

Department of the Treasury  
Internal Revenue Service

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

Open to Public Inspection

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

**A For the 2004 calendar year, or tax year beginning** **MAR 1, 2004** **and ending** **FEB 28, 2005**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	<b>C Name of organization</b> <b>VIETNAM VETERANS OF AMERICA, INC.</b> <b>CHAPTER 20</b>		<b>D Employer identification number</b> 16-1185365
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>1199 EAST MAIN STREET</b>		<b>E Telephone number</b> 585-482-8036
		City or town, state or country, and ZIP + 4 <b>ROCHESTER, NY 14609</b>		<b>F Accounting method:</b> <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

H and I are not applicable to section 527 organizations.

H(a) Is this a group return for affiliates?  Yes  No

H(b) If "Yes," enter number of affiliates

H(c) Are all affiliates included? **N/A**  Yes  No

H(d) Is this a separate return filed by an organization covered by a group ruling?  Yes  No

I Group Exemption Number **3202**

M Check  if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

G Website: **vvchapter20.org**

J Organization type (check only one)  501(c) ( 19 ) (insert no.)  4947(a)(1) or  527

K Check here  if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 **808,857.**

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances**

Revenue	1	Contributions, gifts, grants, and similar amounts received:			
	a	Direct public support	1a	254,366.	
	b	Indirect public support	1b		
	c	Government contributions (grants)	1c		
	d	Total (add lines 1a through 1c) (cash \$ 254,366. noncash \$ )	1d	254,366.	
	2	Program service revenue including government fees and contracts (from Part VII, line 93)		2	
	3	Membership dues and assessments		3	2,640.
	4	Interest on savings and temporary cash investments		4	424.
	5	Dividends and interest from securities		5	4,580.
	6a	Gross rents	6a		
	b	Less: rental expenses	6b		
	c	Net rental income or (loss) (subtract line 6b from line 6a)		6c	
7	Other investment income (describe )		7		
Revenue	8a	(A) Securities		8a	517,372.
		(B) Other			
	b	Less: cost or other basis and sales expenses		8b	
		Gain or (loss) (attach schedule)			
d	Net gain or (loss) (combine line 8c, columns (A) and (B)) Stmt 2 Stmt 3		8d	513,130.	
9	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>				
Revenue	a	Gross revenue (not including \$ of contributions reported on line 1a)	9a		
	b	Less: direct expenses other than fundraising expenses	9b		
	c	Net income or (loss) from special events (subtract line 9b from line 9a)		9c	
Revenue	a	Gross sales of inventory, less returns and allowances	10a		
	b	Less: cost of goods sold	10b		
	c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)		10c	
	11	Other revenue (from Part VII, line 103)		11	6,457.
	12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)		12	781,597.
Expenses	13	Program services (from line 44, column (B))		13	710,829.
	14	Management and general (from line 44, column (C))		14	151,373.
	15	Fundraising (from line 44, column (D))		15	30,515.
	16	Payments to affiliates (attach schedule)		16	
	17	Total expenses (add lines 16 and 44, column (A))		17	892,717.
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)		18	-111,120.
	19	Net assets or fund balances at beginning of year (from line 73, column (A))		19	432,251.
	20	Other changes in net assets or fund balances (attach explanation) See Statement 4		20	6,855.
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)		21	327,986.

**Part II Statement of Functional Expenses**

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. Page 2

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____)				
23	Specific assistance to individuals (attach schedule)	6,130.	6,130.	Statement 6	
24	Benefits paid to or for members (attach schedule)				
25	Compensation of officers, directors, etc.	313,010.	250,408.	62,602.	0.
26	Other salaries and wages				
27	Pension plan contributions				
28	Other employee benefits	23,354.	18,684.	4,670.	
29	Payroll taxes	24,773.	19,818.	4,955.	
30	Professional fundraising fees				
31	Accounting fees	9,026.		9,026.	
32	Legal fees	6,427.		6,427.	
33	Supplies	17,443.	7,347.	10,096.	
34	Telephone	14,539.	550.	13,989.	
35	Postage and shipping				
36	Occupancy	139,664.	132,681.	6,983.	
37	Equipment rental and maintenance	24,335.	21,634.	2,701.	
38	Printing and publications	16,563.	16,563.		
39	Travel	9,309.	9,309.		
40	Conferences, conventions, and meetings	23,033.	23,033.		
41	Interest				
42	Depreciation, depletion, etc. (attach schedule)	14,346.	7,854.	6,492.	
43	Other expenses not covered above (itemize):				
a	_____				
b	_____				
c	_____				
d	_____				
e	See Statement 5	250,765.	196,818.	23,432.	30,515.
44	Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15.	892,717.	710,829.	151,373.	30,515.

