


Form 990



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 private foundations)

▶ Do not enter social security numbers on this form as it may be made public

▶ Information about Form 990 and its instructions is at www.irs.gov/form990

OMB No 1545-0047

2015

Open to Public Inspection

A For the 2015 calendar year, or tax year beginning 05-01-2015 , and ending 04-30-2016

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Final return/terminated

☐ Amended return

☐ Application pending

C Name of organization

AMERICAN LEGION - MAINE DEPARTMENT

Doing business as

Number and street (or P O box if mail is not delivered to street address)

PO BOX 900

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

WINSLOW, ME 049010727

F Name and address of principal officer

PAUL L'HEUREUX

D Employer identification number

01-0018930

E Telephone number

(207) 873-3229

G Gross receipts \$

784,286

H(a) Is this a group return for subordinates?

☐ Yes ☒ No

H(b) Are all subordinates included?

☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status

☐ 501(c)(3) ☒ 501(c) (19) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶

WWW.MAINELEGION.ORG

K Form of organization

☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation

1919

M State of legal domicile

ME

Part I	Summary																								
Activities & Governance	<div><div>1</div><div>Briefly describe the organization's mission or most significant activities</div><div>PROVIDE ASSISTANCE TO VETERANS</div><div></div><div></div><div></div></div>																								
	<div><div>2</div><div>Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets</div></div>																								
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Part II

Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

Signature of officer

2016-07-21

Date

PAUL L'HEUREUX ADJUTANT

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name

GREGORY DICKINSON

Preparer's signature

GREGORY DICKINSON

Date

2016-07-21

Check ☐ if self-employed

PTIN

P01231910

Firm's name ▶

FELCH & COMPANY LLC

Firm's EIN ▶

01-0540055

Firm's address ▶

PO BOX 906

CARIBOU, ME 047360906

Phone no

(207) 498-3176

May the IRS discuss this return with the preparer shown above? (see instructions)

☐ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form990(2015)