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Form **990-EZ**

Department of the Treasury
Internal Revenue Service

Short Form
Return of Organization Exempt From Income Tax

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

▶ Sponsoring organizations, and controlling organizations as defined in section 512(b)(13) must file Form 990 All other organizations with gross receipts less than $100,000 and total assets less than $250,000 at the end of the year may use this form

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

OMB No 1545-1150

2007

Open to Public Inspection

A For the 2007 calendar year, or tax year beginning , 2007, and ending , 20

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

Please use IRS label or print or type. See Specific Instructions.

C Name of organization: Fraternal Order of Eagles Aerie 1981

Number and street (or P.O. box, if mail is not delivered to street address) Room/suite: 327 Broadway

City or town, state or country, and ZIP + 4: Fullerton NE 68638

D Employer identification number: 47 : 038 6450

E Telephone number: (308)536 2886

F Group Exemption Number ▶

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

G Accounting method ☒ Cash ☐ Accrual
Other (specify) ▶

I **Website:** ▶

J **Organization type** (check only one)— ☒ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

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

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

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if $100,000 or more, file Form 990 instead of Form 990-EZ. ▶ $

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 55 of the instructions.)

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	4048
	4	Investment income	4	
	5a	Gross amount from sale of assets other than inventory — 5a		
	b	Less: cost or other basis and sales expenses — 5b		
	c	Gain or (loss) from sale of assets other than inventory. Subtract line 5b from line 5a (attach schedule)	5c	
	6	Special events and activities (attach schedule). If any amount is from **gaming**, check here ▶ ☐		
	a	Gross revenue (not including $ _____ of contributions reported on line 1) — 6a		
	b	Less: direct expenses other than fundraising expenses — 6b		
	c	Net income or (loss) from special events and activities. Subtract line 6b from line 6a	6c	
	7a	Gross sales of inventory, less returns and allowances — 7a 60628		
	b	Less: cost of goods sold — 7b 29420		
	c	Gross profit or (loss) from sales of inventory. Subtract line 7b from line 7a	7c	31,208
	8	Other revenue (describe ▶ _____)	8	
	9	**Total revenue.** Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 ▶	9	35256.
Expenses	10	Grants and similar amounts paid (attach schedule)	10	
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	15963
	13	Professional fees and other payments to independent contractors	13	
	14	Occupancy, rent, utilities, and maintenance	14	6588
	15	Printing, publications, postage, and shipping	15	209
	16	Other expenses (describe ▶ See list)	16	11165
	17	**Total expenses.** Add lines 10 through 16 ▶	17	33865
Net Assets	18	Excess or (deficit) for the year. Subtract line 17 from line 9	18	1391
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	
	20	Other changes in net assets or fund balances (attach explanation)	20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20 ▶	21	1391

SCANNED SEP 2 3 2010

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

(See page 60 of the instructions.)

		(A) Beginning of year		(B) End of year
22	Cash, savings, and investments	3240	22	4631.
23	Land and buildings	20000	23	20000
24	Other assets (describe ▶ _____)		24	
25	**Total assets**	23240	25	24631.
26	**Total liabilities** (describe ▶ _____)		26	
27	**Net assets or fund balances** (line 27 of column (B) **must** agree with line 21)	23240	27	24631

Part III Statement of Program Service Accomplishments (See page 60 of the instructions.)

What is the organization's primary exempt purpose?

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.

Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; optional for others.)

28 (Grants $) If this amount includes foreign grants, check here ▶ ☐ 28a

29 (Grants $) If this amount includes foreign grants, check here ▶ ☐ 29a

30 (Grants $) If this amount includes foreign grants, check here ▶ ☐ 30a

31 Other program services (attach schedule)
(Grants $) If this amount includes foreign grants, check here ▶ ☐ 31a

32 **Total program service expenses.** Add lines 28a through 31a ▶ 32

Part IV List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated. See page 61 of 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	(E) Expense account and other allowances
Larry Sharp RR1 Fullerton, NE 68638	President	0		
John Sharples 914 4th St, Fullerton Ne 68638	Secretary	0		
Paul Bialas 912 5th St Fullerton NE 68638	Treasurer	0		

Part V Other Information (Note the statement requirement in General Instruction V.)

