Office of the Secretary of State Corporations & Charities Division Initial Registration: \$60 n Re-Registration: \$60 + late Late Fee: \$50 per year \$_ Renewal: \$40	Tel: 360.725.0377 ew registration number is i	PO Box 40234 Olympia, WA 98504-0234 www.sos.wa.gov/corps	This Box For Office Use Only		
	250	73			
To Expedite Filing, Add S	30				
CHARITABLE ORGANIZATION					
INITIAL RE	GISTRATION / 1	RE-REGISTRAT	ION / AN	NUAL RENE	WAI
		RCW 19.09			
All fields required unless otherwise specified		R	Registration # 2	0039	
ORGANIZATION INFO (1) Organization Name: USS TURNER JOY RE					
(2) Also known as (AKA)	Names: TJRG-USS	TURNER JOY CRI	EWMEMBE	R'S ASSOCIA	TION
			NATIONAL PROPERTY OF THE PROPE		Additional residence in the last of the la

All fields required unless otherwise specified Registration # 200390					
(1) Organizat	TION INFORMATION tion Name: ER JOY REUNION C	ROUP			
(2) Also knov	(2) Also known as (AKA) Names: TJRG-USS TURNER JOY CREWMEMBER'S ASSOCIATION				
(3) Federal E	IN/Tax ID Number: (Ni	e digits) 83-2432462			
	ritable organization a W	A Corporation, LLC, or Nonpr	ofit? (Check one) Vyes No		
(5) Is the charitable organization a Foreign Corporation, LLC, or Nonprofit (Outside of WA State)? (Check one) □Yes ☑No If Yes, only the Jurisdiction State or Country is required below, UBI No. above is optional.					
Jurisdiction:		State or Country of formation/incorporate	ion)		
(6) FEDERAL TAX EXEMPT STATUS: If filing a renewal and the tax exempt status has not changed continue to page 2.					
Does the organization have a Federal Tax Exempt Status: (Check one) Yes No If Yes, one selection must be made below. Attach the organization's most recent IRS determination letter.					
(Check one)	□ 115(1) □ 170(c)(1	■ 501(c) (1-27 only) 7	☐ Group Exemption if group exempt see instructions for additional attachments that are required.		
If the organization is one of the following, then automatic exemption applies and an IRS Determination letter is not required. Select exemption reason below.					
□ Church/Ch	☐ Church/Church Affiliated ☐ Government Business ☐ Annual gross receipts normally \$5,000 or less				

7) PURPOSE/MISSION OF THE ORGANIZATION:					
the state who have served aboar	d the USS Turner Joy (DD-951), to meet and				
7) PURPOSE/MISSION OF THE ORGANIZATION. To assist former shipmates who have served aboard the USS Turner Joy (DD-951), to meet and communicate with each other; to encourage the exchange of information about historic events					
and share shipmate actions that made those histor	ical events part of American history. Enhancing				
and share shipmate actions that made those histori shipmate's understanding of those American histori	ical events which we wish to preserve, record				
shipmate's understanding of those American histori	or Joy (DD-951) for future generations.				
and correct to an accurate history of the USS Turne	31 JUY (DD-JOT) for receive govern				
AND THE OWNER AND TO BE A PERCON.					
(8) ORGANIZATION'S CONTACT INFORMATION:	Organization Phone Number:				
Organization Eman.					
jimc951@hotmail.com	(775)887-0147				
Organization Website: (optional)	t was a rich to com				
www.TJRG-OffDocsforPublnsp.com www.uss	sturnerjoy.com				
Is the mailing or street address located in WA? (Check or	ne) Yes No				
If Yes, please provide County:	Dub, if mailing address is NOT a PO Box or PMB				
Is the Street Address the same as the Mailing Address?	mily if mailing dadress is <u>ever</u> are				
(Check one) ✓Yes ☐No	physical address, provide the Zip, City, and State under				
If Mailing address is a PO Box or PMB and there is no	physical address, provide the zap, City, and State				
the Organization	n Street Address.				
the Organization	n Street Address.				
the Organization	Organization Street Address				
Organization Mailing Address	n Street Address.				
the Organization	Organization Street Address				
Organization Mailing Address Address: 1330 THOMPSON STREET	Organization Street Address (Must be a physical address; No PO Box or PMB) Address:				
Organization Mailing Address Address: 1330 THOMPSON STREET Zip: 89703-06C City: CARSON CITY	Organization Street Address (Must be a physical address; No PO Box or PMB) Address: Zip: City:				
Organization Mailing Address Address: 1330 THOMPSON STREET Zip: 89703-06(City: CARSON CITY State: NEVADA Country: USA	Organization Street Address (Must be a physical address; No PO Box or PMB) Address: Zip: City: State: Country:				
Organization Mailing Address Address: 1330 THOMPSON STREET Zip: 89703-06C City: CARSON CITY State: NEVADA Country: USA	Organization Street Address (Must be a physical address; No PO Box or PMB) Address: Zip: City: State: Country:				
Organization Mailing Address Address: 1330 THOMPSON STREET Zip: 89703-06(City: CARSON CITY State: NEVADA Country: USA (9) Does the organization use any other addresses for South State a list of other addresses used must be enclosed.	Organization Street Address (Must be a physical address; No PO Box or PMB) Address: Zip: City: State: Country: Dlicitation? (Check one)				
Organization Mailing Address Address: 1330 THOMPSON STREET Zip: 89703-06(City: CARSON CITY State: NEVADA Country: USA	Organization Street Address (Must be a physical address; No PO Box or PMB) Address: Zip: City: State: Country: Olicitation? (Check one)				
Organization Mailing Address Address: 1330 THOMPSON STREET Zip: 89703-06(City: CARSON CITY State: NEVADA Country: USA	Organization Street Address (Must be a physical address; No PO Box or PMB) Address: Zip: City: State: Country:				

