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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 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

**2005**

**Open to Public Inspection**

A For the 2005 calendar year, or tax year beginning , 2005, and ending May 31 , 2006

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return
- ☐ Amended return
- ☐ Application pending

Please use IRS label or print or type See Specific Instructions

C Name of organization: Fraternal Order of Eagles #588 Aerie

Number and street (or P.O box if mail is not delivered to street address) Room/suite: 6 Main Ave

City or town, state or country, and ZIP + 4: Norwalk, CT. 06850-3307

D Employer identification number: 06-0353450

E Telephone number: (203) 866-2627

F Accounting method: ☑ Cash ☐ Accrual ☐ 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? ☐ Yes ☑ No (If "No," attach a list See instructions.)

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

G Website: ►

J Organization type (check only one) ► ☑ 501(c) (fraternal) ◄ (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 chooses to file a return, be sure to file a complete return **Some states require a complete return.**

I Group Exemption Number ►

L Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12 ►

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

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

| | | | | | |
|---|---|---|---|---|---|
| Revenue | 1 | Contributions, gifts, grants, and similar amounts received: | | | |
| | a | Direct public support | 1a | 1,405 | |
| | b | Indirect public support | 1b | | |
| | c | Government contributions (grants) | 1c | | |
| | d | **Total** (add lines 1a through 1c) (cash $ 1,405 noncash $ 0 ) | | | 1d 1,405 |
| | 2 | Program service revenue including government fees and contracts (from Part VII, line 93) | | | 2 |
| | 3 | Membership dues and assessments | | | 3 1,850 |
| | 4 | Interest on savings and temporary cash investments | | | 4 38 |
| | 5 | Dividends and interest from securities | | | 5 4,424 |
| | 6a | Gross rents | 6a | 81,656 | |
| | b | Less: rental expenses | 6b | 38263 | |
| | c | Net rental income or (loss) (subtract line 6b from line 6a) | | | 6c 43,393 |
| | 7 | Other investment income (describe ► Realized or Unrealized Gains (losses)) | | | 7 4754 |
| | 8a | Gross amount from sales of assets other than inventory (A) Securities (B) Other | 8a | | |
| | b | Less: cost or other basis and sales expenses | 8b | | |
| | c | Gain or (loss) (attach schedule) | 8c | | |
| | d | Net gain or (loss) (combine line 8c, columns (A) and (B)) | | | 8d |
| | 9 | Special events and activities (attach schedule). If any amount is from gaming, check here ► ☑ | | | |
| | a | Gross revenue (not including $ _____ of contributions reported on line 1a) | 9a | 50811 | |
| | b | Less: direct expenses other than fundraising expenses | 9b | 35428 | |
| | c | Net income or (loss) from special events (subtract line 9b from line 9a) | | | 9c 15383 |
| | 10a | Gross sales of inventory, less returns and allowances | 10a | 190663 | |
| | b | Less: cost of goods sold | 10b | 72273 | |
| | c | Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a) | | | 10c 118390 |
| | 11 | Other revenue (from Part VII, line 103) | | | 11 |
| | 12 | **Total revenue** (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11) | | | 12 190,837 |
| Expenses | 13 | Program services (from line 44, column (B)) | | | 13 269 |
| | 14 | Management and general (from line 44, column (C)) | | | 14 187,639 |
| | 15 | Fundraising (from line 44, column (D)) | | | 15 |
| | 16 | Payments to affiliates (attach schedule) | | | 16 |
| | 17 | **Total expenses** (add lines 16 and 44, column (A)) | | | 17 188,908 |
| Net Assets | 18 | Excess or (deficit) for the year (subtract line 17 from line 12) | | | 18 2,429 |
| | 19 | Net assets or fund balances at beginning of year (from line 73, column (A)) | | | 19 561,641 |
| | 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, 19, and 20) | | | 21 564,070 |

**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 *(See the instructions)*

| *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 $ _____) If this amount includes foreign grants, check here ▶ ☐ | 22 | | | | |
| 23 Specific assistance to individuals (attach schedule) | 23 | | | | |
| 24 Benefits paid to or for members (attach schedule) Death & Sick Benefits | 24 | 769 | 769 | | |
| 25 Compensation of officers, directors, etc. | 25 | 10,400 | | 10,400 | |
| 26 Other salaries and wages | 26 | 57,500 | | 57,500 | |
| 27 Pension plan contributions | 27 | | | | |
| 28 Other employee benefits Trustee Expenses | 28 | 2,835 | | 2,835 | |
| 29 Payroll taxes | 29 | 8402 | | 8402 | |
| 30 Professional fundraising fees | 30 | | | | |
| 31 Accounting fees Bank Fees | 31 | 718 | | 718 | |
| 32 Legal fees | 32 | 225 | | 225 | |
| 33 Supplies | 33 | | | | |
| 34 Telephone / Utilities | 34 | 34,490 | | 34,490 | |
| 35 Postage and shipping | 35 | 947 | | 947 | |
| 36 Occupancy | 36 | | | | |
| 37 Equipment rental and maintenance | 37 | 28,032 | | 28,032 | |
| 38 Printing and publications | 38 | | | | |
| 39 Travel | 39 | | | | |
| 40 Conferences, conventions, and meetings | 40 | 1,738 | | 1,738 | |
| 41 Interest | 41 | 77 | | 77 | |
| 42 Depreciation, depletion, etc (attach schedule) | 42 | | | | |
| 43 Other expenses not covered above (itemize): | | | | | |
| a Supplies | 43a | 4056 | | 4056 | |
| b Sales Tax | 43b | 10,666 | | 10,666 | |
| c Entertainment | 43c | 7,800 | | 7,800 | |
| d Assoc. Dues & Capital | 43d | 921 | | 921 | |
| e Bad Checks | 43e | 381 | | 381 | |
| f Donations Sec Attack | 43f | 5,211 | | 5,211 | |
| g missing | 43g | 13,000 | | 13,000 | |
| 44 **Total functional expenses.** Add lines 22 through 43. (Organizations completing columns (B)-(D), carry these totals to lines 13–15) | 44 | 188,408 | 769 | 187,639 | |

