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Form **990**

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)

OMB No 1545-0047

2007

Open to Public Inspection

Department of the Treasury
Internal Revenue Service(77)

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

A For the 2007 calendar year, or tax year beginning Jun 1, 2007, and ending May 31, 2008

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 IOWA STATE AERIE

Number and street (or P.O. box if mail is not delivered to street addr) Room/suite

3305 GLENSTONE DR, UNIT 167

City, town or country

GRIMES

State ZIP code + 4

IA 50111

D Employer Identification Number

42-6099655

E Telephone number

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

I Group Exemption Number ▶ 0102

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

G Web site: ▶ N/A

J Organization type (check only one)

☒ 501(c) 8 (insert no.) ☐ 4947(a)(1) or ☐ 527

K Check here ☐ if the organization is not a 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 Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 346,357.

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

1 Contributions, gifts, grants, and similar amounts received:

a Contributions to donor advised funds

b Direct public support (not included on line 1a)

c Indirect public support (not included on line 1a)

d Government contributions (grants) (not included on line 1a)

e Total (add lines 1a through 1d) (cash \$ 333,155. noncash \$)

1a
1b 333,155.
1c
1d
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ACCOUNTS MANAGEMENT
OGDEN

1e 333,155.

2 Program service revenue including government fees and contracts (from Part VII, line 93)

3 Membership dues and assessments

4 Interest on savings and temporary cash investments

5 Dividends and interest from securities

6a Gross rents

b Less: rental expenses

c Net rental income or (loss). Subtract line 6b from line 6a

7 Other investment income (describe ▶)

6a
6b

2

3 12,290.

4 912.

5

6c

7

8a Gross amount from sales of assets other than inventory

b Less: cost or other basis and sales expenses

c Gain or (loss) (attach schedule)

d Net gain or (loss). Combine line 8c, columns (A) and (B)

(A) Securities (B) Other
8a
8b
8c

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 1b)

b Less: direct expenses other than fundraising expenses

c Net income or (loss) from special events. Subtract line 9b from line 9a

9a
9b

9c

10a Gross sales of inventory, less returns and allowances

b Less: cost of goods sold

c Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a

10a
10b

10c

11 Other revenue (from Part VII, line 103)

12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11

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OGDEN, UT

12 346,357.

13 320,449.

14 77,050.

15 676.

16

17 398,175.

18 -51,818.

19 341,130.

20

21 289,312.

13 Program services (from line 44, column (B))

14 Management and general (from line 44, column (C))

15 Fundraising (from line 44, column (D))

16 Payments to affiliates (attach schedule)

17 Total expenses. Add lines 16 and 44, column (A)

18 Excess or (deficit) for the year. Subtract line 17 from line 12

19 Net assets or fund balances at beginning of year (from line 73, column (A))

20 Other changes in net assets or fund balances (attach explanation)

21 Net assets or fund balances at end of year. Combine lines 18, 19, and 20

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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 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
22a Grants paid from donor advised funds (attach sch) (cash \$ <u>316,052.</u> non-cash \$ _____) If this amount includes foreign grants, check here ☐	22a 316,052.	316,052.		
22b Other grants and allocations (att sch) (cash \$ _____ non-cash \$ _____) If this amount includes foreign grants, check here ☐	22b			
23 Specific assistance to individuals (attach schedule)	23			
24 Benefits paid to or for members (attach schedule)	24			
25a Compensation of current officers, directors, key employees, etc listed in Part V-A	25a 0.			
b Compensation of former officers, directors, key employees, etc listed in Part V-B	25b			
c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	25c			
26 Salaries and wages of employees not included on lines 25a, b, and c	26			
27 Pension plan contributions not included on lines 25a, b, and c	27			
28 Employee benefits not included on lines 25a - 27	28			
29 Payroll taxes	29			
30 Professional fundraising fees	30			
31 Accounting fees	31			
32 Legal fees	32			
33 Supplies	33			
34 Telephone	34 1,949.		1,949.	
35 Postage and shipping	35			
36 Occupancy	36			
37 Equipment rental and maintenance	37			
38 Printing and publications	38 10,362.		10,362.	
39 Travel	39			
40 Conferences, conventions, and meetings	40 14,816.		14,816.	
41 Interest	41			
42 Depreciation, depletion, etc (attach schedule)	42			
43 Other expenses not covered above (itemize)				
a OVERPAYMENT	43a 980.		980.	
b DUES	43b 3,000.		3,000.	
c OFFICE EXPENSE	43c 697.		697.	
d POSTAGE	43d 430.		430.	
e MEMBERSHIP	43e 8,820.		8,820.	
f LIABILITY INS	43f 635.		635.	
g See Other Expenses Stmt	43g 40,434.	4,397.	35,361.	676.
44 Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B) - (D), carry these totals to lines 13 - 15)	44 398,175.	320,449.	77,050.	676.

