
5	•			
	employees, and highest compensated employees. Complete Part II of		_	
	Schedule L		5	
6	, , ,			
	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary			
ets	employees' beneficiary organizations (see instructions)	730	6	
Assets		730	7	
۰ ا			8	
9	1 1		9	
10	la Land, buildings, and equipment cost or	4.7		
	other basis Complete Part VI of Schedule D b Less accumulated depreciation 10b 293,0		40.	12,970
		77 15,620		12,910
11	•		11	
12	· · · · · · · · · · · · · · · · · · ·	-	12	
13				
14	•		14 15	
15	·	48,560	16	38,425
10	The state of the s	3,142	17	1,831
17	·	3,112	18	1,001
18	• •		19	
19			20	
20	·		21	
2			-	
Liabilities	employees, highest compensated employees, and disqualified persons.			
≣	Complete Part II of Schedule L		22	
멸 2:			23	
2			24	
2				
-	parties, and other liabilities not included on lines 17-24). Complete Part X			
	of Schedule D		25	
20	6 Total liabilities. Add lines 17 through 25	3,142	26	1,83
	Organizations that follow SFAS 117, check here ▶ and complete			
S	lines 27 through 29, and lines 33 and 34.			
2			27	
Balances			28	
B 2	·		29	
Fund	Organizations that do not follow SFAS 117, check here ▶ 🗓 and			
៦	complete lines 30 through 34.			
st 3	Capital stock or trust principal, or current funds		30	
SS 3			31	
Net Assets or		45,418	32	36,594
Z 3		45,418	33	36,594
	4 Total liabilities and net assets/fund balances	48,560	34	38,425

Form	990 (2011) COCOA AMERICAN LEGION INC 59-0700781			Paç	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI		·····		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	12	21,3	340
2	Total expenses (must equal Part IX, column (A), line 25)	2		30,3	
3	Revenue less expenses Subtract line 2 from line 1	3		-8,8	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	- 4	45,4	418
5	Other changes in net assets or fund balances (explain in Schedule O)	5			
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33,				
	column (B))	6		36,	594
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		_	İ	İ
	Schedule O				ĺ
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
b	Were the organization's financial statements audited by an independent accountant?		2b		X
С	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		
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O				
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were				
	issued on a separate basis, consolidated basis, or both.				
	Separate basis Consolidated basis Both consolidated and separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			i l	
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2011)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. OMB No 1545-0047 Open to Public

▶ Attach to Form 990. ▶ See separate instructions. Inspection Name of the organization Employer identification number COCOA AMERICAN LEGION INC 59-0700781 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2a a Total number of conservation easements 2b Total acreage restricted by conservation easements 2c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) Yes No In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenues included in Form 990, Part VIII, line 1 \$

11403								
Sche	dulé D (Form 990), 2011 COCOA AM	MERICAN LEGI	ON INC	59-0	700781		Р	age 2
Pa	rt III Organizations Maintainii	ng Collections of	Art, Historical Tr	easures, or Other	Similar Assets (continu	ed)	
3								
а	Public exhibition	d 🗀	Loan or exchange pro	grams				
b	Scholarly research		Other	9				
C	Preservation for future generations	• 🗀						
4	Provide a description of the organization's c	collections and explain h	now they further the ord	anization's exempt purt	ose in Part			
	XIV	•	·	,				
5	During the year, did the organization solicit	or receive donations of	art, historical treasures	s, or other similar				
	assets to be sold to raise funds rather than	to be maintained as par	rt of the organization's	collection?		Y	s	No
Pa	rt IV Escrow and Custodial A				Yes" to Form 990,	Part I	7,	
	line 9, or reported an amo	_						
1a	Is the organization an agent, trustee, custoo			other assets not				
	included on Form 990, Part X?					Y	s 🗆	No
b	If "Yes," explain the arrangement in Part XIV	and complete the follo	wing table.					
						Amoun	t	
C	Beginning balance				1c			
d	Additions during the year				1d			
е	Distributions during the year				1e			
f	Ending balance				1f			
2a	Did the organization include an amount on F	Form 990, Part X, line 2	1?			Y	s 🗌	No
b	If "Yes," explain the arrangement in Part XIV	V						
Pa	rt V Endowment Funds. Com	plete if the organiz	zation answered "	Yes" to Form 990, I	Part IV, line 10.			
		(a) Current year	(b) Pnor year	(c) Two years back	(d) Three years back	(e) For	r years	back
1a	Beginning of year balance					ļ		
b	Contributions					ļ		
С	Net investment earnings, gains, and							
	losses							
	Grants or scholarships					<u> </u>		
е	Other expenditures for facilities and							
	programs					<u> </u>		
f	Administrative expenses					ļ		
9	End of year balance		<u> </u>	<u> </u>		L		
	Provide the estimated percentage of the cui	-	(line 1g, column (a)) he	eld as:				
	Board designated or quasi-endowment ▶	%						
	Permanent endowment > %							
С	Temporarily restricted endowment ▶	%						
ο.	The percentages in lines 2a, 2b, and 2c sho	•		4				
<i>3</i> a	Are there endowment funds not in the posse	ession of the organization	on that are held and ac	iministered for the				Γ
	organization by					(a //)	Yes	No
	(i) unrelated organizations					3a(i)		
L	(ii) related organizations	an lintad on an account	Cabadula DO			3a(ii)		
D	If "Yes" to 3a(II), are the related organization	ns iisted as required on	Scriedule K?			3b		