**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 *(See the instructions.)*

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.

| What is the organization's primary exempt purpose? ▶ | **Program Service Expenses** (Required for 501(c)(3) and (4) orgs and 4947(a)(1) trusts, but optional for others.) |
|---|---|
| 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** | |
| (Grants and allocations $ ) If this amount includes foreign grants, check here ▶ ☐ | |
| **b** | |
| (Grants and allocations $ ) If this amount includes foreign grants, check here ▶ ☐ | |
| **c** | |
| (Grants and allocations $ ) If this amount includes foreign grants, check here ▶ ☐ | |
| **d** | |
| (Grants and allocations $ ) If this amount includes foreign grants, check here ▶ ☐ | |
| **e** Other program services (attach schedule) | |
| (Grants and allocations $ ) If this amount includes foreign grants, check here ▶ ☐ | |
| **f Total of Program Service Expenses** (should equal line 44, column (B), Program services). ▶ | |

**Part IV Balance Sheets** *(See the instructions.)*

| 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 |
|---|---|---|---|---|---|
| Assets | 45 Cash—non-interest-bearing | | 4,664 | 45 | 1,752 |
| | 46 Savings and temporary cash investments | | 9,776 | 46 | 4,243 |
| | 47a Accounts receivable | 47a | | | |
| | b Less: allowance for doubtful accounts | 47b | | 47c | |
| | 48a Pledges receivable | 48a | | | |
| | b Less: allowance for doubtful accounts | 48b | | 48c | |
| | 49 Grants receivable | | | 49 | |
| | 50 Receivables from officers, directors, trustees, and key employees (attach schedule) | | | 50 | |
| | 51a Other notes and loans receivable (attach schedule) | 51a | | | |
| | b Less. allowance for doubtful accounts | 51b | | 51c | |
| | 52 Inventories for sale or use | | 8,611 | 52 | 8,184 |
| | 53 Prepaid expenses and deferred charges | | | 53 | |
| | 54 Investments—securities (attach schedule) ▶ ☐ Cost ☐ FMV | | 166,912 | 54 | 165,684 |
| | 55a Investments—land, buildings, and equipment: basis | 55a 371,678 | | | |
| | b Less: accumulated depreciation (attach schedule) | 55b | 371,678 | 55c | 380,247 |
| | 56 Investments—other (attach schedule) | | | 56 | |
| | 57a Land, buildings, and equipment: basis | 57a | | | |
| | b Less: accumulated depreciation (attach schedule) | 57b | | 57c | |
| | 58 Other assets (describe ▶ .....) | | | 58 | |
| | 59 **Total assets** (must equal line 74). Add lines 45 through 58 | | 561,641 | 59 | 564,070 |
| Liabilities | 60 Accounts payable and accrued expenses | | | 60 | |
| | 61 Grants payable | | | 61 | |
| | 62 Deferred revenue | | | 62 | |
| | 63 Loans from officers, directors, trustees, and key employees (attach schedule) | | | 63 | |
| | 64a Tax-exempt bond liabilities (attach schedule) | | | 64a | |
| | b Mortgages and other notes payable (attach schedule) | | | 64b | |
| | 65 Other liabilities (describe ▶ .....) | | | 65 | |
| | 66 **Total liabilities.** Add lines 60 through 65 | | | 66 | |
| Net Assets or Fund Balances | **Organizations that follow SFAS 117, check here** ▶ ☐ and complete lines 67 through 69 and lines 73 and 74. | | | | |
| | 67 Unrestricted | | | 67 | |
| | 68 Temporarily restricted | | | 68 | |
| | 69 Permanently restricted | | | 69 | |
| | **Organizations that do not follow SFAS 117, check here** ▶ ☐ and complete lines 70 through 74. | | | | |
| | 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 | | 561,641 | 72 | 564,070 |
| | 73 **Total net assets or fund balances** (add lines 67 through 69 **or** lines 70 through 72; column (A) **must** equal line 19; column (B) **must** equal line 21) | | | 73 | |
| | 74 **Total liabilities and net assets/fund balances.** Add lines 66 and 73 | | 561,641 | 74 | 564,070 |

**Part IV-A** **Reconciliation of Revenue per Audited Financial Statements With Revenue per Return** *(See the instructions.)*

| | | | | |
|---|---|---|---|---|
| a | Total revenue, gains, and other support per audited financial statements | | | a |
| b | Amounts included on line a but not on Part I, line 12: | | | |
| 1 | Net unrealized gains on investments | b1 | | |
| 2 | Donated services and use of facilities | b2 | | |
| 3 | Recoveries of prior year grants | b3 | | |
| 4 | Other (specify): | b4 | | |
| | Add lines b1 through b4 | | | b |
| c | Subtract line b from line a | | | c |
| d | Amounts included on Part I, line 12, but not on line a: | | | |
| 1 | Investment expenses not included on Part I, line 6b | d1 | | |
| 2 | Other (specify): | d2 | | |
| | Add lines d1 and d2 | | | d |
| e | **Total revenue** (Part I, line 12). Add lines c and d ▶ | | | e |