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? ▶ PROMOTE PEACE, PROSPERITY, GLADNESS & HOPE
 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.)

Program Service Expenses
 (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, but optional for 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
 (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) ▶

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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	340,603.	45	273,785.
	46 Savings and temporary cash investments		46	15,000.
	47 a Accounts receivable	47 a		
	b Less: allowance for doubtful accounts	47 b	47 c	
	48 a Pledges receivable	48 a		
	b Less: allowance for doubtful accounts	48 b	48 c	
	49 Grants receivable		49	
	50 a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)		50 a	
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)		50 b	
	51 a Other notes and loans receivable (attach schedule)	51 a		
	b Less: allowance for doubtful accounts	51 b	51 c	
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges		53	
	54 a Investments — publicly-traded securities	☐ Cost ☐ FMV	54 a	
	b Investments — other securities (attach sch)	☐ Cost ☐ FMV	54 b	
55 a Investments — land, buildings, & equipment basis	55 a			
b Less: accumulated depreciation (attach schedule)	55 b	55 c		
56 Investments — other (attach schedule)		56		
57 a Land, buildings, and equipment basis	57 a 1,612.			
b Less: accumulated depreciation (attach schedule)	57 b 1,085.	527.	57 c 527.	
58 Other assets, including program-related investments (describe ► _____)		58		
59 Total assets (must equal line 74). Add lines 45 through 58	341,130.	59	289,312.	
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	
	64 a Tax-exempt bond liabilities (attach schedule)		64 a	
	b Mortgages and other notes payable (attach schedule)		64 b	
	65 Other liabilities (describe ► _____)		65	
	66 Total liabilities. Add lines 60 through 65	0.	66	0.
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	341,130.	72	289,312.
	73 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72 (Column (A) must equal line 19 and column (B) must equal line 21)	341,130.	73	289,312.
	74 Total liabilities and net assets/fund balances. Add lines 66 and 73	341,130.	74	289,312.

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Form 990 (2007)

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 I, 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 and deferred compensation plans	(E) Expense account and other allowances
SEE ATTACHED				
SEE ATTACHED				
SEE ATTACHED IA 50111	SEE ATTACHED 1.00	0.	0.	0.

Part VI Other Information (continued)

	Yes	No
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?		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.)		
83 a Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	X	
84 a Did the organization solicit any contributions or gifts that were not tax deductible?		X
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
85 a 501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?	N/A	
b Did the organization make only in-house lobbying expenditures of \$2,000 or less?	N/A	
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	N/A	
d Section 162(e) lobbying and political expenditures	N/A	
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	N/A	
f Taxable amount of lobbying and political expenditures (line 85d less 85e)	N/A	
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	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?	N/A	
86 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12	N/A	
b Gross receipts, included on line 12, for public use of club facilities	N/A	
87 501(c)(12) organizations. Enter: a Gross income from members or shareholders	N/A	
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	N/A	
88 a 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.		X
b At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Part XI.		X
89 a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under section 4911: N/A; section 4912: N/A; section 4955: N/A		
b 501(c)(3) and 501(c)(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 a statement explaining each transaction.	N/A	
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.		
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?		X
f All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?		X
g For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		X
90 a List the states with which a copy of this return is filed: _____		
b Number of employees employed in the pay period that includes March 12, 2007 (See instructions.)	0	
91 a The books are in care of: LARRY HANSHAW Telephone number: (515) 986-3103 Located at: 3305 SE GLENSTONE DR #167 GRIMES IA ZIP + 4: 50111-5079		
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)? 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.		