Part VI	Land, Buildings, and Equip	nent. See Form 990,	Part X, line 10.		
	Description of property	(a) Cost or other basis	(b) Cost or other basis	(c) Accumulated	(d) Book value
		(investment)	(other)	depreciation	
1a Land					
b Building	gs				
c Leaseh	old improvements				
d Equipm	nent				
e Other			306,047	293,077	12,970
otal. Add lin	es 1a through 1e (Column (d) must equa	al Form 990, Part X, columi	n (B), line 10(c))	•	12,970

Schedule D (Form 990) 2011

Schedule D (Fe	ormi 990),2011 COCOA AMERICAN LEGION	INC	59-0700781	Page 3
Part VII	Investments-Other Securities. See Form 990			
	(a) Description of security or category	(b) Book value	(c) Method of	valuation
	(including name of security)		Cost or end-of-year	market value
(1) Financial d	erivatives			
	Id equity interests	·····		
(3) Other	a oquity into total		-	
(A)		***		
(A) (B)				
(C)				
(D)			-	
(E)				
(F)				,
(G)				
(H)				
(1)	(1) 15 000 D 17 1 (D) 1 - 10		—	
	(b) must equal Form 990, Part X, col (B) line 12)	Dort V line 12		
Part VIII	Investments—Program Related. See Form 990		(c) Method of	valuation
	(a) Description of investment type	(b) Book value	Cost or end-of-year	
			0001 01 0110 01 700	· mande value
(1)		 	- 	
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)		-		
(10)		- -		
	n (b) must equal Form 990, Part X, col (B) line 13)	<u> </u>	<u> </u>	
Part IX	Other Assets. See Form 990, Part X, line 15.			(b) Book value
	(a) Description	 		(b) BOOK VAIDO
(1)				
(2)				
(3)				
(4)				
(5)				·
(6)				
(7)		·		
(8)				
(9)				
(10)			•	
	n (b) must equal Form 990, Part X, col (B) line 15)			
Part X	Other Liabilities. See Form 990, Part X, line 25			
1.	(a) Description of liability	(b) Book value		
	income taxes			
(2)		-		
(3)				
(4)			\dashv	
_(5)				
(6)		 	\dashv	
(7)		 	\dashv	
(8)		 		
(9)				
(10)		-	\dashv	
(11)			-	
Total. (Colum	n (b) must equal Form 990, Part X, col (B) line 25)		Latatements that raparts the	

che	dule D (Form 990),2011 COCOA AMERICAN LEGION INC		-0700781	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form	990 to Audited Financ	ial Statements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	
3	Excess or (deficit) for the year Subtract line 2 from line 1		3	
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities		5	
6	Investment expenses		6	
7	Prior period adjustments		7	
8	Other (Describe in Part XIV)		8	
9	Total adjustments (net) Add lines 4 through 8		9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines	3 and 9	10	
Pa	rt XII Reconciliation of Revenue per Audited Financial S	Statements With Revenu	ue per Return	
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.			
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIV)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:] [
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV)	4b		
С	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 XIII Reconciliation of Expenses per Audited Financial	Statements With Exper	nses per Return	
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities	2a		
þ	Prior year adjustments	2b		
C	Other losses	2c		
d	Other (Describe in Part XIV)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1	,	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV)	4b		
С	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	3)	5	

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Part XIV Supplemental Information (continued)

SCHEDULE O

(Form 990 or 990-EZ)

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.

