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0905

Form **990**

Department of the Treasury

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)

20**08**

Open to Public

The organization may have to use a copy of this return to satisfy state reporting requirements For the 2008 calendar year, or tax year beginning 2008, and ending 20 C Name of organization FRATERNAL ORDER OF EAGLES #538 Employer Identification number Check if applicable: Doing Business As FRATERNAL ORDER OF EAGLES #538 7593065 Address change Number and street (or P.O. box if mail is not delivered to street address) Name change orint or Telephone number 568 SOUTH 2ND ST Initial return 541) 267-6613 City or town, state or country, and ZIP + 4 Termination **COOS BAY, OR 97420** G Gross receipts \$ Amended return F Name and address of principal officer: Application pending H(a) Is this a group return for affiliates? Yes H(b) Are all affiliates included? Yes No Tax-exempt status: 4947(a)(1) or ___ 501(c) (8)◀ (insert no.) **527** If "No," attach a list. (see instructions) Website: ▶ H(c) Group exemption number > Type of organization: ✓ Corporation ☐ Trust ☐ Association ☐ Other ▶ 1903 M State of legal domicile: OR L. Year of formation: Partil Summary Briefly describe the organization's mission or most significant activities: PEOPLE HELPING PEOPLE - RAISING MONEY FOR CHARITY. Governance 2 Check this box > I if the organization discontinued its operations or disposed of more than 25% of its assets. 659 Number of voting members of the governing body (Part VI, line 1a). Number of Independent voting members of the governing body (Part VI, line 1b) 15 5 Total number of employees (Part V, line 2a) . . . 6 659 6 Total number of volunteers (estimate if necessary) 7a Total gross unrelated business revenue from Part VIII, line 12, column (C). b Net unrelated business taxable income from Form 990-T, line 34 Current Year 29736 20982 Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) . 2253 2891 Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 210947 213076 Total revenue-add lines 8 through 11 (must equal Part VIII, column (A), line 12 242936 236949 7034 11919 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . 25 Benefits paid to or for members (Part IX, column (A), line 4) 14 121953 124884 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundralsing fees (Part IX, column (A), line 11e) 72167 73169 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . 201154 209997 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25). Revenue less expenses. Subtract line 18 from line 12 41782 26952 Beginning of Year End of Year 654694 665541 Total assets (Part X, line 16) . 0 Total liabilities (Part X, line 26) Net assets or fund balances. Subtract line 21 from line 20 654694 665541 Part[II Signature Block Under penalties of penjury, 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, conject, and complete. Declaration of greparer (other than officer) is based on all information of which preparer has any knowledge. Sign Here Signature of officer KOBERT SECRETARY Type or pant name and title Date Check If Preparer's Identifying number Preperer's signature selfeso instructions employed 🕨 🔲 Paid Preparer's Firm's name (or yours EIN Use Only if self-employed), address, and ZIP + 4 Phone no **→** (May the IRS discuss this return with the preparer shown above? (see instructions) No. Yes

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

6^N

Cat. No. 11282Y

Form	990 (2008) Page 2
Par	1 III Statement of Program Service Accomplishments (see instructions)
1	Briefly describe the organization's mission: The Fraternal Order of Eagles, an International, non-profit organization, unites fraternally in the spirit of liberty, truth, Justice and equality to make human life more desirable by lessening its ills, and promoting peace, prosperity, gladness gladness and hope.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
48	(Code:) (Expenses \$including grants of \$) (Revenue \$)

	,
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$)

4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)

41	Other program services. (Describe in Schedule O.)
- u	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► \$ (Must equal Part IX, Line 25, column (B).)

Fal	Checklist of Required Schedules			
	·		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		1
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		\
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		✓
4	Section 601(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		1
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		1
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	-	1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8_		1
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		\
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 257 if "Yes," complete Schedule D, Parts VI, VIII, IX, or X as applicable	11		✓
12	Did the organization receive an audited financial statement for the year for which it is completing this return			
	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		√
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		1
17	Old the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17 18		7
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	19		7
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	20		7
20 21	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	21		1
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	1	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25	24a		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		/
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		V.
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		✓_
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		1
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		1
27 ——	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		1

Pa	t IV Checklist of Required Schedules (continued)			
			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
a	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV.	28b		/
C	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	<u> </u>	/
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		1
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			