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Part VI Other Information (continued)

Yes No

c At any time during the calendar year, did the organization maintain an office outside of the United States?

91 c

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 & contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings & temporary cash invmnts					
96 Dividends & interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from pers prop					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))					
105 Total (add line 104, columns (B), (D), and (E))					

Note: Line 105 plus line 1e, 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)
1	N/A
2	
3	
4	

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

N/A

(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)

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13).

N/A

Yes No

106 Did the reporting organization **make** any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If 'Yes,' complete the schedule below for each controlled entity

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
Totals				

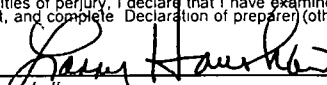
Yes No

107 Did the reporting organization **receive** any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If 'Yes,' complete the schedule below for each controlled entity

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
Totals				

Yes No

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

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  Type or print name and title LARRY HANSHAW, Secretary		Date 6-8-11	
Paid Preparer's Use Only	Preparer's signature 	Date 06/07/11	Check if self-employed ☐	Preparer's SSN or PTIN (See General Instruction X)
	Firm's name (or yours if self-employed), address, and ZIP + 4 THE PLANNERS TAX & ACCOUNTING, INC. 1012 GRAND AVENUE WEST DES MOINES IA 50265		EIN 13-1234567	Phone no (515) 224-0149

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Form 990, Page 2, Part II, Line 43

Other Expenses Stmt

Other expenses not covered above (itemize):	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
<u>QTRLY REPORT</u>	676.			676.
<u>PLAQUES & ENGRAVING</u>	47.		47.	
<u>WEB COST</u>	1,200.		1,200.	
<u>CHARITY EXPENSE</u>	4,397.	4,397.		
<u>OTHER ADMINISTRATIVE COSTS</u>	34,114.		34,114.	
Total	<u>40,434.</u>	<u>4,397.</u>	<u>35,361.</u>	<u>676.</u>

