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Filing Relief VCP

## 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 of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990 All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 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

Department of the Treasury Internal Revenue Service

Form **990-EZ** 

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

Open to Public Inspection

_		ne 2008 calendar year, or tax year beginning JUN 1, 2008 and ending MAY	31,	2009
В	Check ı applıcal	ble Please V Name of organization	mployer	identification number
	Addre	use IRS Label or Labe		
	Name Chang	print or SOUTH DAKOTA ELKS MAJOR PROJECTS, INC.	46-6	018629
	lnitia retur	11 1000   '	relephone	number
	Term	Inetrue F • O • BOA / O /	605-	886-3523
		nded trops City or town, state or country, and ZIP + 4	Group Exe	mption
	Appli		Number <b>•</b>	•
	• Se	ction 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed G Accounting	method:	X Cash Accrual
		Schedule A (Form 990 or 990-EZ) Other (spe		
ī	Websi	· · · · · · · · · · · · · · · · · · ·		the organization is not
				dule B (Form 990, 990-EZ, or 990-PF)
	Check			
	require	ed, but if the organization chooses to file a return, be sure to file a complete return.		•
		nes 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$1,000,000 or more, file Form 990 instead of Form 990-EZ	<b>→</b> \$	86,503.
	art I	Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instruction	ons for Pa	ırt I.)
_	1	Contributions, gifts, grants, and similar amounts received	1	83,886.
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	
	4	Investment income	4	2,617.
	5a	Gross amount from sale of assets other than inventory 5a		
	h	Less: cost or other basis and sales expenses 5b		
ē		Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach schedule)	5c	
	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here	7 -**	
enr	ر ا	Gross revenue (not including \$ of contributions	_[	
Revenue	-	reported on line 1) 6a		
_	l b	Less; direct expenses other than fundraising expenses 6b		
	ے ا	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)		
	7a	Gross sales of inventory, less returns and allowances 7a		
	′°	Less; cost of goods sold 7b	=	
	ے ا	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
	8	Other revenue (describe	) 8	
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	, <u> </u>	86,503.
-	10	Grants and similar amounts paid (attach schedule)	10	76,397.
	11	Benefits paid to or for members	11	10,337.
G	12		12	
enses	13	Professional fees and other payments to independent contractors  OCT 19 2010	13	
	14	Occupancy, rent, utilities, and maintenance	14	
Exp	15	Printing, publications, postage, and shipping	15	
	16	Other expenses (describe ► See Statement 1	) 16	185.
	17	Total expenses. Add lines 10 through 16	<u> 17</u>	76,582.
_	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	9,921.
Net Assets	19	Net assets or fund balances at beginning of year (from line 27, column (A))	10	7,722
\SS.		(must agree with end-of-year figure reported on prior year's return)	19	61,163.
et/	20	Other changes in net assets or fund balances (attach explanation)	20	32,200
Ž	21	Net assets or fund balances at end of year. Combine lines 18 through 20	≥ 21	71,084.
P	art i			
		(See the instructions for Part II.)  (A) Beginning of ye		(B) End of year
2	2 Ca	sh, savings, and investments 61, 16		<del></del>
2:		nd and buildings	23	
2		her assets (describe )	24	<del>                                     </del>
2		tal assets 61,16		<del></del>
20		tal liabilities (describe	0.26	
2		et assets or fund balances (line 27 of column (B) must agree with line 21)  61,16		
	2171	LHA For Privacy Act and Paperwork Reduction Act Notice see the Instructions for Form 990		Form 990-F7 (2008)