**Part IV-B** **Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

| | | | | |
|---|---|---|---|---|
| a | Total expenses and losses per audited financial statements | | | a |
| b | Amounts included on line a but not on Part I, line 17. | | | |
| 1 | Donated services and use of facilities | b1 | | |
| 2 | Prior year adjustments reported on Part I, line 20 | b2 | | |
| 3 | Losses reported on Part J, line 20 | b3 | | |
| 4 | Other (specify): | b4 | | |
| | Add lines b1 through b4 | | | b |
| c | Subtract line b from line a | | | c |
| d | Amounts included on Part I, line 17, but not on line a: | | | |
| 1 | Investment expenses not included on Part I, line 6b | d1 | | |
| 2 | Other (specify): | d2 | | |
| | Add lines d1 and d2 | | | d |
| e | **Total expenses** (Part I, line 17). Add lines c and d ▶ | | | e |

**Part V-A** **Current Officers, Directors, Trustees, and Key Employees** (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) *(See the instructions.)*

| (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 plans | (E) Expense account and other allowances |
|---|---|---|---|---|
| | | | | |
| | | | | |
| Herbert Sanford | Secretary | 10,400 | 0 | 0 |
| | | | | |
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**Part V-A** **Current Officers, Directors, Trustees, and Key Employees** *(continued)*

| | | Yes | No |
|---|---|---|---|
| 75a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings ▶ | | | |
| b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s) | 75b | | |
| c Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to this organization through common supervision or common control? **Note** Related organizations include section 509(a)(3) supporting organizations. If "Yes," attach a statement that identifies the individuals, explains the relationship between this organization and the other organization(s), and describes the compensation arrangements, including amounts paid to each individual by each related organization. | 75c | | |
| d Does the organization have a written conflict of interest policy? | 75d | | |

**Part V-B** **Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits** (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

| (A) Name and address | (B) Loans and Advances | (C) Compensation | (D) Contributions to employee benefit plans & deferred compensation plans | (E) Expense account and other allowances |
|---|---|---|---|---|
| | | | | |
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**Part VI** **Other Information** *(See the instructions.)*

| | | Yes | No |
|---|---|---|---|
| 76 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity | 76 | | ✓ |
| 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 | | ✓ |
| 78a Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return? | 78a | | ✓ |
| b If "Yes," has it filed a tax return on **Form 990-T** for this year? | 78b | | |
| 79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement | 79 | | ✓ |
| 80a 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 | ✓ | |
| b If "Yes," enter the name of the organization ▶ Fraternal Order of Eagles and check whether it is ☑ exempt **or** ☐ nonexempt | | | |
| 81a Enter direct and indirect political expenditures. (See line 81 instructions.) 81a | | | |
| b Did the organization file **Form 1120-POL** for this year? | 81b | | ✓ |

**Part VI Other Information** *(continued)*

| | | | Yes | No |
|---|---|---|---|---|
| 82a | 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 | | ✓ |
| 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) 82b - | | | |
| 83a | Did the organization comply with the public inspection requirements for returns and exemption applications? | 83a | | |
| b | Did the organization comply with the disclosure requirements relating to quid pro quo contributions? | 83b | | ✓ |
| 84a | Did the organization solicit any contributions or gifts that were not tax deductible? | 84a | | ✓ |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | 84b | | - |
| 85 | *501(c)(4), (5), or (6) organizations.* **a** Were substantially all dues nondeductible by members? | 85a | ✓ | |
| b | Did the organization make only in-house lobbying expenditures of $2,000 or less? | 85b | ✓ | |
| | If "Yes" was answered to either 85a or 85b, **do not** complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year. | | | |
| c | Dues, assessments, and similar amounts from members 85c 1850 | | | |
| d | Section 162(e) lobbying and political expenditures 85d 0 | | | |
| e | Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e 0 | | | |
| f | Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f 0 | | | |
| g | Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? | 85g | | n/a |
| 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? | 85h | | |
| 86 | *501(c)(7) orgs.* Enter: **a** Initiation fees and capital contributions included on line 12 86a | | | |
| b | Gross receipts, included on line 12, for public use of club facilities 86b | | | |
| 87 | *501(c)(12) orgs.* Enter. **a** Gross income from members or shareholders 87a | | | |
| b | Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 87b | | | |
| 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 | | ✓ |
| 89a | *501(c)(3) organizations.* Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ ..... , section 4912 ▶ ..... ; section 4955 ▶ ..... | | | |
| b | *501(c)(3) and 501(c)(4) orgs.* 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 | 89b | | ✓ |
| c | Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ | | | |
| d | Enter: Amount of tax on line 89c, above, reimbursed by the organization ▶ | | | |
| 90a | List the states with which a copy of this return is filed ▶ Connecticut | | | |
| b | Number of employees employed in the pay period that includes March 12, 2005 (See instructions.) 90b | | | |
| 91a | The books are in care of ▶ Herbert Jesford Telephone no. ▶ ( ) | | | |
| | Located at ▶ 6 Mott Ave, Norwalk CT ZIP + 4 ▶ 06850 | | | |
| 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)? | 91b | | ✓ |
| | 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. | | | |
| c | At any time during the calendar year, did the organization maintain an office outside of the United States? | 91c | - | ✓ |
| | If "Yes," enter the name of the foreign country ▶ | | | |
| 92 | *Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of* ***Form 1041***—Check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 92 | | | |

