

Form **990-EZ**
Department of the Treasury
Internal Revenue Service

Short Form

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)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.

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

OMB No 1545-1150
2009
Open to Public Inspection

A For the 2009 calendar year, or tax year beginning 01-01-2009, and ending 12-31-2009

- B** Check if applicable:
- Address change
 - Name change
 - Initial return
 - Terminated
 - Amended return
 - Application pending

C Name of organization: AMVETS POST NO 893 INC

Number and street (or P O box, if mail is not delivered to street address) Room/suite: 218 HARDEE LANE

City or town, state or country, and ZIP + 4: COCOA, FL 32922

D Employer identification number: 59-3155051

E Telephone number: (321) 639-9700

F Group Exemption Number:

G Accounting method: Cash Accrual
Other (specify):

H Check if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

K Check if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally **not** more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ. **\$ 220,885**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I)

Revenue	
1 Contributions, gifts, grants, and similar amounts received	1 35
2 Program service revenue including government fees and contracts	2 216,625
3 Membership dues and assessments	3 4,197
4 Investment income	4 28
5a Gross amount from sale of assets other than inventory	5a
b Less cost or other basis and sales expenses	5b 0
5c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c
6 Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here <input type="checkbox"/>	
a Gross revenue (not including \$ of contributions reported on line 1)	6a 0
b Less direct expenses other than fundraising expenses	6b 0
6c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c 0
7a Gross sales of inventory, less returns and allowances	7a
b Less cost of goods sold	7b 0
7c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c
8 Other revenue (describe)	8
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9 220,885

Expenses	
10 Grants and similar amounts paid (attach schedule)	10
11 Benefits paid to or for members	11
12 Salaries, other compensation, and employee benefits	12
13 Professional fees and other payments to independent contractors	13 2,850
14 Occupancy, rent, utilities, and maintenance	14 22,845
15 Printing, publications, postage, and shipping	15 1,900
16 Other expenses (describe)	16 184,520
17 Total expenses. Add lines 10 through 16	17 212,115

Net Assets	
18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18 8,770
19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19 29,339
20 Other changes in net assets or fund balances (attach explanation)	20
21 Net assets or fund balances at end of year. Combine lines 18 through 20	21 38,109

Part II Balance Sheets—If total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ

(See the instructions for Part II)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	5,349	22 10,076
23 Land and buildings	76,934	23 74,101
24 Other assets (describe)	10,523	24 7,873
25 Total assets	92,806	25 92,050
26 Total liabilities (describe)	63,467	26 53,941
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	29,339	27 38,109

Part V Other Information (Note the statement requirements in the instructions for Part V.)

		Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		No
34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		No
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T			
a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033 (e) notice, reporting, and proxy tax requirements?	35a		No
b If "Yes," has it filed a tax return on Form 990-T for this year?	35b		
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		No
37a Enter amount of political expenditures, direct or indirect, as described in the instructions ▶	37a		
b Did the organization file Form 1120-POL for this year?	37b		No
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a		No
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b		
39 <i>Section 501(c)(7) organizations.</i> Enter			
a Initiation fees and capital contributions included on line 9	39a	0	
b Gross receipts, included on line 9, for public use of club facilities	39b	0	
40a <i>Section 501(c)(3) organizations.</i> Enter amount of tax imposed on the organization during the year under section 4911 ▶ _____, section 4912 ▶ _____, section 4955 ▶ _____			
b <i>Section 501(c)(3) and 501(c)(4) organizations.</i> Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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	40b		
c <i>Section 501(c)(3) and 501(c)(4) organizations</i> Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ _____			
d <i>Section 501(c)(3) and 501(c)(4) organizations</i> Enter amount of tax on line 40c reimbursed by the organization ▶ _____			
e <i>All organizations.</i> At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		No
41 List the states with which a copy of this return is filed ▶ _____			
42a The organization's books are in care of ▶ <u>ACTION ACCOUNTING TAX OF FLA</u> Telephone no ▶ <u>(321) 638-4744</u> 635 BREVARD AV Located at ▶ <u>COCOA, FL</u> ZIP + 4 ▶ <u>32922</u>			
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶ _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	42b	Yes	No
c At any time during the calendar year, did the organization maintain an office outside of the U S ? If "Yes," enter the name of the foreign country ▶ _____	42c		No
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43	43		
44 Did the organization maintain any donor advised funds? If "Yes", Form 990 must be completed instead of Form 990-EZ.	44	Yes	No
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes", Form 990 must be completed instead of Form 990-EZ.	45		No

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.