		Yes	No
33	Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change		X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		X
35	*If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but* ***not*** *reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.*		
a	Did the organization have unrelated business gross income of $1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?		X
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?		
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement.		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a		
b	Did the organization file **Form 1120-POL** for this year?		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee **or** were any such loans made in a prior year and still unpaid at the start of the period covered by this return?		X
b	If "Yes," attach the schedule specified in the line 38 instructions and enter the amount involved 38b		
39	*501(c)(7) organizations.* Enter:		
a	Initiation fees and capital contributions included on line 9 39a		
b	Gross receipts, included on line 9, for public use of club facilities 39b		

Part V Other Information (Note the statement requirement in General Instruction V.) *(Continued)*

		Yes	No
40a	*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 (4) organizations.* 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 an explanation . .	40b	X
c	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . . . ▶ _____		
d	Enter amount of tax on line 40c reimbursed by the organization . . . . . ▶ _____		
e	*All organizations.* At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	40e	

41 List the states with which a copy of this return is filed. ▶ _____

42a The books are in care of ▶ Paul Bialas Telephone no. ▶ (308) 536 3212
Located at ▶ Fullerton NE ZIP + 4 ▶ 68638

		Yes	No
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)?	42b	X
	If "Yes," enter the name of the foreign country: ▶ _____		
	See the instructions for exceptions and filing requirements for **Form TD F 90-22.1.**		
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c	X
	If "Yes," enter the name of the foreign country: ▶ _____		

43 *Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of* ***Form 1041***—Check here . . . . . ▶ ☐
and enter the amount of tax-exempt interest received or accrued during the tax year . . . . . ▶ 43

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.

Paul Bialas — Signature of officer — Date 4/9/08

Paul Bialas — Type or print name and title.

Paid Preparer's Use Only

Preparer's signature: John Morgan — Date 4/9/08 — Check if self-employed ▶ ☒ — Preparer's SSN or PTIN (See Gen. Inst. X) 507 64 9258

Firm's name (or yours if self-employed), address, and ZIP + 4: Morgan and Morgan, Fullerton Ne 68638 — EIN ▶ 47-040 4431 — Phone no ▶ (308) 536 2514

F.O.E. 1981

#47-0386450

Form 990-EZ- Line 16- Other Expenses:

Supplies	$ 1490.00
Licenses	$ 569.00
Donations	$ 1372.00
Insurance	$ 2672.00
Aerie Fees	$ 1355.00
Aerie Expenses	$ 1317.00
Repairs	$ 380.00
Misc.	$ 148.00
Taxes	
Real Estate	$ 192.00
Social Security	$ 1024.00
Sales Tax	$ 3791.00