(10) ORGANIZATION'S FINANCIAL INFORMATION	: Please see instructions to properly complete this section			
10.A Initial Registration Only: Has the Organization of An "accounting year" is twelve consecutive months in duration; it general twelfth month.	ompleted a full accounting year? (Check one) Yes No lly begins on the first day of the first month and ends on the last day of the			
If No, only provide the First Accounting Year End Date: ((mm/dd/yyyy)			
If Yes, complete the solicitation report below by providing the	he accounting year and financial information.			
10. B. Renewal / Re-Registration Only: Has the organiza	tion's accounting year changed? (Check one) Yes No			
If Yes, see instructions prior to completing the solicitation re	eport and submitting the renewal.			
If No, complete the solicitation report below				
SOLICITATION REPORT FOR PRECEDI	ING, COMPLETED ACCOUNTING YEAR			
<u>ALL</u> below financial fields must be completed, enter zero report for a specific line. <u>Do Not</u> enclose a copy of the IRS Actual gross figures are required, rounded to the nearest doll	o if the organization does not have financial information to S Form 990, 990PF, 990EZ or audited financial statements. lar; net figures or estimates will not be accepted.			
Organization's Accounting Year Begin Date	Organization's Accounting Year End Date			
01/01/2021	12/31/2021			
(mm/dd/yyyy)	(mm/dd/yyyy)			
1. Beginning Gross Ass	sets: \$ 20,809			
2. Revenue: Gross Contributions from Solicitation	ons: \$ 11,471			
3. Gross Revenue from all other sour	rces: \$ 9,239			
4. Total Dollar Value of Gross Receipts (sum of line 2 and 3): \$ 20,710				
Expenses - Gross Expenditures to Program Servi	ices: \$ _5,604			
6. Total Gross from All Expenditures (cannot be less than line 5): \$ 26,314				
7. Ending Gross Ass	sets: \$ 15,205			
(II) DODICE ITELLOTI COMMINEDITA DE OPINOMI	cation for members dues and donations done by USS Turner Joy			
Reunion Group 21 MC Newsletter (approximately 4 times a	year) and also by telephone from EXCOM members.			
(12) TYPES OF SOLICITATION:				
Did the Organization solicit or collect contributions in V	VA during the accounting year reported?			
(Check one) Yes No If Yes, indicate the types of so	licitations conducted, at least one is required.			
(Check all that apply) Advertisement/Coupon Books	Direct Mail			
☐ Internet ☐ Newspaper/Magazine/Publication ☐ Person	onal Contact Product Sale Telephone TV/Radio			
☐ Vehicle/Boat Donations Written in options are not rec	corded			
(13) Is the Organization registered to solicit/fundraise or	utside of WA? (Check one) Ves No			
If Yes, list all states: Alabama; Alaska; Arizona; California; Colo Illinois; Indiana; Iowa; Kansas; Kentucky; Louisiana; Maine; Maryl	orado; Connecticut; Delware; Florida; Georgia; Hawaii; Idaho; land; Massachusetts; Michigan; Minnesota; (see added page)			

