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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)

2008

OMB No 1545-0047

			the Treasury ue Service		The organization may have to use	a a conv of thic	rotum to co	tichu etate re	norting roat	uiremente	, ,	inspection
					The organization may have to use or tax year beginning	a copy of this		, 2008, and			5-31 ,	
			applicable	Please	C Name of organization FRATERNAL	OPDED OF		, 2000, 4110	chang		T	ver identification no.
			* *	use IRS			CAUDAA				1	
	_	ddress (-	label or print or	Doing Business As AERIE 208				—т_		93-03	
		ame ch	-	type.	Number and street (or P O box if mail is	not delivered to str	eet address)		Room	/suite	E Telepho	
	=	ıtıal retu		See Specific	2771 PENCE LOOP SE					·	(503)362-3212	
ļ	_	eminali		Instruc-	City or town, state or country, and ZIP +	4					G Gross r	
	_	mended		trons.	Salem, OR 97302						<u> </u>	319,487
	LJ A	pplication	on pending	ĺ	and address of principal officer LAURE				H(a)	Is this a group re	atum for	
					PENCE LOOP SE, Salem,	OR 97302			``	Is this a group re affiliates?		∐ Yes ⊠ No
				X 501(c) (10) ◀ (insert no) ☐ 4947(a)(1) or 527	<u>'</u>		H(b)	Are all affiliates if "No," attach a		Yes No
	1 W	ebsite:	► N/A						H(c)	Group exemption	n number	<u> </u>
1			rganization	Corporation	Trust X Association Other	<u> </u>	L Ye	ar of formation	2008	■ State of legs	al domicile	OR
	Par	11	Summar									
		1	Briefly descr	ibe the or	ganızation's mission or most signific	ant activities.	COM	MUNITY E	NT FOR	MEMBERS		
į	ĜG	ļ										
	v											
1	V e	2	Check this b	ox ▶ 🔲 ı	the organization discontinued its o	perations or di	PRIPE ENT	are Have Hall	PERSEPTE	CE		
1	'n	3	Number of ve	oting mem	bers of the governing body (Part V	l, line 1a)	SB/SE-	COMPLIA	NCE FIEL	₽. \. 3		8
	e n	4	Number of in	depender	t voting members of the governing	hody (Part VI	ine 1h)			1 . 4		8
:	5 C	5	Total number	r of emplo	vees (Part V. line 2a)		L U	JN 1.6.	2010 :	<i>≔.</i> ↓. 5		0
	e B	6	Total number	r of volunt	eers (estimate if necessary)			TEDO	TOP100	6		20
		7a	Total gross u	inrelated b	usiness revenue from Part VIII. line	e 12 column (C	AREA	12 LEHH	FROM:]. 7a		147,498
_		b	Net unrelated	d husines	taxable income from Form 990-T,	line 34	3/	ALEM, ON	EOOIA.	71		0
u		Ť	THE BITTERE	J Duoi los	taxable modific from 1 offit 650 1,	11110 0 7 1 1 1				ior Year		rrent Year
O	R	8	Contributions	and aran	ts (Part VIII, line 1h)					5,77		25,382
V	e V	9		_	ue (Part VIII, line 2g)					7,69		
Ö	e		-		- -					7,03		63,873
	ü	10			irt VIII, column (A), lines 3, 4, and 7					115 50		11
5	e	11		•	II, column (A), lines 5, 6d, 8c, 9c, 1	•				115,59		156,499
P .		12			es 8 through 11 (must equal Part V					129,05	8	245,765
W		13			ounts paid (Part IX, column (A), line	•					 -	0
	E	14	•		nembers (Part IX, column (A), line	-		• • • • •				0
\sim	X p	15	Salaries, other	er comper	sation, employee benefits (Part IX,	column (A), lir	nes 5-10)	• • • • • •		27,81	4	46,779
	é	16a	Professional	fundraisin	g fees (Part IX, column (A), line 11	e)						0
	n S	b	Total fundras	sing exper	ises (Part IX, column (D), line 25)	-		0				
	e	17	Other expens	ses (Part I	X, column (A), lines 11a-11d, 11f-2	4f)				106,97	4	180,548
	8	18	Total expens	es. Add li	nes 13-17 (must equal Part IX, colu	ımn (A), line 25	5)			134,78	8	227,327
		19	Revenue less	s expense	s. Subtract line 18 from line 12 .	<u> </u>				(5,73	(0)	18,438
ī	Vet .								Beginn	ing of Year	E	nd of Year
	Assets or	20	Total assets	(Part X, lır	ne 16)					19,93	6	40,980
F	und	21	Total liabilitie	•	·					1,63		4,239
	Bal- inces	22			inces Subtract line 21 from line 20					18,30		36,741
-	Parl		Signatur								-	
Ł	- 141 1	7.7.1	Under penaltie	s of penury,	declare that I have examined this return, inc	luding accompany	ng schedules a	nd statements, a	and to the best	of my knowledg	e	
	_		and belief, it is	POB COTTECT	, and complete Declaration of preparer (othe	r than officer) is ba	sed on all inform	nation of which p	oreparer has a	ny knowledge		
	8		• // (1/0						1//	6-1	Y-10
	Sian		Signature	e of officer	an Jacoba						ate	<u>/ </u>
ě	10.0		Signature		ia Greiner	Aerie	7.	ecre	100.			
ŧ	igi c	i		500		HELLE		C Chee	THICY	/		
=	Sign Fere		*Type or t	onnt name ar	lo title		Tour 2	4 - 12		Brangers	1116 -1	
=	ร		Preparer's			PA	Date 6/9/	Che self	eckit I	(see instruct	lentifying nun ادمان کا (lons	iber
F	aid		signature	15	and of 10 mosting	['0		em	ployed 🕨 🗀]]	700	351562
ŭ	гера	rer's	Firm's name (o	or yours	Robert L Armstrong	PC			EIN	•		
2	repa Jse O	nly	if self-employe	:d),	930 13th St. SE							0812
- C			address, and 2		Salem, OR 97302			··-	Phone no	▶ 503-3	78-1463	
					the preparer shown above? (see			<u></u>			🖸	Yes 🔀 No
					eduction Act Notice, see the se		tions.		<u> </u>	EEA		Form 990 (2008)
		•	•									^ A
												= 20
												0