**Joint Costs.** Check  if you are following SOP 98-2.  
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No  
 If "Yes," enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_; (ii) the amount allocated to Program services \$ \_\_\_\_\_;  
 (iii) the amount allocated to Management and general \$ \_\_\_\_\_; and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_

**Part III Statement of Program Service Accomplishments**

What is the organization's primary exempt purpose? <input type="checkbox"/>	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
<b>PROVIDE VETERANS SERVICES</b> All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	
a PROVIDES A MEETING CENTER FOR VETERANS, JOB COUNSELING AND PLACEMENT SERVICES, AND ADVOCACY FOR VIETNAM VETERANS' CAUSES. (Grants and allocations \$ _____)	249,725.
b PROVIDES USED CLOTHING AND GOODS TO THE PUBLIC AT REDUCED PRICES THROUGH THE ORGANIZATION'S THRIFT STORE. ITEMS SOLD HAVE BEEN DONATED TO THE ORGANIZATION. (Grants and allocations \$ _____)	461,104.
c _____ (Grants and allocations \$ _____)	
d _____ (Grants and allocations \$ _____)	
e Other program services (attach schedule) (Grants and allocations \$ _____)	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	710,829.

**Part IV Balance Sheets**

**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year
<b>Assets</b>	45 Cash - non-interest-bearing .....	86,206.	45	41,128.
	46 Savings and temporary cash investments .....	143,327.	46	53,992.
	47 a Accounts receivable .....	47a 48,487.		
	b Less: allowance for doubtful accounts .....	47b	15,910.	47c 48,487.
	48 a Pledges receivable .....	48a		
	b Less: allowance for doubtful accounts .....	48b		48c
	49 Grants receivable .....			49
	50 Receivables from officers, directors, trustees, and key employees .....			50
	51 a Other notes and loans receivable .....	51a		
	b Less: allowance for doubtful accounts .....	51b		51c
	52 Inventories for sale or use .....	6,350.	52	4,939.
	53 Prepaid expenses and deferred charges .....	5,198.	53	3,122.
	54 Investments - securities Stmt 7 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	149,408.	54	137,871.
	55 a Investments - land, buildings, and equipment: basis .....	55a		
	b Less: accumulated depreciation .....	55b		55c
56 Investments - other .....			56	
57 a Land, buildings, and equipment: basis .....	57a 150,352.			
b Less: accumulated depreciation .....	57b 82,387.	57,525.	57c 67,965.	
58 Other assets (describe <input type="checkbox"/> )			58	
<b>59 Total assets</b> (add lines 45 through 58) (must equal line 74)	<b>463,924.</b>	<b>59</b>	<b>357,504.</b>	
<b>Liabilities</b>	60 Accounts payable and accrued expenses .....	31,673.	60	29,518.
	61 Grants payable .....		61	
	62 Deferred revenue .....		62	
	63 Loans from officers, directors, trustees, and key employees .....		63	
	64 a Tax-exempt bond liabilities .....		64a	
	b Mortgages and other notes payable .....		64b	
	65 Other liabilities (describe <input type="checkbox"/> )		65	
<b>66 Total liabilities</b> (add lines 60 through 65)	<b>31,673.</b>	<b>66</b>	<b>29,518.</b>	
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.</b>			
	67 Unrestricted .....	423,533.	67	327,986.
	68 Temporarily restricted .....	8,718.	68	0.
	69 Permanently restricted .....		69	
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.</b>			
	70 Capital stock, trust principal, or current funds .....		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund .....		71	
	72 Retained earnings, endowment, accumulated income, or other funds .....		72	
	<b>73 Total net assets or fund balances</b> (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)	<b>432,251.</b>	<b>73</b>	<b>327,986.</b>
	<b>74 Total liabilities and net assets / fund balances</b> (add lines 66 and 73)	<b>463,924.</b>	<b>74</b>	<b>357,504.</b>

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.