Form 990-EZ (2008) SOUTH DAKOTA ELKS MAJOR I			46-6	<u> </u>	29 Page 2
Part III Statement of Program Service Accomplishme	<del></del>	Part III.)			penses
What is the organization's primary exempt purpose? See Statement	:_3				for 501(c)(3) ganizations and
Describe what was achieved in carrying out the organization's exempt purposes. In provided, the number of persons benefited, or other relevant information for each p		escribe the services			) trusts; optional
28 CCH&S OUTREACH PROGRAM PROVIDES SEF	RVICES TO HAND	ICAPPED			
CHILDREN IN THEIR HOME COMMUNITIES	IN SD. OVER 3	00 SERVED	_		
(Grants \$ ) If this amount includes foreign		<u> </u>		28a	30,000.
29 CHILDRENS HOME SOCIETY IS A HOME FO					
PROVIDING CONSULING, EDUCATION & CA		U IOUTH.			
(Grants \$ ) If this amount includes foreign		<u> </u>		29a	10,000.
30 SCHOLARSHIPS TO SD WINNERS OF ELKS					
VALUABLE STUDENT SCHOLARSHIPS AWARI FROM ELKS NATL FOUNDATION. 12 SCHOOL			EY		
(Grants \$ ) If this amount includes foreign		<u> </u>	<del>-</del>  ,	30a	22,000.
31 Other program services (attach schedule) See Statement			والسا.	JUA	
(Grants \$ ) If this amount includes foreign		•		31a	14,397.
32 Total program service expenses (add lines 28a through 31a)	granto, oricon noto	·		32	76,397.
Part IV List of Officers, Directors, Trustees, and Key E	mployees. List each one ev	ren if not compensated	(See the in	structions f	or Part IV)
	0 \ T 11	4.2		tributions	
(a) Name and address	(b) Title and average hours per week devoted to	(c) Compensation (If not paid, enter		nployee t plans &	(e) Expense account and
(-)	position	-0-)		ferred	other allowances
			comp	ensation	
DWIGHT POGANY	PRESIDENT	_		_	_
504 YUCCA DR, PIERRE, SD 57501	0.00	0.		0.	0.
TOM BLAIR	PRES-ELECT			^	_
4 RYAN ROAD, DEADWOOD, SD 57732	0.00	0.		0.	0.
BARCLAY ALLIBONE P.O. BOX 707, WINNER, SD 57580	SECRETARY 1.00_	0.		0.	0.
LEROY GUNDERSON	TREASURER		<del>                                     </del>		<u></u>
1205 SKYLINE DR, WATERTOWN, SD 57201	1.00_	ο.	}	0.	0.
1205 BRIDING DR, WIIDRIOWN, BB 57201	1.00		<del> </del>		
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832172 12-17-08	<u></u>	<del></del>	٠	Form	990-EZ (2008)

Pa	If V Other Information (Note the statement requirements in the instructions for Part VI)			
			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33_		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	_34		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (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 section 6033(e) notice, reporting, and proxy			
	tax requirements?	35a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b	N/	A
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Sch. N	36		X
37 a	Enter amount of political expenditures, direct or indirect, as described in the instructions.	.]		1
b	Did the organization file Form 1120-POL for this year?	37b		X
38 a	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?	38a		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b N/A			
39	Section 501(c)(7) organizations. Enter:	1		
a	Initiation fees and capital contributions included on line 9 39a N/A		1	
b	Gross receipts, included on line 9, for public use of club facilities  39b  N/A		1	
40 a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:		l	i
	section 4911 ▶ 0 . ; section 4912 ▶ ; section 4955 ▶ 0 .			
b	Section 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," complete Schedule L, Part I	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			i
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter			
	transaction? If "Yes," complete Form 8886-T	40e		X
41	List the states with which a copy of this return is filed.   None			
42 a	The books are in care of ▶ BARCLAY ALLIBONE / LEROY GUNDERSON Telephone no. ▶ 605-88			
	Located at ► BOX 707 WINNER, SD / 1205 SKYLINE WATERTOWN, SD, ZIP+4 ►	<u> 5758</u>	0-0	707
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		Yes	-
	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, Report of Foreign Bank and Financial Accounts.			
C	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c	<u> </u>	LX_
	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			Ш
	and enter the amount of tax-exempt interest received or accrued during the tax year	N/A	<u> </u>	
			-	T
			Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of			
	Form 990-EZ	44	<u> </u>	X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be			
_	completed instead of Form 990-EZ	45	L	<u> </u>
		Form 9	90-EZ	(2008)

rotal numb	er of other independent contractors each		<u> </u>	
Sign Here	Under penaltie of penalty, I declare that had examined correct, and complete Declaration of penaltie (other than Signature of officer  LEROY CUNDERSON, ST Type or print name and title	d in strum, including accompanying schedules and sin office) is based on all information of which preparer	tatements, and to the b	Date
Paid Preparer's	Preparer's signature▶	Date	Check if self- employed	Preparer's identifying Number (See instr.)
Use Only	Firm's name (or yours if self-employed), address, and 2IP + 4			Phone no.
May the IR	S discuss this return with the preparer shown above	ve? See instructions		► X Yes No Form 990-EZ (2008)

## SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

**Public Charity Status and Public Support** 

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

pen to Public Inspection

Schedule A (Form 990 or 990-EZ) 2008

Name of the organization

Employer identification number

			JAKUTA ELKS M				INC.		4	<u>9-60T8</u>	629	
Part I	Reason	for Public Char	rity Status (All organiz	zations mu	st complet	te this par	t.) (see ins	tructions)				
he orga	nization is not a	a private foundation	because it is (Please ch	neck only o	ne organiz	zation)						
1 🔲	A church, co	nvention of churche	s, or association of chur	ches desc	ribed in se	ction 170	(b)(1)(A)(i)	١.				
2 🗀			70(b)(1)(A)(ii). (Attach Sc									
з 🔲	A hospital or	a cooperative hosp	ital service organization	described	n section	170(b)(1)	(A)(iii). (At	tach Sche	edule H.)			
4			operated in conjunction							he hospital	's nam	ie.
	city, and stat		, , , ,					(-)(·)(·	,	, o noopha		,
5 🔲			benefit of a college or un	niversity o	wned or or	nerated by	a governi	mental un	ıt describ	ed in		
·		(b)(1)(A)(iv). (Compl				ocialoa o,	a goronn	incina an	it describ	JU 111		
6			ent or governmental uni	ıt describe	d in coetic	n 470(h)/:	4\/A\/\					
7 🗔								u fuam tha		ماطير		_
′ ⊔			ceives a substantial part	or its supp	ort from a	governme	entai unit c	or from the	generai į	oublic desc	nbea i	n
. —		(b)(1)(A)(vi). (Comple	•	<b>10</b> 1 - 1 -	D- 4 II X							
8 🖳			section 170(b)(1)(A)(vi).									
9 LXJ			eives. (1) more than 33							-	-	
			nctions - subject to certa							_		
			axable income (less sec	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	anization a	after June 3	10, 197	5.
		509(a)(2). (Complete										
10 ⊣			perated exclusively to te						-			
11 📖			perated exclusively for the									or
			ations described in secti				2). See sec	ction 509(	a)(3). Che	ck the box	that	
			organization and compl	_	-					,		
	a L Type		• •		e III - Func	•	-		d L	Type III - (		
e			at the organization is not									n
	foundation m	nanagers and other t	han one or more publicly	y supporte	d organiza	itions des	cribed in s	ection 50	9(a)(1) or :	section 509	(a)(2)	
f	If the organiz	ation received a writ	tten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				
	supporting o	rganızatıon, check tl	his box									
g	Since Augus	t 17, 2006, has the o	organization accepted ar	ny gift or c	ontribution	from any	of the following	owing per	sons?			_
	(i) A perso	n who directly or ind	firectly controls, either al	lone or tog	ether with	persons o	lescribed	ın (ıi) and (	(ııi) below,		Yes	No
	the gov	eming body of the s	upported organization?							11g(i)		
	(ii) A family	member of a perso	n descnbed in (i) above?	•						11g(ii)		
	(iii) A 35% (	controlled entity of a	person described in (i) o	or (ii) above	e?					11g(iii)		
h	Provide the f	ollowing information	about the organizations	the organ	ization sur	ports						
		-	-	-		•						
(i) Nam	e of supported	(ii) EIN	(iii) Type of	(iv) Is the c	organization	(v) Did voi	u notify the	(vi) Is	s the	(will Am		
	anization	(11) 5.114	organization	in col. (i) lis	sted in your	organizat	ion in col.	l organizáti	on in col. I	(vii) An	port	ı
6	,		(described on lines 1-9 above or IRC section	governing	document?	(i) of you	support?	(i) organız U.S	.?	Jup	port	
			(see instructions))	Yes	No	Yes	No	Yes	No			
				<u> </u>		_						
				T				<u> </u>				
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		-		<del> </del> -								
otal												