(14) THREE CURRENT OFFICER(S)/EMPLOYE			PENSATION:		
Does the organization pay any of its officer(s) or emp	ployee(s)? (Check one) \[\subseteq Ye	s 🗹 No			
If Yes, this section must be completed.					
Name:	Name:				
Name:					
(15) CURRENT PERSON(S) OR OFFICERS ACC	EPTING RESPONSIBILIT	Y FOR THE O	RGANIZATION:		
Check if address and phone number for the individual(s) listed is the same as the information reported in the Organization's Mailing Address Information on page 2. If checked, only the individual's name and title must be reported					
Name: LCDR JIM CHESTER USN (RET)	Title: PRES/TREAS	Phone: (775)887	7-0147		
Address: 1330 THOMPSON STREET		State: NV	Zip: 89703-060		
	Title: ALT PRES				
Address: 765 PITTVIEW DRIVE	City: CENTRAL POINT	State: OR	Zip: 97502		
Additional attachment provided? (Check one)					
If Yes, attachment must be clearly labeled "15 - Curren		nsibility"			
(16) ORGANIZATION'S FINANCIAL PREPARE			been completed.		
Person or Business that prepares, reviews, or audits fin the Solicitation Report					
Check one and complete the corresponding section.					
☐ Business - Business's Name: USS TURNER JOY REUNION GROUP [501 C 7 NON PROFIT]					
Representative's Name: CAPT F MIKE STOCKREITER USNR (RET) Title: FIN REV/AUDITOR					
Address: 3031 APPLEGATE LANE		State: IL	Zip: 60025		
Address. Oct 7 ii 1 22 c. ii 2					
Individual - Name: LCDR JIM CHESTER US	N (RET)	Title: AUDI	FILE PREP		
Address: 1330 THOMPSON STREET			Zip: 89703-060		
	NT.				
(17) ORGANIZATION'S LEGAL INFORMATIO		ct to any legal a	ction in which a		
Has the charitable organization <u>or</u> any individual in judgment or final order was entered within the last	t 10 years, or action is curre	ntly pending?	ction in which a		
(Check one) ☐Yes ☑No					
If Yes, complete the below fields and attach the court documentation for each instance listed.					
Court (Jurisdiction):	Case Number:		AND THE PROPERTY OF THE PROPER		
Title of Legal Action: Date of Legal Action:					
"Legal Actions" include any administrative or judicial proceedit or state or Federal laws pertaining to taxation, revenue, charital a public agency or a private person or business.	ngs alleging that the business has f	ailed to comply with	these rules, RCW 19.09,		

Registration # 2003905		<u></u>			
(18) COMMERCIAL FUNDRAISERS: RCW	19.09.020 (5)				
Do not report the following: Fundraising Counsel/Consultant or Commercial Coventurer as defined under RCW 19.09.020 (4)(10)					
Does the Organization use one or more Comm (Check one) ☐Yes ☑No	ercial Fundraiser(s) to s	olicit contribution	ns in WA?		
If Yes, complete the fields below for each contract additional sheet labeled "18 - Commercial Fundraiser" inc			ser. If necessary, attach an		
Name of Company:					
Address:	City:	State:	Zip:		
Phone:					
(19) RETURN ADDRESS FOR THIS FILING: (optional) If provided, the confirmation regarding this specific filing will be sent to the address below, in addition to the Organization's mailing address. Attention: LCDR Jim Chester USN (RET) Email: jimc951@hotmail.com Address: 1330 THOMPSON STREET City: CARSON CITY State: NEVADA Zip: 89703-0605					
(20) POSTAL MAIL OPT-IN: By checking the bo	ox the organization will not re	ceive email notificati	ons		
The organization wants to receive all notifications	to the organization by posta	l mail			
(21) SIGNATURE By executing this document, the applicant certifies the following:					
 He/she is authorized to represent the above named organization. 					
 The organization's governing body or committee has reviewed and accepted the financial information provided where applicable. 					
• The information contained herein is accurate and true to the best of the applicant's knowledge.					
 He/she irrevocably appoints the Secretary of State to receive process (notice of lawsuit) in non-criminal cases against the applicant, and under the conditions set out in RCW 19.09.305; and 					
• Neither the organization nor any of its officers, directors, and principals have been convicted of a crime involving charitable solicitations, nor been subject to a permanent injunction or administrative order under the Washington Consumer Protection Act (Chapter 19.86 RCW) in the past 10 years.					
- Im Cheste	Jim Chester/PRES/T	REAS-TJRG	04/22/2022		
Signature of Applicant Printed Name / Title Date					
Contact phone number: (775)887-0147 Must be signed by the President. Treasu	urer, or comparable officer of t	he Organization RCU	(19.09.075(4)		