Par	TiV Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of !			
	U.S. Information Returns. Enter -0- if not applicable			ļ l
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	\	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 15			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	✓	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see			
	instructions)			
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
	this retum?	<u>3a</u>		✓
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		✓
4 a	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)?	<u>4a</u>		✓
D	If "Yes," enter the name of the foreign country: ▶	Í		
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
			_	7
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5b		7
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity	-		<u> </u>
C	Regarding Prohibited Tax Shelter Transaction?	5c		
fа	Did the organization solicit any contributions that were not tax deductible?	6a		1
	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
U	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than			لمرحد
	\$757	7a		1
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			1
_	required to file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year. 7d	7c		Ť
	The state of the field of the state and deving the year.			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	_	7
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Ż
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
_	For contributions of cars, boats, airplanes, and other vehicles, dld the organization file a Form 1098-C as			
••	required?	7h		
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section			
_	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		✓
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a		<u> </u>
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		✓_
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 0			
	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
D	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
129	amounts due or received from them.)	128	1	7
Ъ	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			

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	Governance, Management, and Disclosure (Sections A, B, and C request information aborequired by the Internal Revenue Code.)	out po	olicie	s not
Sec	tion A. Governing Body and Management			
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the			Í
	circumstances, processes, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body			
Ь	Enter the number of voting members that are independent	ĺ		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		<u>✓</u>
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		✓
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		✓
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		✓
6	Does the organization have members or stockholders?	6	✓	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a		1
ь		7b	/	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			ł
	the year by the following:			
а	The governing body?	8a	✓	
b	Each committee with authority to act on behalf of the governing body?	8b	_	
9a	Does the organization have local chapters, branches, or affiliates?	9a		<u> </u>
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations		_	
	must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	✓	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		<u> </u>
Sec	tion B. Policies			
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	128		<u> </u>
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			,
	rise to conflicts?	12b		
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
_	describe in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		✓
14	Does the organization have a written document retention and destruction policy?	14		√ _,
15	Did the process for determining compensation of the following persons include a review and approval by			1
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:			لب
а	The organization's CEO, Executive Director, or top management official?	15a		✓
b	Other officers or key employees of the organization?	15b		✓
	Describe the process in Schedule O. (see instructions)			1
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			لب
	with a taxable entity during the year?	16a		✓_
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ OREGON			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(or	:)(3)s ·	only)	
	available for public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website Dupon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	of inte	erest	
	policy, and financial statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and reco	rds o	f the	
	organization: ► ROBERT MANSKE - SECRETARY			
	568 S. 2ND ST COOS BAY, OR 97420			

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

W	(B)			(0	3)			(O)	(E)	(F)
Name and Title	Average					that ac		Reportable compensation	Reportable compensation	Estimated amount of
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
DAVID RUDD JR. PAST PRESIDENT	20			1				0	0	0
DOUG KARR PRESIDENT	20			1				0	0	0
NONE VICE PRESIDENT	20			1				0	0	0
HENRY MOELLER CHAPLAIN	5			1				0	0	0
ROBERT MANSKE SECRETARY	40			1				7854.00	0	0
DENNIS HANSEN TREASURER	20			1				0	0	0
CHAVELO DE LA CRUZ CONDUCTOR	5			1				0	0	0
BRUCE LOQUIST INSIDE GUARD	5			1				0	0	0
NONE OUTSIDE GUARD	5			1	L			0	0	
RICHARD STAGGENBORG TRUSTEE	10			1			<u> </u>	0	0	O
ROY SHIVELY TRUSTEE	10		ļ	1				0	0	0
DAVID RUDD TRUSTEE	10		L	1				0	0	C
ROBERT WILSON TRUSTEE	10			1				0	0	0
LARRY SANBORN TRUSTEE	10			1				0	0	0
			_							