**VIETNAM VETERANS OF AMERICA, INC.**  
**CHAPTER 20**

Form 990 (2004)

16-1185365

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<b>Part VI</b>	<b>Other Information</b>	<b>Yes</b>	<b>No</b>
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77	X
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? <span style="float:right">N/A</span>	78b	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X
b	If "Yes," enter the name of the organization <span style="float:right">▶ <u>See Statement 10</u></span> and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.		
81 a	Enter direct or indirect political expenditures. See line 81 instructions <span style="float:right">81a</span> <span style="float:right">0.</span>		
b	Did the organization file <b>Form 1120-POL</b> for this year?	81b	X
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) <span style="float:right">82b</span> <span style="float:right">N/A</span>		
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? <span style="float:right">N/A</span>	84b	
85	<b>501(c)(4), (5), or (6) organizations.</b> a Were substantially all dues nondeductible by members? <span style="float:right">N/A</span>	85a	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? <span style="float:right">N/A</span> If "Yes" was answered to either 85a or 85b, <b>do not</b> complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.	85b	
c	Dues, assessments, and similar amounts from members <span style="float:right">85c</span> <span style="float:right">N/A</span>		
d	Section 162(e) lobbying and political expenditures <span style="float:right">85d</span> <span style="float:right">N/A</span>		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices <span style="float:right">85e</span> <span style="float:right">N/A</span>		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) <span style="float:right">85f</span> <span style="float:right">N/A</span>		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? <span style="float:right">N/A</span>	85g	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? <span style="float:right">N/A</span>	85h	
86	<b>501(c)(7) organizations.</b> Enter: a Initiation fees and capital contributions included on line 12 <span style="float:right">86a</span> <span style="float:right">N/A</span>		
b	Gross receipts, included on line 12, for public use of club facilities <span style="float:right">86b</span> <span style="float:right">N/A</span>		
87	<b>501(c)(12) organizations.</b> Enter: a Gross income from members or shareholders <span style="float:right">87a</span> <span style="float:right">N/A</span>		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) <span style="float:right">87b</span> <span style="float:right">N/A</span>		
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	X
89 a	<b>501(c)(3) organizations.</b> Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ <u>N/A</u> ; section 4912 ▶ <u>N/A</u> ; section 4955 ▶ <u>N/A</u>		
b	<b>501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction <span style="float:right">N/A</span>	89b	
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <span style="float:right">▶</span> <span style="float:right">N/A</span>		
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization <span style="float:right">▶</span> <span style="float:right">N/A</span>		
90 a	List the states with which a copy of this return is filed <span style="float:right">▶</span> <u>NEW YORK</u>		
b	Number of employees employed in the pay period that includes March 12, 2004 <span style="float:right">90b</span> <span style="float:right">25</span>		
91	The books are in care of <span style="float:right">▶</span> <u>THE ORGANIZATION</u> Telephone no. <span style="float:right">▶</span> <u>(585) 482-8036</u>		
	Located at <span style="float:right">▶</span> <u>1199 EAST MAIN STREET, ROCHESTER, NY</u> ZIP + 4 <span style="float:right">▶</span> <u>14609</u>		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here <span style="float:right">▶</span> <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year <span style="float:right">92</span> <span style="float:right">N/A</span>		

423041  
01-13-05

Form 990 (2004)