	1 490 (2008) FRATERNAL ORDER OF EAGLES		93-0312668	Page 4
Pal	rt III Statement of Program Service Acco	omplishments (see instructions)		
1	Briefly describe the organization's mission.			
	COMMUNITY ENT FOR MEMBERS			
			<u> </u>	
				
2	Did the organization undertake any significant program s		_	_
	the prior Form 990 or 990-EZ?			X No
	If "Yes," describe these new services on Schedule O.			
3	Did the organization cease conducting, or make significa-			
	services?			X No
	If "Yes," describe these changes on Schedule O.			
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			
	allocations to others, the total expenses, and revenue, if	any, for each program service reported.		
	·			
4a	(Code) (Expenses \$ 220,2	251 including grants of \$) (Revenue \$)
	PROVIDE COMMUNITY ENT FOR MEMBERS			
				
				
				
41			\ \(\sigma_{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tinx{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tinx{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tinx{\tiny{\tinit}\xint{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\ti}\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tinit}\xi\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tinit}\\ \text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tinit}\xi\tinithtt{\text{\text{\text{\text{\text{\tin}\tint{\text{\text{\ti}\tint{\text{\text{\text{\texi}\tint{\text{\texitil{\text{\tinit}\xi}\\\ \tint{\text{\tinithter{\texi}\text{\text{\texi}\tint{\tinithter{\text{\texi{\texi{\texi{\texi}\tint{\tii}\tiint{\	 -
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
				
		<u>. </u>		
				·
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
			· · · · · · · · · · · · · · · · · · ·	
				
		- 		
4.1				
4d	Other program services (Describe in Schedule O.)			
	(Expenses \$ including grants)	
4e	Total program service expenses ▶ \$ 2	20, 251 (Must equal Part IX, Line 25, column (B).)	