Pa	rt VII Section A. Officers, Directors, Tru	ıstees, Key	y Emp	doy	905	an:	d Hig	hes	t Compensate	d Employe	88 (COI	itinued)
	(A)	(B)			•	C)			(C)	(E)		(F)
	Name and title	Average hours per week	P or director	_	Officer	a Key employee	that ap employ	Former	Reportable compensation from the	Reportat compensation relations from relations	tion ted ons	Estimated amount of other compensation
			Individual frustee or director	Institutional trustee		playee	Highest compensated employee		organization (W-2/1099-MISC)	(W-2/1099-I	MISC)	from the organization and related organizations
												· · · · · · · · · · · · · · · · · · ·
								_				
1b	Total							<u> </u>				
2 	Total number of individuals (including those organization ► NONE	e in 1a) wh	o rec	eive	ed n	nore	thar	1 \$1	00,000 in repo	rtable com	pensa	
3	Did the organization list any former office							oyee	e, or highest c	ompensate	ed	Yes No
4	employee on line 1a? If "Yes," complete So For any individual listed on line 1a, is the s the organization and related organizations	um of repo	ortable	e cc	amo	ens	ation					
5	individual	or accrue		Jens	 satio	n f	 70m :	anv	unrelated oro		.	4 /
	services rendered to the organization? If ")	res,- comp	vere :	SCH	eau.	18 J	TOF S	uçn	person			5 1
1	Complete this table for your five highest oc compensation from the organization.	ompensate	d Indi	epe	nde	nt c	ontra	cto	s that received	d more tha	n \$10	0,000 of
	(A) Name and business add	/ 0 58		•					(B) Description of s	ervices	C	(C) compensation
N/A												
2	Total number of independent contractors (including t	hose	in 1	I) w	ho i	recelv	/ed	more than \$10	00,000 in		

Form 990 (2008) Page 9 Part VIII Statement of Revenue (A) Total revenue (B) Related or exempt function (C) (D) Revenue excluded from tax Unrelated business. **NEVENUE** ts, grants amounts 18 1a Federated campaigns . . 14614.82 1b b Membership dues c Fundraising events . . 1c 14 d Related organizations . . . e Government grants (contributions). 16 f All other contributions, gifts, grants, 6337.50 and similar amounts not included above g Noncash contributions included in lines 1a-1f: \$ h Total. Add lines 1a-1f . . 20982.32 Business Code Revenue b Service _____ All other program service revenue . g Total. Add lines 2a-2f Investment income (including dividends, interest, and 2890.78 other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (ii) Personal (i) Real 6a Gross Rents . . b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) (i) Securities 7a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses . c Gain or (loss) . d Net gain or (loss) Other Revenue 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). 368293.71 b Less: direct expenses c Net income or (loss) from fundraising events 63329.30 9a Gross income from gammg activities. See Part IV, line 19 a **b** Less: direct expenses, . c Net income or (loss) from gaming activities 10a Gross sales of inventory, less 294410.07 returns and allowances b Less: cost of goods sold . . 144663.37 . Ы 149746.70 c Net income or (loss) from sales of inventory . . . Miscellaneous Revenue Business Code 11a d All other revenue e Total. Add lines 11a-11d 12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c. 10c, and 11e 236949.10

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must complete col				
	o not include amounts reported on lines 6b, o, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	11919.06			
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16	25.00			
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	7854.00			
8	Compensation not included above, to disqualified persons (as defined under section 4958(f)(f)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	87694.63			·
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions).	331.76			
9	Other employee benefits	29003.90	·	 	
10	Payroll taxes	28003.80			
11	Fees for services (non-employees):			[]	
	Management				
	Accounting				
d	I				
_	Professional fundraising services. See Part IV, Ilne 17		·		
4	Investment management feets				_
a		1914.61			
12	Advertising and promotion	1054.00			
13	Office expenses	5398.51			
14	Information technology				
15	Royalties		·		
16	Occupancy	29407.35			
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1862.60			
20	Interest			ļ	
21	Payments to affiliates	9297.75			
22	Depreciation, depletion, and amortization	40470.00			
23	Insurance	10172.00			
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)		·		
_	ASSOCIATION DUES/PFO	180.00		 	·
8	MUSIC	11110.00			
þ	BANK CHARGES	847.23			
ن ام	OFFICERS BONDS	298.00		 -	
8	LICENSE - SEE ATTACHED	1626.60	 		· ·
ť	All other expenses				
25	Total functional expenses. Add lines 1 through 24f		· ·		
26	Joint Costs. Check here ▶ ☐ if following			•	
	SOP 98-2. Complete this line only if the organization reported in column (B) joint costs	ł			
	from a combined educational campaign and				
	fundraising solicitation ,	209996.90		i J	