**Part VII Analysis of Income-Producing Activities** (See page 33 of the instructions.)

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
<b>93</b> Program service revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments .....					
g Fees and contracts from government agencies .....					
<b>94</b> Membership dues and assessments .....					2,640.
<b>95</b> Interest on savings and temporary cash investments .....			14	424.	
<b>96</b> Dividends and interest from securities .....			14	4,580.	
<b>97</b> Net rental income or (loss) from real estate:					
a debt-financed property .....					
b not debt-financed property .....					
<b>98</b> Net rental income or (loss) from personal property .....					
<b>99</b> Other investment income .....					
<b>100</b> Gain or (loss) from sales of assets other than inventory .....			05	517,372.	-4,242.
<b>101</b> Net income or (loss) from special events .....					
<b>102</b> Gross profit or (loss) from sales of inventory .....					
<b>103</b> Other revenue:					
a <b>Miscellaneous</b> .....					6,457.
b _____					
c _____					
d _____					
e _____					
<b>104</b> Subtotal (add columns (B), (D), and (E)) .....		0.		522,376.	4,855.
<b>105</b> Total (add line 104, columns (B), (D), and (E)) .....					527,231.

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See page 34 of the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
94	MEMBERS ARE ENTITLED TO ATTEND AND PARTICIPATE IN INFORMATIONAL MEETINGS, MANY OF WHICH INCLUDE MEALS.
103a	MISCELLANEOUS INCOME RELATED TO THE FUNCTIONS OF THE ORGANIZATION.

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See page 34 of the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See page 34 of the instructions.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Please Sign Here

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.

Signature of officer: *[Signature]* Date: 7-8-05 Nelson Deck Jr - President

Preparer's signature: *[Signature]* Date: 7-8-05 Check if self-employed  Preparer's SSN or PTIN

Firm's name (or yours if self-employed), address, and ZIP + 4: Heveron & Heveron, CPAs, P.C., 260 Plymouth Avenue South, Rochester, New York 14608

EIN: Phone no.: (585) 232-2956

Footnotes	Statement	1
FORM 990, PART IV - 57a		
BUILDINGS & IMPROVEMENTS - BEGINNING OF YEAR	51,034.	
ADDITIONS	2,350.	
RETIREMENTS	0.	
END OF YEAR	53,384.	
THRIFT STORE - BEGINNING OF YEAR	20,000.	
ADDITIONS	0.	
RETIREMENTS	0.	
END OF YEAR	20,000.	
FURNITURE & FIXTURES - BEGINNING OF YEAR	14,064.	
ADDITIONS	10,570.	
RETIREMENTS	0.	
END OF YEAR	24,634.	
EQUIPMENT - BEGINNING OF YEAR	12,468.	
ADDITIONS	0.	
RETIREMENTS	0.	
END OF YEAR	12,468.	
VEHICLES - BEGINNING OF YEAR	0.	
ADDITIONS	9,394.	
RETIREMENTS	0.	
END OF YEAR	9,394.	
WEBPAGE - BEGINNING OF YEAR	0.	
ADDITIONS	17,472.	
RETIREMENTS	0.	
END OF YEAR	17,472.	
TOTAL ASSETS - BEGINNING OF YEAR	97,566.	
ADDITIONS	39,786.	
RETIREMENTS	0.	
END OF YEAR	137,352.	

FORM 990, PART IV - 57b

TOTAL ACCUM DEP - BEGINNING OF YEAR	68,041.
ADDITIONS	14,346.
RETIREMENTS	0.
END OF YEAR	<u>82,387.</u>



Form 990                      Gain (Loss) From Publicly Traded Securities                      Statement      2

Description	Gross Sales Price	Cost or Other Basis	Expense of Sale	Net Gain or (Loss)
	23,018.	27,260.	0.	-4,242.
To Form 990, Part I, line 8	23,018.	27,260.	0.	-4,242.

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Form 990                      Gain (Loss) From Sale of Other Assets                      Statement      3

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Description	Date	Date	Method		
	Acquired	Sold	Acquired		
THRIFT STORE SALES	Various	Various	DONATED		
Name of Buyer	Gross Sales Price	Cost or Other Basis	Expense of Sale	Deprec	Net Gain or (Loss)
VARIOUS	517,372.	0.	0.	0.	517,372.
To Fm 990, Part I, ln 8	517,372.	0.	0.	0.	517,372.