2011 Open to Public Inspection

OMB No 1545-0047

Internal Revenue Service
Name of the organization

COCOA AMERICAN LEGION INC

Employer Identification number 59 - 0700781

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENT PROVIDED SERVICES TO VETERANS

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 NO REVIEW WAS OR WILL BE CONDUCTED.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION NO DOCUMENTS AVAILABLE TO THE PUBLIC

11403				
Forms	Oth.	er Notes and Lo	ans Receivable	
990 / 990-PF				2011
	For calendar year 2011, or	tax year beginning	, and ending	
Name			Employer	Identification Number
COCOA AMERICA	N LEGION INC		59-07	700781
COCOA AMERICA	THE TON THE		1 33-07	700701
FORM 990, PAR	RT X, LINE 7 - A	DDITIONAL IN	FORMATION	
· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·			
	Name of borrower		Relationship to disqualified per	rson
(1) LOAN RECEIV	/ABLE		11	
(2)				
(3)				
(4)				
(5)				
(6)			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
				· · · · · · · · · · · · · · · · · · ·
(9) (10)	·-			.
(10)				
Original amount	.	Maturity		Interest
Original amount borrowed	Date of loan	date	Repayment terms	rate
(1)				
(2)		-		
(3)				
(4)				
(5)		···	· · · · · · · · · · · · · · · · · · ·	
(6) (7)				
(8)				
(9)				
(10)				
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	***************************************			
	curity provided by borrower		Purpose of loan	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)	 			
(7)				
(8) (9)				
(10)				
7.57		<u>-</u>		

Consideration furnished by lender	Balance due at beginning of year	Balance due at end of year	Fair market value (990-PF only)
)	730		
)			
		·	
<u> </u>			
0)			
Totals	730		

Depreciation and Amortization (Including Information on Listed Property)

OMB No 1545-0172

Department of the Treasury Internal Revenue Service

▶ See separate instructions. (99)

► Attach to your tax return

Identifying number Name(s) shown on return COCOA AMERICAN LEGION INC 59-0700781 Business or activity to which this form relates INDIRECT DEPRECIATION Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 500,000 1 Maximum amount (see instructions) 2 2 Total cost of section 179 property placed in service (see instructions) 2,000,000 3 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 4 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-5 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5 (c) Elected cost (a) Description of property (b) Cost (business use only) 6 7 7 Listed property Enter the amount from line 29 8 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 9 Tentative deduction Enter the smaller of line 5 or line 8 10 10 Carryover of disallowed deduction from line 13 of your 2010 Form 4562 11 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 12 13 Carryover of disallowed deduction to 2012 Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions) Special depreciation allowance for qualified property (other than listed property) placed in service 14 14 during the tax year (see instructions) 15 15 Property subject to section 168(f)(1) election 16 Other depreciation (including ACRS) 16 MACRS Depreciation (Do not include listed property.) (See instructions) Part III Section A 2,650 17 17 MACRS deductions for assets placed in service in tax years beginning before 2011 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2011 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (e) Convention (f) Method (a) Depreciation deduction (business/investment use (a) Classification of property placed in penod only-see instructions) service 19a 3-year property h 5-year property 7-year property d 10-year property e 15-year property 20-year property S/L g 25-year property 25 yrs S/L 27 5 yrs ММ Residential rental property MM S/L 27 5 yrs MM S/L 39 yrs Nonresidential real property MM Section C—Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System 20a Class life S/L S/L 12 yrs 12-year S/L MM 40 yrs 40-vear Summary (See instructions.) Part IV 21 21 Listed property Enter amount from line 28 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here 2,650 22 and on the appropriate lines of your return. Partnerships and S corporations—see instructions For assets shown above and placed in service during the current year, enter the

portion of the basis attributable to section 263A costs