Pa	rt X L	Balance Sheet					
			(A) Beginning of year		End	(B) of year	
	1	Cash—non-interest-bearing	9400.00	1		940	00.00
	2	Savings and temporary cash investments	171202.00	2		15	5097
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net		4			
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5			
	8	Receivables from other disqualifled persons (as defined under section				·	$\overline{}$
		4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6			1
2	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use		8			
Ą	9	Prepaid expenses and deferred charges		9			
	10a	Land, buildings, and equipment: cost basis 10a					
	ь	Less: accumulated depreciation. Complete					
		Part VI of Schedule D	474092	10c		50	1044
	11	Investments—publicly traded securities	······	12			
	12	Investments—other securities. See Part IV, line 11		13			
	13	Investments—program-related. See Part IV, line 11		14			
	14	Intangible assets		15	<u> </u>		
	15 16	Other assets. See Part IV, line 11 Total assets. Add lines 1 through 15 (must equal line 34)	654694				5541
_			451034	17			<u> </u>
-	17	Accounts payable and accrued expenses	· · · · · · · · · · · · · · · · · · ·	18			
	18	Grants payable		19	<u> </u>		
	19	Deferred revenue	·	20			
80	20	Tax-exempt bond liabilities		21			
5	21	Escrow account liability. Complete Part IV of Schedule D			-		
Liabilities	22	Payables to current and former officers, directors, trustees, key		i			
.e.		employees, highest compensated employees, and disqualified	~	22	-		
	23	persons. Complete Part II of Schedule L		23		-	
	24			24			
	25	Unsecured notes and loans payable		25			
	26	Total liabilities. Add lines 17 through 25	0				0
nd Balances		Organizations that follow SFAS 117, check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.					
품	27	Unrestricted net assets		27			
8	28	Temporarily restricted net assets		28			
멸	29	Permanently restricted net assets		29			
or Fu		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds		30			
Net Assets	31	Paid-in or capital surplus, or land, building, or equipment fund		31			
₹	32	Retained earnings, endowment, accumulated income, or other funds		32			
È	33	Total net assets or fund balances	· · · · · · · · · · · · · · · · · · ·	33		<u> </u>	0
_	34_	Total liabilities and net assets/fund balances	654694.00	34		66	5541
Pa	rt XI	Financial Statements and Reporting					
						Yes	No
1	Acco	ounting method used to prepare the Form 990: 🗹 Cash 🛮 🗀 Accrual	□ Other			_	اـــا
	Were	e the organization's financial statements compiled or reviewed by an ind		7 .	. 2a	1	1
		e the organization's financial statements audited by an independent according			2b	<u> </u>	1
	If "Y	es" to lines 2a or 2b, does the organization have a committee that assumes	responsibility for overs	sight (of	1	ł
	the a	audit, review, or compilation of its financial statements and selection of an inc	dependent accountant	? .	20		
3а	As a	result of a federal award, was the organization required to undergo an	audit or audits as set	forth	ıln 📗		
		Single Audit Act and OMB Circular A-133?			· 3a		1
<u>_</u> b	If "Y	es," did the organization undergo the required audit or audits?	 	<u> </u>	. 3b		<u> </u>

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

▶ Attach to Form 990. To be completed by organizations that

	Hevanue Service	answered "\	Yes," to Form 990, Part IV, line	e 6, 7, 8, 9, 10, 11,	or 12.	Inspection
Name	of the organization	1			Employer ide	ntification number
	S BAY AERIE #				23	7593065
Par			nor Advised Funds or O		nds or Acco	ounts, Complete if
	the orga	anization answered "Yes	" to Form 990, Part IV, lin		ALE	nd other seconds
			(a) Donor advised fur	EUS	(o) runds a	nd other accounts
1		end of year				
2	•• •	ributions to (during year)				
3 4		ts from (during year) .				
4 5			donor advisors in writing the	at the assets held	in donor ach	rised
•	funds are the or	rganization's property, subj	ject to the organization's ex	clusive legal contr	rol?	. 🗌 Yes 🔲 No
6	Did the organiza	ation inform all grantees, d	lonors, and donor advisors in	n writing that gran	nt funds may t	
	used only for ch	naritable purposes and not	for the benefit of the donor	r or donor advisor	or other	
	Impermissible pr	rotion Engance Com	plete if the organization an	ewered "Voc" +-	Form 000 P	. Yes No
Par					, ₍₁₁₁₁ 33U, P	un. 17, 1110 f.
1		onservation easements held of land for public use (e.g	d by the organization (check		∖f an historios‼	ly important land area
	☐ Preservation		g., recreation or pleasure)			storic structure
	☐ Preservation	• • • • • • • • • • • • • • • • • • • •		: : 2207 700071	IN	
2	Complete lines 2	2a-2d if the organization he	ld a qualified conservation co	ntribution in the fo	rm of a conse	rvation easement
	on the last day					
					 	feld at the End of the Year
а					2a _	
þ			easements			
G			certified historic structure indicating in (c) acquired after 8/17		20	
ď			iled, transferred, released, e			e organization during
3		servation easements modif r ▶	,	guioriou, or ter		Dermerenon wennig
4	Number of state	es where property subject	to conservation easement is			
5	Does the organi	ization have a written polic	cy regarding the periodic mo	onitoring, inspectio	on, violations,	
	enforcement of	the conservation easemen	nts it holds?			L_jYes L_jNo
6	Staff or volunted	er hours devoted to monito	oring, inspecting, and enforced	ang easements di	uring the year	\$
7			ng, inspecting, and enforcing			¥1
8			ed on line 2(d) above satisfy		OI SECUOII	Yes 🔲 No
9	In Part XIV. des	cribe how the organization	reports conservation easer	ments in Its revenu	ie and expens	se statement, and
•	balance sheet, a	and include, if applicable,	the text of the footnote to the	ne organization's t	inancial state	ments that describes
		n's accounting for conserva		Trans	ther Similar	Acasta
Par	Organiz	rations maintaining Coll te if the organization are:	lections of Art, Historical wered "Yes" to Form 990,	Part IV. line 8.	wiei əlmhaf	M33412.
						