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)		uje D (Form 990) 2008 FRATERNAL ORDE				,		93-0312			age 2
a Public exhibition d Loan or exchange programs b Scholarly research e Other C Preservation for future generations d Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. Provide a description of the organization solicit or receive donations of art, historical treasures, or other similar assets to be soid to raise funds rather than to be maintained as part of the organization's collection? Part IV. If Tust, Escrow and Custodial Arrangements. Complete for organization an awered "Yes" to Form 990. Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not include on Form 990, Part X? 1b If "Yes," explain the arrangement in Part XIV and complete the following table. 1c Beginning balance 1e Amount 1e Additions during the year 1e 2a Did the organization include an amount on Form 990, Part X, line 21? 1e 2b Distributions during the year 1e 2c Distributions include an amount on Form 990, Part X, line 21? 1e 2d Did the organization include an amount on Form 990, Part X, line 21? 1e 2b Did the organization include an amount on Form 990, Part X, line 21? 1e 2c Did the organization include an amount on Form 990, Part X, line 21? 1e 2d Did the organization include an amount on Form 990, Part X, line 21? 1e 2d Did the organization include an amount on Form 990, Part X, line 21? 1e 2d Did the organization the arrangement in Part XIV. Part V	Pa								sets (c	ontinu	ed)
a Public exhibition d Lan or exchange programs b Scholarly research c Preservation for future generations d Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assests to be solit to risks funds rather than to be maintained as part of the organization's collection? Ves No	3	Using the organization's accession and other re	cords, check any of	the following	g that are	a significant i	use of its	collection			
b Scholarly research e Other Preservation for future generations Preservation for future generations and explain how they further the organization's exempt purpose in Part XIV. Private a description of the organization's collections and explain how they further the organization's collection? Part XIV. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assests to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Is Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Is Beginning blaince C Beginning blaince C Beginning blaince C Beginning blaince It Amount It Ending balance It I Amount It Ending balance It I Amount It Beginning of year balance It I Amount Is Beginning of year balance Is Beginning of year balance C Investment aarmings or losses G Grant sor scholarshop C Investment aarmings or losses G Grant sor scholarshop C Provide the estimated percentage of the year end balance held as: Beard designated or quals-ardowment W E Towcle the estimated percentage of the year end balance held as: Beard designated or quals-ardowment W S No It Yeas to Saloi, and the related organizations is listed as required on Schedule R? S Board designated or quals-ardowment W S No Describe in Part XIV the intended uses of the organization showered truds or other clarks Board designated or quals-ardowment M S Saloi, Sal		items (check all that apply)									
Preservation for future generations	а	Public exhibition			-						
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. Part IV Trust, Escrow and Custodial Arrangements. Complete forganization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 10. It is the organization in angent, trustee, custodian or other intermedianty for contributions or other assets not included on Form 990, Part IV and complete the following table. It is failed by the IV is a separate in Part XIV and complete the following table. It is a separate in It is a separa	Ь	Scholarly research	e 🗌 Oth	er							
Part XIV. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" to Form 990. Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is it site organization an agent, frustee, custodian or other intermediary for contributions or other assets not included or Form 990, Part X? Uses a part XIV. Beginning balance	c	Preservation for future generations									
So During the year, did the organization solicit or receive donations of ant, historical treasures, or other similar assets to be sold to mainst funds rather than to be maintained as part of the organization answered "Yes" to Form 990. Part IV	4	Provide a description of the organization's collection	ctions and explain he	ow they furt	her the org	janization's e	xempt p	urpose in			
assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Trust, Escrow and Custodial Arrangements. Complete it organization answered "Yes" to Form 990.		Part XIV.									
Part IV Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part X, line 21. Is it the organization an argent, fustee, custodial or other intermediaty for contributions or other assets not included on Form 990, Part X? Yes No if "Yes," explain the arrangement in Part XIV and complete the following table. Beginning balance 1e Amount	5								_		_
Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, frustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIV and complete the following table. C Beginning balance C Beginning of large year D Beginning of general part of the arrangement in Part XIV. Part V Endowment Funds. Complete II organization answered "Yes" to Form 990, Part IV, line 10. Beginning of year balance C Provide the arrangement in Part XIV. Beginning of year balance C Investment earnings or losses C Investment earnings or losses C Other expenditures for facilities and programs I Administrative expenses C Other expenditures for facilities and programs A Administrative expenses C Provide the estimated percentage of the year end balance held as: Beard designated or quale-indowment S Bed of year balance P Provide the estimated percentage of the year end balance held as: Beard designated or quale-indowment S C Term endowment S A Are there endowment Indias not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations B I I'Yes' to 3a(i), are the related organizations listed as required on Schedule R? Describe in Part XIV the mended uses of the organization's endowment funds Pert VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10. Describen of my are the related organizations listed as required on Schedule R? B Buildings C Leasehold improvements (a) Cost or other basis (enversions) B Buildings C Leasehold improvements D S Door other Color of the Color of the Other Color of the									<u>. U</u>	Yes	<u></u> No
Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?	Pa				lete if orga	nization ansv	vered "Y	es" to Form 990,			
Included on Form 990, Part X? b If Yes,* explain the arrangement in Part XIV and complete the following table. C Beginning balance											
b !f *Yes,* explain the arrangement in Part XIV and complete the following table. c Beginning balance	1a	Is the organization an agent, trustee, custodian	or other intermedian	for contrib	utions or o	ther assets n	ot		_		
c Beginning balance 1		included on Form 990, Part X?							. 🗆	Yes	∏ No
c Beginning balance 1c	ь	If "Yes," explain the arrangement in Part XIV an	d complete the follow	ving table.							
d Additions during the year									ount		
e Distributions during the year f Ending balance	С	Beginning balance					<u>1c</u>				
Ending balance	d	Additions during the year					<u> 1d</u>	<u> </u>			
Ending balance	е	Distributions during the year					<u>1e</u>			_	
Fact V Endowment Funds. Complete it organization answered "Yes" to Form 990, Part IV, line 10. Fact V Endowment Funds. Complete it organization answered "Yes" to Form 990, Part IV, line 10. Fact V Endowment Funds George G	f	Ending balance					<u>1f</u>				
Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10. Beginning of year balance (a) Current Year (b) Pnor Year (c) Two Years Back (d) Three Years Back (e) Four Ye	2a	Did the organization include an amount on Form	1 990, Part X, line 21	?					. 🔲	Yes	☐ No
1	Ь	If "Yes," explain the arrangement in Part XIV.									
Beginning of year balance	Pa	TV Endowment Funds. Complete	if organization answ	ered "Yes"	to Form 99	0, Part IV, lir	ne 10.				
b Contributions			(a) Current Year	(b) Pn	or Year	(c) Two Year	s Back	(d) Three Years Back	(e) Fo	ır Years	Back
c Investment earnings or losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶	1a	Beginning of year balance									
d Grants or scholarships c Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment	ь	Contributions							<u></u>	*********	
e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment	С	Investment earnings or losses									
and programs f Administrative expenses g End of year balance Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment	d	Grants or scholarships						: 	<u>, ‡</u>		
g End of year balance	е	Other expenditures for facilities							.		
g End of year balance		and programs					-1111111		<u></u>	+++++++++++	1.111111
Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment	f	Administrative expenses							<u> </u>		
Board designated or quasi-endowment Mark	9	End of year balance						_	<u></u>		
b Permanent endowment ▶	2	Provide the estimated percentage of the year er	nd balance held as:								
C Term endowment ▶	а	Board designated or quasi-endowment	%								
Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations	ь	Permanent endowment ▶ %									
organization by: (i) unrelated organizations	С	Term endowment ▶ %									
(i) unrelated organizations	За	Are there endowment funds not in the possession	on of the organizatio	n that are h	eld and ad	mınistered fo	r the				
(ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds Part VI		organization by:									No
b If "Yes" to 3a(II), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, Ime 10. Description of investment (a) Cost or other basis (investment) (investment) (b) Cost or other basis (other) 1a Land		(i) unrelated organizations						. <i></i> .			
4 Describe in Part XIV the intended uses of the organization's endowment funds Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (investment) (investme		(ii) related organizations							3a(ii)	<u> </u>
Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (b) Cost or other basis (other) (c) Depreciation (d) Book value	ь				?				_3b	J	<u></u>
Description of investment (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Depreciation (d) Book value	4	Describe in Part XIV the intended uses of the or	ganization's endowr	nent funds							
Tall Land La	Pa	1 VI Investments - Land, Build	ings, and Equi	pment.s	e Form 99	0, Part X, Im	e 10.				
b Buildings		Description of investment	1 ''				(c)	Depreciation	(d) Bo	ok value	
b Buildings	1a	Land									
c Leasehold improvements	_				1	,053,469		1,051,419		2	,050
d Equipment		•									
e Other		•				250,000		250,000			
				nn (B), line	10(c).)					2	,050