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

**Note:** *Enter gross amounts unless otherwise indicated.*

| | | Unrelated business income | | Excluded by section 512, 513, or 514 | | (E) Related or exempt function income |
|---|---|---|---|---|---|---|
| | | (A) Business code | (B) Amount | (C) Exclusion code | (D) Amount | |
| 93 | Program service revenue: | | | | | |
| a | | | | | | |
| b | | | | | | |
| c | | | | | | |
| d | | | | | | |
| e | | | | | | |
| f | Medicare/Medicaid payments | | | | | |
| g | Fees and contracts from government agencies | | | | | |
| 94 | Membership dues and assessments | | 1,850 | | | |
| 95 | Interest on savings and temporary cash investments | | 38 | | | |
| 96 | Dividends and interest from securities | | 4424 | | | |
| 97 | Net rental income or (loss) from real estate | | | | | |
| a | debt-financed property | | | | | |
| b | not debt-financed property | | 43393 | | | |
| 98 | Net rental income or (loss) from personal property | | | | | |
| 99 | Other investment income | | 4754 | | | |
| 100 | Gain or (loss) from sales of assets other than inventory | | | | | |
| 101 | Net income or (loss) from special events | | 15,383 | | | |
| 102 | Gross profit or (loss) from sales of inventory | | 117590 | | | |
| 103 | Other revenue: a Contributions | | 1,805 | | | |
| b | | | | | | |
| c | | | | | | |
| d | | | | | | |
| e | | | | | | |
| 104 | Subtotal (add columns (B), (D), and (E)) | | 190,837 | | | |
| 105 | **Total** (add line 104, columns (B), (D), and (E)) ▶ | | | | | 190,837 |

**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 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). |
|---|---|
| | |
| | |
| | |

## Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities *(See 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 |
|---|---|---|---|---|
| | % | | | |
| | % | | | |
| | % | | | |
| | % | | | |

## Part X Information Regarding Transfers Associated with Personal Benefit Contracts *(See 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 Herbert Sanford Date 3/15/2010

Type or print name and title HERBERT SANFORD Secretary

**Paid Preparer's Use Only**

| Preparer's signature | Date | Check if self-employed ▶ ☐ | Preparer's SSN or PTIN (See Gen. Inst. W) |
|---|---|---|---|
| Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ | | EIN ▶ | |
| | | Phone no. ▶ ( ) | |

Fraternal Order of Eagles Grand Aerie #588
Form 990 supplement Year 2005
Explanation of Changes and Valuation of net Investments as of 5/31/2005 to 5/31/2006