1a	If the organization	on elected, as permitted u	inder SFAS 116, not to report sets held for public exhibition	rt in its revenue st	ratement and i	palance sheet works o
	art, mistorical tre	XIV, the text of the footno	ote to its financial statements	s that describes the	nese items.	or public activities
h	If the omanization	ion elected, as permitted u	inder SFAS 116, to report in	its revenue stater	ment and bala	nce sheet works of art
U	historical treasu	ires, or other similar assets	s held for public exhibition, (education, or rese	arch in further	rance of public service
	provide the follo	owing amounts relating to	these items:			
	(i) Revenues in	cluded in Form 990, Part	VIII, line 1		•	Фе
2	if the organizati	ion received or held work: hts required to be reported	s of art, historical treasures, d under SFAS 116 relating to	, or other similar i o these items:	assets (Of Time	unciai gain, provide the
a	Revenues includ	ded in Form 990, Part VIII,	((ne 1		•	\$
h	Assets Included	l in Form 990. Part X			•	\$

	dule D (Form 990) 2008									age 2
Par	t iii Organizations Maintaini	ng Collections	of Art, His	torical	Treasures	, or C	ther Similar	Assets (continu	ued)
3	Using the organization's accession Items (check all that apply):	and other records	s, check an	y of th	e following	that a	re a significant	use of It	s colle	ction
a	Public exhibition		d [یا ⊑	an or excha	inge p	rograms			
b	Scholarly research		e {	_) o	ther			,		
c	Preservation for future general	ions								
4	Provide a description of the organiz Part XIV.							xempt po	ırpoşe	in
5	During the year, did the organization a assets to be sold to raise funds rather	r than to be mainta	alned as par	t of the	organization	's col	ection?		Yes 🗌	No
Par	Trust, Escrow and Custo Part IV, line 9, or reported	odial Arrangeme d an amount on l	Form 990,	olete if Part X	organizatio , line 21.	n ans	wered "Yes" t	o Form	990,	
	Is the organization an agent, trusted included on Form 990, Part X?					ons o	other assets	not 🖂 🕆	Yes 🗀] No
þ	If "Yes," explain the arrangement in	Part XIV and cor	nplete the f	ollowin	ig table:			A		
						-		Amount		
C						<u> 10</u>	- 			
d	Additions during the year					. 10				
8	Distributions during the year					. <u>1e</u>				
f	Ending balance						<u> </u>	П,	·	No
2a b	Did the organization include an amount "Yes," explain the arrangement in	ount on Form 990	, Part X, lin	e 217	• • •			. LJ	Yes L	J 140
_	t V Endowment Funds. Co	mplete if organi	zation ans	wered	"Yes" to F	orm	990. Part IV.	ine 10.		
	Endowner rands. Co	(a) Current year	(b) Prior		(c) Two years	back	(d) Three years ba	ck (e) Fo	ur years	back
4.	Paginals of way belongs									i
1a	Beginning of year balance				·		· · · · · · · · · · · · · · · · · · ·			
b										
ر 2	Investment earnings or losses .									1
đ	Grants or scholarships		•							
•	Other expenditures for facilities and programs									
f g	Administrative expenses End of year balance									
2	Provide the estimated percentage of			as:						
8	Board designated or quasi-endowm		%							
þ	Permanent endowment ▶									
C	Term endowment ▶%									
3a	Are there endowment funds not in the organization by:	e possession of the	ne organizat	ion tha	t are held ar	nd adn	ninistered for th		Yes	No
	(i) unrelated organizations							. 3a(├─
	(ii) related organizations If "Yes" to 3a(ii), are the related org							. 3a(l		├
_	If "Yes" to 3a(ii), are the related org Describe in Part XIV the intended us	anizations listed a	estion's cod	on Scr	negule H7			. <u>3b</u>	<u></u>	Щ.
4							line 10			
- (8)								40.0		
	Description of investment	(a) Cost or of			st or other s (other)	(c)	Deprecration	(d) B	oak value	
1a	Land			<u> </u>	2200		504044			
Ь	Buildings			44	3368		501044			
C	Leasehold Improvements									
d	Equipment	· ·		57	676					
	Other	equal Form 990 Pa	rt X column							
	iii / iii ca 1a- ie. (Columni (a) should t	-4-ui i 0.771 330, 1 2		- 1-/,			• • • • • • •			