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule A (Form 990 or 990 EZ) 2008			·			Page 2
Part II Support Schedule for				)(b)(1)(A)(iv) an	id 170(b)(1)(A)(\	/i)
(Complete only if you checke	d the box on line 5	5, 7, or 8 of Part I.				
Section A. Public Support				···		
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<ol> <li>Gifts, grants, contributions, and</li> </ol>						
membership fees received. (Do not						
include any "unusual grants.")						
2 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
3 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge			<u> </u>			
4 Total. Add lines 1 · 3						
5 The portion of total contributions						
by each person (other than a						
governmental unit or publicly						
supported organization) included						
on line 1 that exceeds 2% of the	1	ļ				
amount shown on line 11,						
column (f)						
6 Public Support. Subtract line 5 from line 4			1	<u> </u>	<u>l</u>	<u> </u>
Section B. Total Support	1	ı		· · · · · · · · · · · · · · · · · · ·	<del>'''                                  </del>	
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4						
8 Gross income from interest,						
dividends, payments received on						
securities loans, rents, royalties						
and income from similar sources						
9 Net income from unrelated business						
activities, whether or not the				'		
business is regularly carried on .						
10 Other income. Do not include gain						
or loss from the sale of capital	ļ					
assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10				l	ļ	
12 Gross receipts from related activities		,			12	<del> </del>
13 First five years. If the Form 990 is fo		s first, second, the	rd, fourth, or fifth t	ax year as a section	on 501(c)(3)	. —
organization, check this box and sto Section C. Computation of Pub	p here lic Support De	rcentage				
		<del></del>				
14 Public support percentage for 2008 (	• • • • • • • • • • • • • • • • • • • •	• •	column (t))		14	%
15 Public support percentage from 200		•			15	<u>%</u>
16a 33 1/3% support test - 2008. If the				14 IS 33 1/3% OF I	more, check this bo	x and
stop here. The organization qualifies		-	•			. ▶∟
b 33 1/3% support test - 2007. If the				15 IS 33 1/39	6 or more, cneck tr	is box
and stop here. The organization qua	•		•• •	. 10 10 105		▶∟
17a 10% -facts-and-circumstances tes						
and if the organization meets the "facts and circumstances"					iri iv now the organ	ization
meets the "facts-and-circumstances"	_	•		•		•
b 10% -facts-and-circumstances tes						
more, and if the organization meets t						,
organization meets the "facts-and-cir				-	•	▶
18 Private foundation. If the organization	and not check a	DON OH WIE TO, 16	va, 100, 174, 01 17		and see instruction edule A (Form 990	

46-6018629 Page 3 Schedule A (Form 990 or 990-EZ) 2008 SOUTH DAKOTA ELKS MAJOR PROJECTS, INC. Part III | Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006(d) 2007 (e) 2008 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not 74,364 81,236 75,144. 83,886. 396,045. include any "unusual grants.") 81,415 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 74,364. 81,236. 75,144. 81,415. 83,886. 396,045. 6 Total. Add lines 1 - 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 c Add lines 7a and 7b 396,045. 8 Public support (Subtract line 7c from line 6) Section B. Total Support (d) 2007 (c) 2006 (e) 2008 Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (f) Total <u>81,415</u> 74,364 9 Amounts from line 6 81,236 75,144 83,886. 396,045. 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties 611 698 2,092 3,188 2,616 9,205. and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 611 698. 2,092. 3,188. 2,616. 9,205. c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b. whether or not the business is regularly carned on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 405 250. Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 97.73 15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) 15 % 16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g 98.68 16 % Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) 2.27 % 17 18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h 18 % 19a 33 1/3% support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicity supported organization **▶** X b 33 1/3% support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Form 990-EZ	Other Expenses	Statement	1
Description		Amount	
SD SEC OF STATE ANNUAL SCHOLARSHIP WINNERS REC	FILING FEE OGNITION PLAQUES /COMMITTEE EXPENSE		10. 75.
Total to Form 990-EZ, 1	ine 16	1	85.

FO:	RM 990-EZ	Information Regarding Transfers Associated with Personal Benefit Contracts	Statement	2
A)	directly or	ganization, during the year, receive any funds, indirectly, to pay premiums on a personal atract?	[ ] Yes [X]	No
В)		ganization, during the year, pay premiums, indirectly, on a personal benefit contract?.	. [ ] Yes [X]	No

990-EZ Pg 2

Statement

3

PROVIDE FUNDING FOR ASSISTANCE TO HANDICAPPED CHILDREN IN SD, FUNDING FOR VARIOUS YOUTH ACTIVITIES, AND SCHOLARSHIPS FOR SOUTH DAKOTA YOUTH.

Form 990-EZ	Other Program Services	St	catement 4
Description		Grants	Expenses
	OGRAM PROVIDES INFORMATION, ORT THROUGHOUT SOUTH DAKOTA COUTH.	0.	6,197.
ELKS HOOP SHOOT FREE-TH YOUTH INVOLVING OVER 15	ROW CONTEST FOR SOUTH DAKOTA	0.	7,000.
DONATIONS TO ACTIVITY F SOUTH DAKOTA.	TUNDS AT VET ADMIN HOSPITALS IN	0.	1,200.
Total to Form 990-EZ, 1	ine 31		14,397.