Part IV

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," X Is the organization required to complete Schedule B, Schedule of Contributors? 2 $\overline{\mathbf{x}}$ 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to X Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete 4 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) 5 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 X 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, 7 X the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," X 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," 10 10 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Х 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 X 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 14a Did the organization maintain an office, employees, or agents outside of the U.S.? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, 14b X business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any 15 organization or entity located outside the United States? If "Yes," complete Schedule F, Part II 15 X 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance X to individuals located outside the United States? If "Yes," complete Schedule F, Part III 16 X 17 17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I 18 18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II X 19 19 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III X 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 20 $\overline{\mathbf{x}}$ Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 21 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 23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete X 23 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 X 24a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c 24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction 25a Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified 25Ь 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 X 26 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 Х 27

Page 4

Form 990 (2008) FRATERNAL ORDER OF EAGLES

Part 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:			
а	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		X
Ь	Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"			
	complete Schedule L, Part IV	28b		X
С	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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	:		
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	_31		X
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		X
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	L	Х
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		Х
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		Х
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			
٠.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part	1		
	VI	37		х

Form **990** (2008)

Pa	rt V 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			
Ь				
С				
	gaming (gambling) winnings to prize winners?	1c	X	
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 0		,	
ь	· · · · · · · · · · · · · · · · · · ·	2ь	X	ĺ
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see			·
	instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by]
	this return?	3a	X	
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3ь	X	
4a	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)?	4a		х
ь	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.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	•	x
Ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity			
	Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a	_	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
-	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 \$75?	7a		х
ь	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			
	required to file Form 8282?	7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
-	benefit contract?	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
a	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		Х
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7h		х
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			ĺ
	organization, have excess business holdings at any time during the year?	8		х
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		,	
а	Did the organization make any taxable distributions under section 4966?	9a		X
ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9ь		X
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12	1		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			ĺ
11	Section 501(c)(12) organizations. Enter	1		
a	Gross income from members or shareholders			ĺ
b	Gross income from other sources (Do not net amounts due or paid to other sources against	1		ĺ
-	amounts due or received from them.)	1		
12a		12a	İ	
	# EVo I enter the amount of tay evament interest received or accrued during the year		·····	***********

Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

<u> </u>	tion A. Governing Body and Management			
	For each "Vos" response to lines 2.7h helpy, and for a Philat response to lines 2 as 0h helpy, describe the	·····	Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
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	•	Х
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		х
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a		Х
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following			
а	The governing body?	8a	x	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9a	Does the organization have local chapters, branches, or affiliates?	9a		X
Ь	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?	9Ь		
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	<u> </u>	
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		 -	
40	0 4 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	10	Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	^	
D	Are officers, directors or trustees, and key employees required to disclose annually interests that could give	12ь	х	
_	rise to conflicts?	ILD		
C	describe in Schedule O how this is done	12c	x	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:			
а	The organization's CEO, Executive Director, or top management official?	15a	•	<u>x</u>
ь	Other officers or key employees of the organization?	15b		$\frac{x}{x}$
-	Describe the process in Schedule O (see instructions)	······		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		X
Ь	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	1		
	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			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)			
	available for public inspection. Indicate how you make these available. Check all that apply.			
	Own website			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
	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 records of the			
	organization ► FRATERNAL ORDER OF EAGLES AERIE2081 (503)363-3212			

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.