| Type/Description | security # | 5/31/2005 factor/shares | Face Amount | 5/31/2005 Principal | 5/31/2005 Market Value | Redemption Purchase | factor/shares | 5/31/2006 Principal | 5/31/2006 Market Value | Gain or Loss Sale |
|---|---|---|---|---|---|---|---|---|---|---|
| Columbia Floating Rate Fund XLFCX Building & Maint. Fund | SHARES | 1004.016 | 9.964483 | 9,839.35 | 9,809.23 | 0.00 | 1004 016 | 9,809.23 | 9,989.95 | 180.72 |
| Income Fund of America Inc. Class B SHS B&Mfund | SHARES | 2496.092 | 0 | 42,109.07 | 45,154 30 | -2,980.00 | 2334 892 | 42,174.30 | 43,849.19 | 1,674.89 |
| Optimum Fixed Income FD CL C OCFIX B&Mfund | | 0 | 0 | 0.00 | 0.00 | 58,175.98 | 6595.505 | 58,175.98 | 57,512.80 | -663.18 |
| Optimum International Equity FD Class C OCIEX B&Mfund | | 0 | 0 | 0.00 | 0.00 | 3,005.00 | 230.769 | 3,005.00 | 3,108.45 | 103 45 |
| Optimum Large Capital Value Fd Class C OCLVX B&Mfund | | 0 | 0 | 0 00 | 0.00 | 6,005.00 | 541 028 | 6,005.00 | 6,102.79 | 97.79 |
| Optimum Large General Capital Growth Fd.Class C OCLGX B&Mfund | | 0 | 0 | 0.00 | 0.00 | 6,005.00 | 529.101 | 6,005.00 | 5,777.78 | -227.22 |
| Optimum Sm Cap Value Fd.CL C OCSVX B&Mfund | | 0 | 0 | 0.00 | 0.00 | 3,005.00 | 232.019 | 3,005.00 | 2,935.04 | -69.96 |
| FHL Multi Class Mtg Building & Maint Fund | 312903PL5 | 0.10238089 | 40000 | 4,095.24 | 4,085.99 | -1,033.99 | 0.0765314 | 3,052.00 | 3,028.88 | -23.12 |
| Gov't Mortgage Ass Building & Maint Fund | 362169UB8 | 0.06436086 | 30000 | 1,930.83 | 2,048.27 | -542.91 | 0.04626416 | 1,505.36 | 1,435.91 | -69.45 |
| Franklin Templeton FTCCX Building & Maint Fund | SHARES | 5721.298 | 0 | 66,340.95 | 69,799.83 | -73,642.61 | 0 | -3,842.78 | 0.00 | 3,842.78 |
| Franklin Templeton FTCCX Benefit Fund | SHARES | 2370.101 | 0 | 27,614.12 | 28,915.23 | -30,156.46 | 79.491 | 978.60 | 1,070.74 | 92.14 |
| Income Fund of America Inc. Class B SHS Benefit Fund | SHARES | 347.014 | 0 | 5,854.12 | 6,277.48 | 125.62 | 347.014 | 6,403.10 | 6,516.92 | 113.82 |
| Optimum Fixed Income FD CL C OCFIX Benefit Fund | | 0 | 0 | 0.00 | 0.00 | 22,069.85 | 2501.743 | 22,069.85 | 21,815.19 | -254.66 |
| Optimum International Equity FD Class C OCIEX Benefit Fund | | 0 | 0 | 0.00 | 0.00 | 1,005.00 | 79 491 | 1,005.00 | 1,070.74 | 65.74 |
| Optimum Large Capital Value Fd Class C OCLVX Benefit Fund | | 0 | 0 | 0.00 | 0.00 | 1,005.00 | 180.343 | 2,005.00 | 2,034.26 | 29.26 |
| Optimum Large General Capital Growth Fd.Class C OCLGX Benefit Fund | | 0 | 0 | 0.00 | 0.00 | 205.00 | 176.367 | 2,005.00 | 1,925.92 | -79.08 |
| Optimum Sm Cap Value Fd.CL C OCSVX Benefit Fund | | 0 | 0 | 0.00 | 0 00 | 2,005.00 | 77.459 | 1,005.00 | 979.85 | -25.15 |
| Gov't Nat'l Mortgage #189340 Benefit Fund | 36217CHRO | 0.02070897 | 25000 | 582.33 | 565.76 | -24.33 | 0.01973587 | 541.43 | 529.26 | -12.17 |
| Gov't Nat'l Mortgage Benefit Fund | 36220U2D2 | 0.00930876 | 25000 | 281.78 | 255.70 | -232.72 | 0 | 22.98 | 0.00 | -22.98 |
| | | | | | | | | | | 4,753.62 |
| TOTAL INVESTMENTS | | | | 158,647.79 | 166,911.79 | -6,001.57 | | 164,930.05 | 169,683.67 | 4,753.62 |
| Checking/Money Market Funds | | | | | | | | | | |
| CASH | | | | 1,750.00 | 1,750 00 | 0.00 | 0.00 | 1,750.00 | 1,750.00 | 0.00 |
| General Fund Wachovia | 2008206217574 | | | -14,566.66 | -14,566.66 | 0.00 | 0.00 | -5,902.13 | -5,902.13 | 0.00 |
| Convention Fund Wachovia | 2008206620529 | | | 1,299.09 | 1,299.09 | 0.00 | 0.00 | 738.41 | 738.41 | 0.00 |
| Conn.Ticket Fund Wachovia | 2008203090595 | | | 7,089.62 | 7,089 62 | 0.00 | 0.00 | 1,542.78 | 1,542.78 | 0.00 |
| Benefit Fund Wachovia | 2008206217655 | | | 1,850.07 | 1,850.07 | 0.00 | 0.00 | 1,686.07 | 1,686.07 | 0.00 |
| Building&Maint.Fund Wachovia | 721014809 | | | 7,241.64 | 7,241.64 | 0.00 | 0.00 | 1,937.09 | 1,937.09 | 0.00 |
| LPC Linco MMF Benefit Fund | | | | 3,154.36 | 3,154.36 | 0.00 | 0.00 | 3,914 70 | 3,914.70 | 0.00 |
| LPC Linco MMF Building & Maintenance Fund | | | | 6,621.67 | 6,621.67 | 0.00 | 0 00 | 328.23 | 328 23 | 0.00 |
| TOTAL INVEST. & CASH | | | | 173,087.58 | 181,351.58 | | | 170,925.20 | 175,678 82 | 4,753.62 |
| UNREALIZED GAIN (LOSS) | | | | | 8,264.00 | | | | 4,753.62 | |

Fraternal Order of Eagles Grand Aerie #588
Form 990 supplement Year 2005
Worksheet Analysis 6/1/2005-5/31/2006

| Donations | |
|---|---|
| Americare | $100.00 |
| Art Ehermann Cancer Fund | 125.00 |
| Ben Whono Little League | 350.00 |
| Cathordale of the Pines | 100.00 |
| Ct.State Aerie #3177 Bowling | 111.00 |
| D.D. Dunlap Kidney Fund | 125.00 |
| F.O E. St. Aerie Dicabetes Fund | 100.00 |
| F.O E. St. Aerie Scholship Fund | 250.00 |
| Add Convention Eagles | 150.00 |
| Golden Eagles Alzheimer Fund | 125.00 |
| Jimmy Durante Childrens Fund | 225.00 |
| Judge Bob Hanson Diabetes Fund | 125.00 |
| Kidney Founation of Ct. Inc. | 200.00 |
| Max Bear Heart Fund | 125.00 |
| Racoon Club for Kids | 150 00 |
| Robin King Pink Pins For | 300.00 |
| STAR donation | 2,550.00 |
| Total | $5,211.00 |

| | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|
| **Fraternal Order of Eagles Grand Aerie #588** | | | | | | 1899.09 | 8665.62 | | | |
| **Form 990 supplement Year 2005** | | | 266109 65 | | 64580.23 | -600 | -1576 | | | |
| **Worksheet Analysis 6/1/2005-5/31/2006** | | | 266,109 65 | | | 1299.09 | 7089.62 | | | |
| **Type/Description** | | Total | 0 00 General Fund | Linco Bld & Maint | R S Tax Bld & Maint | Convention Fund | Ticket Fund | Benefit Fd | Linco Benefit Fund | Cash Funds |
| **Beginning Balance** | | 181,351 58 | -14,566 66 | 137,519.29 | 7,241.64 | 1,299.09 | 7,089.62 | 1,850.07 | 39,168.53 | 1,750.00 |
| Income | | | | | | | | | | |
| **Beer & Liquor** | | 190,136 45 | 190,136 45 | | | 0.00 | | | | |
| **food** | | 6,076 70 | 6,076.70 | | | | | | | |
| **Cigars & Cards** | | 962 51 | 962 51 | | | | | | | |
| **phone Reimbursement** | | 35 00 | 35 00 | | | | | | | |
| **State Sealed Ticket Sales** | | 30,552 00 | 0 00 | | | | 30,552.00 | | | |
| **Vendor Machine Income** | | 1,651 90 | 0 00 | | | 1,651.90 | | | | |
| **Dues** | | 1,850 00 | 1,000 00 | | | | | 850.00 | | |
| **Rents Parking** | | 61,115 00 | 0 00 | | 61,115.00 | | | | | |
| **Rents Hall** | | 20,541 16 | 17,113 73 | | 3,427.43 | | | | | |
| Interest | | 4,762 08 | 0 00 | 3,799.44 | 37.80 | | | | 924.84 | |
| Event Ticket Sales | | 920 41 | 920 41 | | | | | | | |
| Fund Raiser Golf | | 16,241 11 | 0 00 | | | 9,816.26 | 6,424.85 | | | |
| Event S T A R. Dinner | | 3,097.51 | 0 00 | | | 3,097.51 | | | | |
| Christmas Party Children | | 964 58 | 0 00 | | | 269.58 | | 695.00 | | |
| Donations | | 440 00 | 440 00 | | 0.00 | | | | | |
| Fund Raisers | | 0 00 | 0 00 | | | | | | | |
| **Funds Transfer # 1467 6/1/2005** | * | 0.00 | 3,000.00 | | | | -3,000.00 | | | |
| **Funds Transfer #1468 6/9/2005** | * | 0 00 | 2,000.00 | | | | -2,000 00 | | | |
| **Funds Transfer #1469 6/14/2005** | * | 0.00 | 1,000.00 | | | | -1,000.00 | | | |
| Funds Transfer #1473 9/15/2005 | missing | 0 00 | 0 00 | | | 2,000.00 | -2,000.00 | | | |
| **Funds Transfer #1475 11/01/2005** | | 0 00 | 2,500 00 | | | | -2,500.00 | | | |
| **Funds Transfer #1477 11/28/2005** | | 0 00 | 2,500 00 | | | | -2,500.00 | | | |
| **Funds Transfer #1478 1/3/2006** | | 0 00 | 1,500 00 | | | | -1,500.00 | | | |
| **Funds Transfer #716 6/13/2005** | * | 0 00 | 5,000 00 | | -5,000.00 | | | | | |
| **Funds Transfer #717 7/15/05** | * | 0 00 | 5,000 00 | | -5,000.00 | | | | | |
| **Funds Transfer #724 11/15/05** | | 0 00 | 3,500 00 | | -3,500.00 | | | | | |
| **Funds Transfer #730 1/3/06** | | 0 00 | 2,000 00 | | -2,000.00 | | | | | |
| **Funds Transfer #732 2/28/06** | | 0 00 | 2,000 00 | | -2,000.00 | | | | | |
| **Funds Transfer #734 4/14/06** | | 0 00 | 3,000 00 | | -3,000.00 | | | | | |
| **Funds Transfer #738 5/11/06** | | 0 00 | 3,500 00 | | -3,500.00 | | | | | |
| **New ChairsCiti Bank #723 10/18/05** | | 0 00 | 0 00 | | 0.00 | | | | | |
| **New Chairs AT&TFunds 3/6/2006 ck#733 chairs** | | 0 00 | 0 00 | | 0.00 | | | | | |
| | | 0 00 | 0 00 | | | | | | | |
| **Funds Transfer #7574 6/3/2005** | * | 0 00 | 6,424.85 | | | | -6,424.85 | | | |
| **Funds Transfer # In020616514500 02/06/2006** | | 0 00 | 1,500 00 | | | | -1,500.00 | | | |
| **Funds Transfer # In2008206217574 2/16/2006** | | 0 00 | 2,000 00 | | | | -2,000.00 | | | |
| **Funds Transfer # vy031713295220 3/17/2006** | | 0 00 | 2,000 00 | | | | -2,000.00 | | | |
| **Funds Transfer # vy040313283340 4/3/2006** | | 0 00 | 1,000 00 | | | | -1,000.00 | | | |
| Funds Transfer 7/19/05#RC00879424 | missing | -4,000 00 | 0 00 | -4,000.00 | | | | | | |
| Funds Transfer 1/5/06 #RC00988608 | missing | -5,000 00 | 0 00 | -5,000.00 | | | | | | |
| Funds Transfer 5/26/06 #RC01089696 | missing | -4,000 00 | 0 00 | -4,000.00 | | | | | | |
| distributions | | 2,654 33 | | 2,654.33 | | | | | | |
| **change in value /gains/losses** | | 4,753.62 | | 3,095.96 | | | | | 1,657.66 | |
| **Funds TransferBenifit 9/20/2005 #2008206220529** | | 0 00 | 0 00 | 0.00 | | 500.00 | | -500.00 | | |
| **Total Deposits** | | 333,754 36 | 266,109 65 | -3,450.27 | 40,580.23 | 17,335.25 | 9,552.00 | 1,045.00 | 2,582 50 | 0.00 |