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Form 990                      Other Changes in Net Assets or Fund Balances                      Statement      4

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Description	Amount
UNREALIZED GAIN ON INVESTMENTS	6,855.
Total to Form 990, Part I, line 20	6,855.

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Form 990                      Other Expenses                      Statement      5

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Description	(A)	(B)	(C)	(D)
	Total	Program Services	Management and General	Fundraising
INSURANCE	11,755.	4,855.	6,900.	
DONATIONS	106,830.	106,830.		
MEMBERSHIP DUES	8,442.	8,442.		
SOCIAL EVENTS	6,182.	6,182.		
PUBLIC AFFAIRS	950.	950.		
MISCELLANEOUS	1,674.	110.	1,564.	
FUNDRAISING COSTS	30,515.			30,515.
PROFESSIONAL FEES	3,204.		3,204.	
ADVERTISING	22,617.	17,104.	5,513.	
AWARDS	501.	501.		
CREDIT CARD				
PROCESSING FEES	6,251.		6,251.	
VETERANS WALK	50,410.	50,410.		
PROPERTY TAXES	1,434.	1,434.		
Total to Fm 990, ln 43	250,765.	196,818.	23,432.	30,515.

Form 990 Specific Assistance to Individuals Statement 6

Description	Amount
SCHOLARSHIPS	6,130.
Total to Form 990, Part II, line 23	6,130.

Form 990 Non-Government Securities Statement 7

Security Description	Cost/FMV	Corporate Stocks	Corporate Bonds	Other Publicly Traded Securities	Total Non-Gov't Securities
CORPORATE STOCKS	FMV	137,871.			137,871.
To Form 990, line 54, Col B		137,871.			137,871.

Form 990 Other Revenue Included on Form 990 Statement 8

Description	Amount
AUTO BROKER EXPENSES	30,515.
Total to Form 990, Part IV-A	30,515.

Form 990 Other Expenses Included on Form 990 Statement 9

Description	Amount
AUTO BROKER EXPENSES	30,515.
Total to Form 990, Part IV-B	30,515.

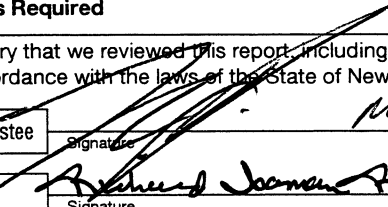
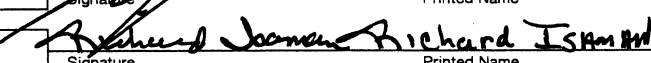
Form 990

Identification of Related Organizations  
Part VI, Line 80b

Statement 10

Name of Organization	Exempt	NonExempt
Vietnam Veterans of America Chapter 20 Thrift	X	
Store, LLC		
VVACD, LLC	X	

<b>1. General Information</b>			
a. For the fiscal year beginning <b>03/01/2004</b> and ending <b>02/28/2005</b>			
b. Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial filing <input type="checkbox"/> Final filing <input type="checkbox"/> Amended filing <input type="checkbox"/> NY registration pending	c. Name of organization <b>VIETNAM VETERANS OF AMERICA, INC. CHAPTER 20</b>		d. Fed. employer ID no. (EIN) <b>16-1185365</b>
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>1199 EAST MAIN STREET</b>		e. NY State registration no. <b>50953</b>
	City or town, state or country and ZIP + 4 <b>ROCHESTER, NY 14609</b>		f. Telephone number <b>585 482-8036</b>  g. Email

<b>2. Certification - Two Signatures Required</b>			
We certify under penalties of perjury that we reviewed this report, including all attachments, and to the best of our knowledge and belief, they are true, correct and complete in accordance with the laws of the State of New York applicable to this report.			
a. President or Authorized Officer/Trustee	 <small>Signature</small>	<b>NELSON PECK</b> <small>Printed Name</small>	<b>PRESIDENT 7-8-05</b> <small>Title Date</small>
b. Chief Financial Officer or Treasurer	 <small>Signature</small>	<b>Richard Isom</b> <small>Printed Name</small>	<b>Acting Treasurer 7-8-05</b> <small>Title Date</small>