(A)	(B)			_((C)			(D)	(E)	(F)
Name and Title	Average	Position (check all that apply)						Reportable	Reportable	Estimated
	hours per week	It d nri dur ise vtc iet de o u r a o	I t n r s u t s i t	Office	K e y e m p l o y e e	H c e i g m p h p l e e o y t s e t e d	F o r m e	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
JAMES PENFOLD										
PRESIDENT	3			X				. 0	0	0
CARLA S O NEAL										
SECRETARY	3	<u> </u>		X				0	0	
IRVIN REINHARD				1		1				
TRUSTEE	3	X					L	0	0	
ED DAVIS						ľ				
TRUSTEE	3	X				L		0	0	
MAX JONES										
TRUSTEE	3	X		L_				0	0	
MERLIN DOBSON										
TRUSTEE	3	X						0	0	
CLARA MILLER										
TRUSTEE	3	X				ļ		0	0	
LOUISE JONES		1								
TRUSTEE	3	X	Щ					0	0	
ROBERT DANKENBRING										
PAST PRESIDENT	3	X						0	0	
		ļ								

, Edini	(A) Name and title	(B) Average hours	Position apply)	on (ch	(C)				(D) Reportable compensation	(E) Reportable compensation	1	(F) Estimate amount o	
		per week	I t d nri dur se v t c de o de o l	n r u s t e e	c	e m y P I	H cemployeesated	r m	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)		other ompensa from the organiza and relation	ne ation ated
									·				
						-							
-													
		-											_
1b	Total			• •		• •		•	0	0			0
2	Total number of individuals (including those in 1a) who organization ▶	received mo	re thar	\$1 (00,0	00 ın	repor	table	compensation fro	m the			0
3	Did the organization list any former officer, director or t	trustee, kev e	emplov	ee.	or h	iahe	st com	pens	sated			Yes	No
	employee on line 1a? If "Yes," complete Schedule J for	such individ	ual								3		Х
4	For any individual listed on line 1a, is the sum of reportative organization and related organizations greater than	\$150,000?	f "Yes,	" co	mple	ete S	chedu	le J f	for such				
5	Individual	pensation fro	m any	unr	elate	d or	ganiza	tion	for		4		X
Se	services rendered to the organization? If "Yes," complection B. Independent Contractors	te Schedule	J for s	uch	pers	on	• •	· · ·			5		Х
1	Complete this table for your five highest compensated i compensation from the organization.	ndependent	contra	ctor	s tha	t rec	erved	more	e than \$100,000 of				
	(A)								(B)			(C)	
	Name and business address								Description of se	rvices	Compe	ensation	
									ļ				
2	Total number of independent contractors (including the	se in 1) who	receive	ed m	nore	than	\$100,	,000	ın				

713200

EEA

b OREGON STATE LOTTERY

e Total. Add lines 11a-11d

12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c,

9c, 10c, and 11e

C

147,487

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). Do not include amounts reported on lines 6b. (A) Total expenses (B) (C) Management and W) Program service Fundralsing 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 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 Compensation of current officers, directors, 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages 40,998 36,540 4,458 8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) Q 10 5,781 5,781 11 Fees for services (non-employees). а Legal...... Lobbying Professional fundraising services. See Part IV, line 17 . е f g 12 13 1,818 1,818 14 15 16 34,089 34,089 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . . . 20 313 313 21 22 Depreciation, depletion, and amortization 23 17,782 17,782 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.) 707 707 EQUIPMENT REPAIR 19<u>,161</u> 19,161 **JANITORIAL** BANK CHARGES 487 487 c 7,968 7,968 BUILDING MAINTENANCE 69,395 69,395 BAND AND MUSIC 28,828 28,828 227,327 220,251 7,076 25 Total functional expenses. Add lines 1 through 24f . . n Joint Costs. Check here ▶ ☐ if following \ SOP 98-2. Complete this line only if the organization organization reported in column (B) joint costs from a combined educational campaign and