SCHEDULE 1 (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Part I General Information on Grants and Assistance

COOS BAY AERIE #538 F O E

Grants and Other Assistance to Organizations,

► Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. Governments, and Individuals in the U.S.

■ Attach to Form 990.

OMB No. 1545-0047 2008

Open to Public

Employer Identification number 7593065

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Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and

2 0 Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 980, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use The serieus of the interior used to available of assistance?

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. the selection criteria used to award the grants or assistance?

((a) Marine and aridments of accompanion (b) FIN (b)	NH (4)	fel IBC saction	Histogram (of Amount of cash mant (e) Amount of monerals (f) Method of valuation (e) Description of (f) Purpose of grant	(e) Amount of non-cash	(f) Method of valuation	(a) Description of	(h) Purpose of grant
or government	•	if applicable	rf applicable cook, FMV, appraisa, assistance other)	assistance	(book, FMV, appraisal, other)	non-cash assistance	or assistance

			ons	
			01(c)(3) and government organizations	1
			2 Enter total number of section 501(c)(3) and government organizations 3 Enter total number of other organizations	

· · · 호	Her total number of section 30 (C)(3) and government organizations	iter total number of other organizations	acy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.
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Enter total number of other organizations Enter total number of other organizations For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	ם ם	iii	Ē

Cat. No. 50055P

Schedute ((Form 990) 2008

STATEMENT OF EXPENSES F	PART IX
	0050
DESCRIPTION	CRED
DONATIONS PAID LINE 1	
MR. BULLDOG NB	
SOUTH COAST DIABETES	2,5
SPECIAL OLYMPICS	
NB SWIMMING POOL FUND	2,5
RELAY FOR LIFE (CANCER)	1
OREGON STATE SHERIFF'S ASSOC.	
HABITAT FOR HUMANITY	
WP PROJECT - FIRST STEP PROGRAM	3,0
SWOYA	4
SWP PROJECT - AUTISM	Ę
SMP PROJECT - ABC HOUSE	
SWP PROJECT - OREGON FOOD BANK	
SMP PROJECT - CAMP J.A.M.	
FRIENDS OF COOS COUNTY HEALTH	;
MISCELLANEOUS DONATIONS	
TOTAL	11,9
	PAGE 1

STATEMENT OF REVEN	STATEMENT OF REVENUE - PART VIII		
DESCRIPTION	CREDIT		
LINE 1b			
DUES FROM MEMBERS	13,854.82		
FEES FROM NEW MEMBERS	760.00		
TOTAL	14,614.82		
DONATIONS LINE 1f			
MISCELLANEOUS	524.00		
HEART FUND	169:50		
WORTHY PRESIDENT PROJECT	2,871.00		
BUILDING REPAIR FUND	350.00		
SWP PROJECT - STATE FOOD BANK	1,000.00		
SMP PROJECT - CAMP J.A.M.	500.00		
SWOYA	646.00		
FRIENDS OF COOS COUNTY PUBLIC HEALTH	307.00		
TOTAL	6,367.50		
LINE 3			
BANK INTEREST	15.97		
CD INTEREST	2,874.81		
TOTAL	2,890.78		