IOWA STATE AERIE OFFICERS AND COMMITTEE CHAIRMEN

2007-2008

OFFICE		ADDRESS	PHONE - E-MAIL
Junior Past State President	Larry Ellis	202 Broad St., Box 63, Grinnell, IA 50112	641-236-5672 warbonet@iowatelecom.net
Worthy State President	Darwin Thomas	P O Box 112, Albia, IA 52531	641-932-3800 darwinthomas@mchsi.com
Worthy State Vice Pres	John Goffinet	712 N Birch Street, Monticello, IA 52310	319-465-4079 jwg568@mchsi.com
Worthy State Chaplain	Greg Martin	629 Acres, Burlington, IA 52601	319-752-9683 gregfoe150@mchsi.com
Worthy State Conductor	Bill Whitlock	1701 Eagle Crest Apt B5, Davenport, IA 52804	563-570-2941 Cap1996093@hotmail.com
Worthy State Secretary	Larry Hanshaw	5555 Glenstone Drive #167 Grimes, IA 50111	515-986-3103 lphanshaw@msn.com
Worthy State Treasurer	John Haidisiak	710 S 4th Street, Red Oak, IA 51566	712-623-4205 kjhaid@iowatelecom.net
Worthy State Inside Guard	Steve Langton	P.O. Box 236, Atkins, IA 52206	319-521-5274 sdlangton@yahoo.com
Worthy State Outside Guard	Dale O'Brien	2656 Black Diamond R. SW, Iowa City, IA 52240	319-683-2701 obriens1990@netins.net
Worthy State Trustee #1	Jake Roush	9354 74th Street, Ottumwa, IA 52502	641-684-5178 jerryroush@lisco.com
Worthy State Trustee #2	Joe Roe	1939 9th Street, Coralville, IA 52241	319-351-4326 Joseph-Roe@uiowa.edu
Worthy State Trustee #3	John Kipp	5027 Dittmer, Davenport, IA 52806	563-579-4699
Worthy State Trustee #4	Randy Woods	2937 Avenue J Council Bluffs, IA 51506	712-328-8612 rwoods17@cox.net
Honorary State V. President	Jim Mintun	1221 Hedge Ave., Burlington, IA 52601	319-753-5357 foe150@mchsi.com
State Membership Director	John Haidisiak	710 S 4th Street, Red Oak, IA 51566	712-623-4205 kjhaid@iowatelecom.net
Co-Chairman	Joe Roe	1939 9th Street, Coralville, IA 52241	319-351-4326 Joseph-Roe@uiowa.edu
Co-Chairman	Kevin Kressley	558 Helmet Avenue, Waterloo, IA 50703	319-230-0710 krezz58@yahoo.com
State Project Chairman	Steve Zimmermann	303 South Elm St., Creston, IA 50801	641-782-4386 bulletineditor@mchsi.com
Budget Committee	Dean Andersen	113 South 7th St. #2, Missouri Valley, IA 51555	712-642-2621 daadra@aol.com
State New Aerie Chairman	Michael Duehr	1575 Wood Street, Dubuque, IA 52001	563-557-1098 theduehrs@aol.com
State Weak Aerie Chairman	Larry Hanshaw, et al	5555 Glenstone Drive #167 Grimes, IA 50111	515-986-3103 lphanshaw@msn.com
State Cancer Fund Chairman	Ed Stremow	2327 Chancy Street, Clinton, IA 52732	563-242-8653 estremow@mchsi.com
State JD Children's Fund Chairman	Barry Tofeland	2723 High Street, Des Moines, IA 50312-5211	515-491-4916 barry@tofteland.com
State Child Abuse Fund Chairman	Frank Ruggles	731 19th Street, West Des Moines, IA 50265	515-225-6622 waltzme2@mchsi.com
Roy Howard Alzheimer's Fd Chairman	Scott Gruhn	15093 Jacob Avenue, Grinnell IA 50112	641-275-2611 sgruhn@mayflowerhomes.com
State Diabetes Fund Chairman	John Kipp	1622 N. Division Street, Davenport, IA 52804	563-326-1872
State Kidney Fund Chairman	Steve Langton	P O Box 236, Atkins, IA 52206	319-521-5274 sdlangton@yahoo.com
State Memorial Fund Chairman	Dale O'Brien	2656 Black Diamond R. SW, Iowa City, IA 52240	319-683-2701 obriens1990@netins.net
State Heart Fund Chairman	Dan Bouressa	5909 Avenue O #29, Fort Madison, IA 52627	319-470-3242 fm1287@mchsi.com
Lew Reed Spinal Cord Injury Fund	Greg Martin	626 Acres, Burlington, IA 52601	319-752-9683 gregeagleboy@aol.com
State Golden Eagle Fund Chairman	Ivyl Barnes	2106 West 4th, Perry, IA 50220	515-465-9359 toshiaivl@peoplepc.com
State Ritual Chairman	Pete Schmieding	3519 Antonia Court, Imperial, MO 63052	636-942-3659 foe.104@att.net
State REAC Chairman	Bob Steuer	1265 Madera, Dubuque, IA 52001	563-583-0546 steuer49@aol.com
State Bowling Chairman	Tenny Sammons	7092 85th Street, Agency, IA 52530	641-777-5406
State Golf Chairman	John Kipp	1622 N. Division Street, Davenport, IA 52804	563-326-1872
State Dart Chairman	Miles Dixon	2201 Baumberger, Burlington, IA 52601	319-754-1698
State Pool Chairman	Kevin Kressley	558 Helmet Avenue, Waterloo, IA 50703	319-230-0710 krezz58@yahoo.com
State Bulletin Editor	Steve Zimmermann	303 South Elm St., Creston, IA 50801	641-782-4386 bulletineditor@mchsi.com
State Webmaster	Bill Drury	305 Academy Ave. York, NE 68467	402-362-2766 bdrury@neb rr.com
State Auditor	Frank Ruggles	731 19th Street, West Des Moines, IA 50265	515-225-6622 waltzme2@mchsi.com
State Secretary Club	Joe Roe	1939 9th Street, Coralville, IA 52241	319-351-4326 RoeJ@uihc.uiowa.edu
State Historian	Tiffany Wolf	P.O.Box 85, Chariton, IA 50049	641-774-2914 twolf@astoriainc.com
God, Flag & Country	Wynn Bowden		