<b>3. Annual Report Exemption Information</b>	
a. <b>Article 7-A</b> annual report exemption (Article 7-A registrants and dual registrants) Check <input type="checkbox"/> if total contributions from NY State (including residents, foundations, corporations, government agencies, etc.) did not exceed \$25,000 <b>and</b> the organization did not use the services of a professional fund raiser (PFR) or fund raising counsel (FRC) to solicit contributions during this fiscal year.	
<b>NOTE:</b> An organization may also check the box to claim this exemption if no PFR or FRC was used <b>and</b> either: 1) the organization received an allocation from a federated fund, Unity Way or incorporated community appeal <b>and</b> contributions from all other sources did not exceed \$25,000 <b>or</b> 2) it received all or substantially all of its contributions from a single government agency to which it submitted an annual financial report similar to that required by Article 7-A).	
b. <b>EPTL</b> annual report exemption (EPTL registrants and dual registrants) Check <input type="checkbox"/> if total gross receipts for this fiscal year did not exceed \$25,000 <b>and</b> the assets (market value) of the organization did not exceed \$25,000 at any time during this fiscal year.	
For EPTL or Article 7-A registrants claiming the annual report exemption under the one law under which they are registered and for dual registrants claiming the annual report exemptions under both laws, simply complete part 1 (General Information), part 2 (Certification) and part 3 (Annual Report Exemption Information) above. <b>Do not submit a fee, do not complete the following schedules and do not submit any attachments to this form.</b>	

<b>4. Article 7-A Schedules</b>	
If you did <b>not</b> check the Article 7-A annual report exemption above, complete the following for this fiscal year:	
a. Did the organization use a professional fund raiser, fund raising counsel or commercial co-venturer for fund raising activity in NY State?	<input type="checkbox"/> Yes* <input checked="" type="checkbox"/> No
* If "Yes", complete Schedule 4a.	
b. Did the organization receive government contributions (grants)?	<input type="checkbox"/> Yes* <input checked="" type="checkbox"/> No
* If "Yes", complete Schedule 4b.	

<b>5. Fee Submitted</b>		
Indicate the filing fee(s) you are submitting along with this form:		
a. Article 7-A filing fee .....	\$	<u>25.</u>
b. Estates, Powers and Trusts Law filing fee .....	\$	
c. Total fee .....	\$	<u>25.</u>
<b>Submit only one check or money order for the total fee, payable to "NYS Department of Law"</b>		

**6. Attachments:** For organizations that are not claiming annual report exemptions under both laws, see last page for required attachments.

- Mail completed form with required schedules, fee and attachments to the address at the top of this page -

6. ATTACHMENTS - DOCUMENT ATTACHMENT CHECK-LIST:

Check the boxes for the documents you are attaching.

**FOR ALL FILERS - COPIES OF INTERNAL REVENUE SERVICE FORMS**

- |   |  |  |
|---|--|--|
| <input checked="" type="checkbox"/> IRS Form 990    | <input type="checkbox"/> IRS Form 990-EZ               | <input type="checkbox"/> IRS Form 990-PF               |
| <input type="checkbox"/> Schedule A to IRS Form 990 | <input type="checkbox"/> Schedule A to IRS Form 990-EZ | <input type="checkbox"/> Schedule B to IRS Form 990-PF |
| <input type="checkbox"/> Schedule B to IRS Form 990 | <input type="checkbox"/> Schedule B to IRS Form 990-EZ | <input type="checkbox"/> IRS Form 990-T                |
| <input type="checkbox"/> IRS Form 990-T             |  |  |

**ADDITIONAL ARTICLE 7-A DOCUMENT ATTACHMENT REQUIREMENT**

Independent Accountant's Report

- Audit Report (total support & revenue more than \$250,000)  
 Review Report (total support & revenue \$100,001 to \$250,000)  
 No Accountant's Report Required (total support & revenue not more than \$100,000)