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DESCRIPTION	CREDIT	DEBIT
INCOME	LINE 8a	LINE 8b
NSF CHECKS COLLECTED		1,630.00
ROOM USE	4,940.00	
SPECIAL EVENT/MEMBERSHIP PROMOTION	3,856.93	4,901.97
VIDEO LOTTERY	300,844.21	
VIDEO ELECT		225,754.46
KENO	50,905.00	
KENO ELECT		41,660.25
PULL TABS	1,679.54	
SCRATCH OFFS	891.00	
SCRATCH OFFS ELECT		1,011.63
LOTTERY PHONE LINES		1,260.00
SCREAMIN EAGLES (INNER CLUB)	50.00	
TURTLES CLUB (INNER CLUB)		1,500.00
POOL TABLE FUND	25.00	95.68
POPCORN	177.60	
AUX. PAY FOR COPIER & COPIES	445.00	
AUX. PAY FOR PANTRY	275.00	
ATM SURCHARGE	2,168.28	
ATM REPAIRS & SUPPLIES		365.44
BUILDING MAINTENANCE		25,535.35
MEMORIAL LUNCHEONS	1,531.90	397.60
JACKETS-PINS & MISC. SALES	504.25	852.03
TOTAL	368,293.71	304,964.41

STATEMENT OF REVENUE	STATEMENT OF REVENUE GROSS SALES		
DESCRIPTION	CREDIT	DEBIT	
INCOME	LINE 10a	LINE 10b	
. BAR RECEIPTS	289,970.85		
BAR PAYOUTS		124,809.25	
BAR SUPPLIES		9,631.35	
OLCC CLASSES		160.00	
ZOO ANIMALS	844.22		
JUKE BOX	3,545.00		
KITCHEN INCOME & SUPPLIES	50.00	2,470.90	
SOCIAL ROOM MAINTENANCE		7,591.87	
TOTAL	294,410.07	144,663.37	

LINE 5	
SECRETARY PAY	7,854.00
WAGES LINE 7	ļ
BARTENDERS	77,975.20
CUSTODIANS	9,719.43
TOTAL	87,694.63
LINE 8	
PENSIONS	331.76
LINE 10	
SAIF	2,388.97
FUTA & SUTA	2,232.29
FEDERAL PAYROLL DEPOSITS	19,431.86
STATE PAYROLL DEPOSITS	4,950.78
TOTAL	29,003.90
LINE 11g	
COOLER CONTRACT	300.00
SECURITY CONTRACT	399.00 534.00
COPIER/DUPLICATOR CONTRACT	884.25
ELEVATOR CONTRACT	97.36
TOTAL	1,914.61
LINE 12	
ADVERTISING	1,054.00
LINE 13	
OFFICE SUPPLIES	2,827.26
POSTAGE	252.00
BULLETIN EXPENSE	2,319.25
TOTAL	5,398.51

	LINE 16	
	TELEPHONE	2,321.42
	UTILITIES	27,085.93
	TOTAL	29,407.35
! 	LINE 19	
	CONVENTIONS & MEETINGS	1862.60
	LINE 21	
	GRAND PER CAPITA TAX	6508.25
	STATE PER CAPITA TAX	2789.50
•	TOTAL	9297.75
	LINE 23	
	INSURANCE	10,470.00
	LINE 24	
а	ASSOCIATION DUES/PFO	30.00
р	MUSIC	11,110.00
С	BANK CHARGES	847.23
d	OFFICERS BONDS	395.00
	TOTAL	12,382.23
е	LICENSE	
	CITY LICENSE	25.00
	CARD TABLE	120.00
	KITCHEN/FOOD HANDLERS	855.00
	LIQUOR ATF	69.00
	STATE LIQUOR	202.60
	ANNUAL PICNIC	125.00
-	CORPORATE FEES	50.00
	POSTAL BOND INSURANCE PREMIUM	180.00
	TOTAL	1,626.60

CIS2YC3VLY

	CD'S LINE 46	
	US BANK - 000353605621013	22,293.40
	US BANK - 000353605005902	27,935.37
	US BANK - 000353605005894	28,128.46
<u> </u>	US BANK - 000353605178287	22,627.32
	US BANK - 000353605858136	25,901.29
	US BANK - SCREAMIN EAGLES INNER CLUB	2,765.72
	US BANK - 53657151590 (MONEY MARKET)	25,445.57
	TOTAL	155,097.13