All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

	Yes	No
46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		
47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		
48 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		
49a Did the organization make any transfers to an exempt non-charitable related organization?		
49b If "Yes," was the related organization a section 527 organization?		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				

50(f) Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		

51(d) Total number of other independent contractors each receiving over \$10

Under penalties of perjury, I declare that I have examined this return, including all schedules and attachments, and the information therein is true, correct, and complete. Declaration of preparer (other than officer) if other than preparer has signed return.

Please Sign Here

Signature of officer

TERRY TARNTINO, COMMANDER
Type or print name and title

Paid Preparer's Use Only

Preparer's signature: John H Bailey III Date: _____

Firm's name (or yours if self-employed), address, and ZIP + 4: ACTION ACCOUNTING AND TAX OF FLORIDA
635 BREVARD AVE
COCOA, FL 329227807

May the IRS discuss this return with the preparer shown above? See instructions.

Additional Data**Software ID:****Software Version:****EIN:** 59-3155051**Name:** AMVETS POST NO 893 INC**Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees**

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
TERRY TARNTINO 4550 DELESTINE RD COCOA, FL 32927	Commander 20 00	0		
PAUL J THIBODEAU 41208 BARNA AVENUE TITUSVILLE, FL 32780	2nd VC Commande 20 00	0		
FRITZ ZIMNES 3461 BASHMAN AVE ROCKLEDGE, FL 32955	1st VC Commande 20 00	0		
EDWARD MAURER 1212 PRINCETON RD COCOA, FL 32922	Finance Officer 40 00	0		

TY 2009 Other Assets Schedule

Name: AMVETS POST NO 893 INC

EIN: 59-3155051

Software ID: 09000047

Software Version: 2009v1.3

Description	Beginning of Year Amount	End of Year Amount
Machinery and Equipment	5,860	7,790
Furniture and Fixtures	83	83
DEPOSITS HELD AS SECURITY	4,580	

TY 2009 Other Expenses Schedule

Name: AMVETS POST NO 893 INC

EIN: 59-3155051

Software ID: 09000047

Software Version: 2009v1.3

Description	Amount
UNIFORMS	625
TOOLS/EQUIP UNDER \$1000	445
TAXES REAL ESTATE	158
TAGES & TITLES	76
SUPPLIES	4,707
SODA PURCHASES	3,381
SECURITY	1,843
SEC	70
SALES TAX PAID	7,880
PERMITS & CERTIFICATE FEES	905
Office Expenses	2,686
MISCELLANEOUS EXP	473
MISC CANTEEN PURCHASES	85
LIQUOR PURCHASES	22,475
LATE FEE	22
Interest	4,547
FUNCTIONS EXPENSES	1,659
FOOD PURCHASES	9,418
EQUIPMENT REPAIRS & MAINTENANC	952
ENTERTAINMENT	4,453
DUES	4,616
DONATIONS	245
Depreciation	3,003
DAILY WINS	285
CONTRACT LABOR-PERSON	1,325
CANTEEN SUPPLIES	5,795
BEER PURCHASED	25,364
BANK SERVICE CHARGES	120
AUTO GAS & OIL	11,888
AD TAB BONUS	60,084

TY 2009 Other Liabilities Schedule

Name: AMVETS POST NO 893 INC

EIN: 59-3155051

Software ID: 09000047

Software Version: 2009v1.3

Description	Beginning of Year Amount	End of Year Amount
Secured Mortgages and Notes Payable	58,284	57,484
Payable to Officers, Directors, Etc.	5,000	
CAPITAL INVESTMENTS.		6,343
Accounts Payable and Accrued Expenses	183	2,800