Total Other Expenses $ 14,310.00

10/15/10

Exempt Organizations At-Risk of Revocation - Nebraska

EIN	Taxpayer Name	Street Address	City	ST	Zipcode
47-0156440	FARMERS COOPERATIVE ASSOCIATION	LOCAL	PALMER	NE	68864-0000
47-6041434	FARMERS EDUCATIONAL & COOPERATIVE UNION OF NEBRASKA 291 CUMING COUNTY	2017 N RD	WEST POINT	NE	68788-3519
47-6009639	FARMERS MUTUAL TELEPHONE ASSOCIATION	LOCAL	CROFTON	NE	68730-0000
47-0470353	FARMERS UNION LIVESTOCK CO-OP CREDIT CO	601-602 LIVE STOCK EXCHANGE BLDG	OMAHA	NE	68107-0000
36-3479957	FARNAM ARTS INC	515 S 26TH ST	OMAHA	NE	68105-4101
47-0674938	FASTBREAKERS INC	113 S STADIUM	LINCOLN	NE	68588-0000
47-0774845	FELLOWSHIP OF CHRISTIAN FIREFIGHTERS LINCOLN	2600 N 81ST ST	LINCOLN	NE	68507-3343
45-0550122	FIFTY-FIFTH MOS UAAC	602 LOOKING GLASS AVE STE 471	OFFUTT AIR FORCE BASE	NE	68113-3112
47-0751620	FIGHTING CHANCE FOR CHILDREN INC	3429 HAWTHORNE AVE	OMAHA	NE	68131-1300
47-0776488	FINANCIAL INSTITUTION MARKETING CORP II	1300 O ST	LINCOLN	NE	68508-1511
23-7538026	FIRST CATHOLIC SLOVAK LADIES ASSOC OF THE USA 53	2280 38TH RD	BRUNO	NE	68014-2023
47-0543713	FIRST MARINE DIVISION ASSOCIATION INC OMAHA CHAPTER	2437 SARATOGA ST	OMAHA	NE	68111-2032
23-7448360	FLORENCE PIONEER DAYS ASSOCIATION	8312 N 36TH ST	OMAHA	NE	68112-2006
47-0661077	FONTENELLE HILLS MENS GOLF ASSOCIATION	416 RIDGEWOOD DR	BELLEVUE	NE	68005-4792
47-0838788	FORCHAN	140 N 8TH ST STE 220	LINCOLN	NE	68508-1357
23-7004179	FORT KEARNEY ROCK CLUB INC	PO BOX 2002	KEARNEY	NE	68848-2002
23-7198319	FORT OMAHA NAVY & MARINE CORPS ENLISTED WIVES CLUB	FORT OMAHA 30TH & FORT STS	OMAHA	NE	68117-0000
36-3504455	FORTEAN RESEARCH CENTER	727 MARSHALL AVE	LINCOLN	NE	68510-1463
36-3248165	FORWARD WAYNE 108 W 3RD ST	108 W 3RD ST BOX 349	WAYNE	NE	68787-1915
36-3225841	FOUNDATION FOR EMOTIONAL ENRICHMENT INC	PO BOX 1693	NORTH PLATTE	NE	69103-1693
47-0619996	FOUNDATION FOR INSURANCE EDUCATION	PO BOX 2701	LINCOLN	NE	68542-0701
47-0573013	FOUNDATION FOR UNDERSTANDING INC	209 FARM CREDIT BLDG	OMAHA	NE	68102-0000
47-0765373	FOUNDATION LIGHTHOUSE INC	4706 SOUTH 48TH STREET	LINCOLN	NE	68516-1276
47-6034834	FOUR CORNER ROD & GUN CLUB	LOCAL	NEWPORT	NE	68759-0000
36-3785358	FOUR WINDS INSTITUTE INC	PO BOX 215	HUMBOLDT	NE	68376-0215
91-1840447	FRANK MORRISON FAMILY EDUCATIONAL FOUNDATION	128 N 13TH ST	LINCOLN	NE	68508-1561
23-7592137	FRATERNAL ORDER OF EAGLES 147 AUX	500 W INDUSTRIAL LAKE DR	LINCOLN	NE	68528-1573
23-7592130	FRATERNAL ORDER OF EAGLES 1981 AUX	327 BROADWAY ST	FULLERTON	NE	68638-3152
23-7222225	FRATERNAL ORDER OF EAGLES 2769 AUX	805 E B ST	MCCOOK	NE	69001-3830
23-7592143	FRATERNAL ORDER OF EAGLES 3101 AUX	133 W 3RD ST	SUPERIOR	NE	68978-1729
51-0220889	FRATERNAL ORDER OF EAGLES 3215 AUX	PO BOX 201	KENNARD	NE	68034-0201

F.O.E. 1981

#47-0386450

Form 990-EZ- Line 16- Other Expenses:

Advertising	$ 80.00
Supplies	$ 408.00
Licenses	$ 447.00
Donations	$ 367.00
Insurance	$2688.00
Aerie Fees	$ 815.00
Aerie Expenses	$ 919.00
Taxes	
Real Estate	$ 180.00
Social Security	$ 1221.00
Sales Tax	$ 3916.00
Unemployment	$ 88.00
Travel	$ 56.00
Total Other Expenses	$ 11,105.00