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| Expense | | | | | | | | |
| Citi Bank #1755 12/21/05 listed events | | 0 00 | | | | 0.00 | | |
| Cost of goods sold | | -78,806 02 | -78,806 02 | | | | | |
| Caps and Shirts | * | -1,846 23 | | | -1,846.23 | | | |
| New ChairsCiti Bank #719 9/20/05 | * | -1,500 00 | | | -1,500.00 | | | |
| New ChairsCiti Bank #723 10/18/05 | * | -1,500 00 | | | -1,500.00 | | | |
| New Chairs AT&T 3/6/2006 ck#733 chairs | * | -1,000 00 | | | -1,000.00 | | | |
| New ChairsCiti Bank #736 4/24/06 | * | -4,318 70 | | | -4,318.70 | | | |
| New ChairsCiti Bank #1755 12/13/05 | | -250 00 | | | 0.00 | -250.00 | | |
| | | 0 00 | | | 0.00 | | | |
| Maintenance Services | | -28,232 09 | -26,608 10 | | -1,623.99 | | | |
| Snow Plowing | | -2,250 00 | -2,250 00 | | | | | |
| Supplies Other | | -3,699 83 | -3,699 83 | | | | | |
| Playing Cards | | -269 73 | -269 73 | | | | | |
| Death and Sick Benefits | | -769 50 | -509 50 | | | -60 00 | | -200.00 |
| Ct.State Aerie FOE | | -222 00 | | | | | | -222.00 |
| Grande Aerie per capital ck#1380 | | -699 00 | | | | | | -699.00 |
| State Aerie Convention Fee Gregg Nichols | | -225 00 | | | | -225.00 | | |
| Dart Boards | | -85 86 | | | | -85.86 | | |
| Insurance | * | -21,867 00 | -9,089 44 | | -12,777.56 | | | |
| Real Estate Taxes | | -14,145 78 | | | -14,145.78 | | | |
| Sealed Tickets Excise Tax | | -15,018 00 | | | | | -15,018.00 | |
| Licenses & Permits | | -400 00 | | | | -325.00 | -75.00 | |
| Legal Fees | | -225 00 | -225 00 | | | | | |
| Return Checks | | -381 00 | -381 00 | | | | | |
| Bank Charges | | -688 50 | -499 57 | 0.00 | -95.09 | | -5.84 | -88.00 |
| Interest Charges Universal Card | * | -77 02 | -77 02 | | | | | |
| Annual Fee Credit Card | | -30 00 | -30 00 | | | | | |
| | | 0 00 | 0 00 | | | | | |
| Gross Payroll | | -67,900 00 | -67,900 00 | | | | | |
| Federal Withholding | | 7,171 00 | 7,171 00 | | | | | |
| Medicare Tax | | 984 56 | 984 56 | | | | | |
| FICA Tax | | 4,209 80 | 4,209 80 | | | | | |
| Conn.Withholding Tax | | 2,139 90 | 2,139 90 | | | | | |
| FUTA | | -2,178 43 | -2,178 43 | | | | | |
| Medicare Tax | | -984 56 | -984 56 | | | | | |
| FICA Tax | | -4,209 80 | -4,209 80 | | | | | |
| ct.unemployment tax | | -1,029 23 | -1,029 23 | | | | | |
| Connecticut Sales Tax | | -10,666.44 | -10,666 44 | | | | | |
| Utilities Electric | * | -17,826 25 | -12,773 82 | | -5,052.43 | | | |
| Utilities Refuse | * | -4,236 85 | -4,236 85 | | | | | |
| Utilities Heating Oil | * | -5,510 00 | -5,510 00 | | | | | |
| Utilities Gas | * | -2,058.69 | -2,058 69 | | | | | |
| Utilities Telephone | * | -2,939.10 | -2,939 10 | | | | | |
| Utilities Cable T.V. | * | -844 59 | -844 59 | | | | | |
| Utilities Water | * | -1,074 14 | -1,074 14 | | | | | |
| Postage | * | -946 70 | -946 70 | | | | | |
| Travel Convention | * | -1,288 21 | -1,288 21 | | | | | |
| Entertainment | * | -7,800 00 | -7,800 00 | | | | | |
| Club Event Programs/Benefits dart Leage | | -4,245 30 | -2,435 83 | | | -1,809.47 | | |
| Equipment Rental | * | -3,587 00 | -3,587 00 | | | | | |
| Equipment | | -967 01 | -967 01 | | | | | |
| Americare | * | -100.00 | | | | -100.00 | | |

| | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|
| Art Ehrmann Cancer Fund | * | -125.00 | | | | -125.00 | | | | |
| Bon Wilono Little League | * | -350.00 | | | | -350.00 | | | | |
| Cathordale of the Pines | * | -100.00 | | | | -100.00 | | | | |
| CtState Aerie #3177 Bowling | * | -111.00 | | | | -111.00 | | | | |
| D.D. Dunlap Kidney Fund | * | -125.00 | | | | -125.00 | | | | |
| F O.E St. Aerie Diabetes Fund | * | -100.00 | | | | -100.00 | | | | |
| F.O E. St. Aerie Scholship Fund | * | -250.00 | | | | -250.00 | | | | |
| Add Convention Eagles | * | -150.00 | | | | -150.00 | | | | |
| Golden Eagles Alzheimer Fund | * | -125.00 | | | | -125.00 | | | | |
| Jimmy Durante Childrens Fund | * | -225.00 | | | | -225.00 | | | | |
| Judge Bob Hanson Diabetes Fund | * | -125.00 | | | | -125.00 | | | | |
| Kidney Founation of Ct. Inc | * | -200.00 | | | | -200.00 | | | | |
| Max Baer Hoart Fund | * | -125.00 | | | | -125.00 | | | | |
| Racoon Club for Kids | * | -150.00 | | | | -150.00 | | | | |
| Robin King Pink Pins For | * | -300.00 | | | | -300.00 | | | | |
| STAR donation | * | -2,550.00 | | | | -2,550.00 | | | | |
| Sivermine Golf Club Event Costs | | -8,376 25 | -376 65 | | | -7,999.60 | | | | |
| Dart Leage British Nights | | -4,479 30 | -3,689 30 | | | -790.00 | | | | |
| F.O.E. Mothers Day Brunch | * | -706.97 | -706.97 | | | | | | | |
| F.O.E. Kids Chrismas Party | | -211 00 | -211 00 | | | | | | | |
| F O.E. Saint Patricks Day Dinner | | -55 00 | -55 00 | | | | | | | |
| F.O.E.Tail Gate Party | | -90 00 | -90 00 | | | | | | | |
| Trustees/ officers | * | -2,875 00 | -850 00 | | -2,025.00 | | | | | |
| Security System | | 0 00 | | | | | | | | |
| Total Disbrused | | -326,297 82 | -247,349 27 | 0.00 | -45,884.78 | -16,755.93 | -15,098.84 | -1,209.00 | 0.00 | 0 00 |
| Ledger Balance | | 188,808 12 | 4,193 72 | 134,069 02 | 1,937.09 | 1,878 41 | 1,542 78 | 1,686 07 | 41,751 03 | 1,750 00 |
| | | | | | | | | | | |
| Ledger Balance | | 187,427 12 | 4,193 72 | 134,069 02 | 1,937.09 | 1,878.41 | 1,542.78 | 1,686 07 | 41,751.03 | 1,750 00 |
| | | -10,095 85 | -10,095 85 | | 0 00 | 0.00 | | | | |
| Balance per check statement | | 187,421 84 | 3,947.44 | 134,069.02 | 1,937.09 | 738.41 | 1,542 78 | 1,686.07 | 41,751 03 | 1,750.00 |
| Deposits Outstanding | | 1,500 00 | 0 00 | | | 1,500 00 | | | | |
| check outstanding | | -10,209 57 | -9,849 57 | 0.00 | 0.00 | -360.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| Balance per Statement | | 178,712 27 | -5,902 13 | 134,069 02 | 1,937.09 | 1,878.41 | 1,542.78 | 1,686 07 | 41,751.03 | 1,750.00 |
| | | | | * | * | * | * | * | * | * |
| Checks Outstanding | | | | | | | | | | |
| | 15101 | 444 38 | 444 38 | | | | | | | |
| | 15121 | 444 38 | 444 38 | | | | | | | |
| | 15123 | 40 64 | 40 64 | | | | | | | |
| | 15142 | 432.88 | 432 88 | | | | | | | |
| | 15145 | 251 61 | 251 61 | | | | | | | |
| | 14146 | 40 63 | 40.63 | | | | | | | |
| | 15156 | 444 38 | 444 38 | | | | | | | |
| | 15160 | 251 62 | 251 62 | | | | | | | |
| | 15161 | 40 64 | 40.64 | | | | | | | |
| | 15171 | 432 88 | 432 88 | | | | | | | |
| | 15174 | 251 61 | 251 61 | | | | | | | |
| | 15175 | 40 63 | 40 63 | | | | | | | |
| | 15196 | 800 00 | 800 00 * | | | | | | | |
| | 15198 | 444 38 | 444 38 * | | | | | | | |
| | 15200 | 251 61 | 251 61 * | | | | | | | |
| | 15201 | 40 63 | 40 63 | | | | | | | |
| | 15208 | 130 00 | 130 00 | | | | | | | |
| | 15217 | 421 24 | 421 24 * | | | | | | | |

| | | | |
|---|---|---|---|
| **15219** | 251 61 | 251 61 * | |
| 15220 | 40 63 | 40 63 | |
| 15228 | 367 92 | 367 92 | |
| 15229 | 82 92 | 82 92 | |
| 15230 | 400 00 | 400 00 | |
| 15233 | 444.38 | 444 38 | |
| 15234 | 53 18 | 53 18 | |
| **15235** | 251 62 | 251 62 * | |
| 15236 | 40 64 | 40 64 | |
| 15237 | 114 89 | 114 89 | |
| 15240 | 155 00 | 155 00 | |
| 15241 | 57 00 | 57 00 | |
| 15242 | 224 55 | 224 55 | |
| 15243 | 73 72 | 73.72 | |
| 15244 | 583 01 | 583 01 | |
| 15246 | 328 42 | 328 42 | |
| 15247 | 361 95 | 361 95 | |
| 15248 | 530 00 | 530 00 | |
| 15249 | 33 99 | 33 99 | |
| 15250 | 50.00 | 50 00 | |
| 15251 | 50.00 | 50 00 | |
| 15252 | 50 00 | 50 00 | |
| **15253** | 50 00 | 50 00 * | |
| **15254** | 50 00 | 50 00 * | |
| | 9,849 57 | 9,849 57 | |

Deposits in Transit

| | | | |
|---|---|---|---|
| 5/31/2006 Room Rental | | | **375.00** |
| | 1764 | | **60.00** |
| | 1767 | | **150.00** |
| | 1768 | | **150.00** |
| | | | **360.00** |
| 2000 Transfer missing deposit | | | **2,000.00** |
| | | | **-500.00** |
| | | | **1,500.00** |