ALL SUBMISSIONS ARE SUBJECT TO PUBLIC REVIEW

- Post mark date is not the received date
- Do not submit the organization's 990
- Be sure to sign and date before placing the form in the mail

USS TURNER JOY REUNION GROUP

FEIN: 83-2432462

STATE OF WASHINGTON

CHARITABLE ORGANIZATION REGISTRATION

RCW 19.09

ADDITIONAL PAGE OF INFORMATION

- (4) UBI NUMBER NOT GIVEN! "SEE ATTACHED DOCUMENT"
- (6) INTERNAL REVENUE LETTER DATED: JUL 23 2019 GRANTING 501 (c) 7 STATUS AND EXEMPTION FROM FEDERAL INCOME TAXES "SEE ATTACHED DOCUMENT"
- (13) [CONTINUED LIST OF STATES] Mississippi; Montana; Nebraska; Nevada; New Hampshire; New Jersey; New Mexico; New York; North Carolina; North Dakota; Ohio; Oklahoma; Oregon; Pennsylvania; Rhode Island; South Carolina; South Dakota; Tennessee; Texas; Utah; Vermont; Virginia; Washington; West Virginia; Wisconsin; Wyoming.

Also U.S. Territory – U.S. Virgin Islands

(15) Additional Officers in USS Turner Joy Reunion Group

Chad James – Alternate Treas/Advisor

2429 NW 21st Street

Redmond, OR 97756

Corporations and Charities Filing System Incomplete Filings

Welcome! JIM O Logout

Navigation

My Dashboard

INCOMPLETE FILINGS



Application Number	# #	FEIN #	Business Name	Filir
932366		83- 2432462	USS TURNER	CHI
			JOY	REG
			REUNION	

Return to Dashboard

INTERNAL REVENUE SERVICE P. O. BOX 2508 CINCINNATI, OH 45201



DEPARTMENT OF THE TREASURY

Date: JUL 23 2019

USS TURNER JOY REUNION GROUP C/O JIM CHESTER 1330 THOMPSON ST CARSON CITY, NV 89703-0605

Employer Identification Number: 83-2432462 17053095319009 Contact Person: JASON T SAMMONS ID# 31616 Contact Telephone Number: (877) 829-5500 Accounting Period Ending: December 31 Form 990/990-EZ/990-N Required: Yes Effective Date of Exemption: March 18, 2019 Contribution Deductibility: No Addendum Applies: No

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(7). This letter could help resolve questions on your exempt status. Please keep it for your records.

As an organization described in IRC Section 501(c)(7), you're permitted to receive up to 35 percent of your gross receipts, including investment income, from sources outside of your membership without losing your tax-exempt status. Of the 35 percent, not more than 15 percent of your gross receipts can come from general public use of your club facilities or services. Income in excess of these limits may jeopardize your continued tax-exempt status.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-NC" in the search bar to view Publication 4221-NC, Compliance Guide for Tax-Exempt Organizations (Other than 501(c)(3) Public Charities and Private Foundations), which describes your recordkeeping, reporting, and disclosure requirements.

Letter 948



USS TURNER JOY REUNION GROUP

Sincerely,

Strain, s. nath.

Director, Exempt Organizations Rulings and Agreements

Internal Revenue Service TE/GE, Exempt Organizations 550 Main Street Cincinnati, OH 45202-5204

Official Business Penalty for Private Use, 5300

Letter 94