Pai	1 X	Balance Sheet	·			· ·	ugo .
نبنسنين	-3-3-1		(A)	T		B)	
			Beginning of year		End o	of year	
	1	Cash - non-interest-bearing		1		30,	
	2	Savings and temporary cash investments		2		4,	614
	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	1	5			
	6	Receivables from other disqualified persons (as defined under section					
	1	4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete		1 1			
		Part II of Schedule L	Ī	6			
A S	7	Notes and loans receivable, net		7			
s	8	Inventories for sale or use	5,102	8		4,	227
e	9	Prepaid expenses and deferred charges		9			
s	10a	Land, buildings, and equipment: cost basis 10a 1,303,469				********	
	Ь	Less: accumulated depreciation. Complete	1	1 1			
	1	Part VI of Schedule D	2,050	10c		2,6	050
	11	Investments - publicly traded securities		11			
	12	Investments - other securities. See Part IV, line 11		12			
	13	Investments - program-related. See Part IV, line 11		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equal line 34)		16		40,	980
	17	Accounts payable and accrued expenses		17			
	18	Grants payable		18			
L	19	Deferred revenue		19			
i	20	Tax-exempt bond liabilities		20		_	
a b	21	Escrow account liability. Complete Part IV of Schedule D		21			
į	22	Payables to current and former officers, directors, trustees, key			·		
ŀ		employees, highest compensated employees, and disqualified					
ŧ		persons. Complete Part II of Schedule L		22	•		•
i e	23	Secured mortgages and notes payable to unrelated third parties		23		4,:	239
S	24	Unsecured notes and loans payable		24			
	25	Other liabilities. Complete Part X of Schedule D		25			
	26	Total fiabilities. Add lines 17 through 25		26		4,3	239
		Organizations that follow SFAS 117, check here ▶ 🗓 and			······································		
NF	ļ	complete lines 27 through 29, and lines 33 and 34.					
e u	27	Unrestricted net assets	18,303	27		36,7	741
t n	28	Temporarily restricted net assets		28			
ΑŬ	29	Permanently restricted net assets		29			
s B	1	Organizations that do not follow SFAS 117, check here >					
sa el	ĺ	and complete lines 30 through 34.					
t a	30	Capital stock or trust principal, or current funds		30			
s n c	31	Paid-in or capital surplus, or land, building, or equipment fund		31			
о е	32	Retained earnings, endowment, accumulated income, or other funds		32			
rs	33	Total net assets or fund balances	18,303	33		36,7	741
	34	Total liabilities and net assets/fund balances	19,936	34		40,9	
Par	XI	Financial Statements and Reporting	<u> </u>				
						Yes	No
1	Accoun	iting method used to prepare the Form 990 🔯 Cash 🔲 Accrual 🔲 Oth	er				
2a		ne organization's financial statements compiled or reviewed by an independent accounta	int?		. 2a		X
ь		ne organization's financial statements audited by an independent accountant?			. 2b		X
c		to lines 2a or 2b, does the organization have a committee that assumes responsibility for	or oversight of				
		it, review, or compilation of its financial statements and selection of an independent account			. 2c		
		sult of a federal award, was the organization required to undergo an audit or audits as se					
		gle Audit Act and OMB Circular A-133?			. 3a		X
	-	did the organization undergo the required audit or audits?	<u> </u>		. Зь	L	

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization Employer identification number FRATERNAL ORDER OF EAGLES 93-0312668 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (b) Funds and other accounts (a) Donor advised funds 1 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space 2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Year ь C Number of conservation easements on a certified historic structure included in (a) 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year > \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8 If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:

	(b) Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests	•	
Nenc		·····
TONC		
	-	
otal. (Column (b) should equal Form 990, Part X, col (B) line 12)		
Part VIII Investments - Program Related.	See Form 990, Part X, line 13.	
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
None		
		······································
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets. See Form 990, Part X, lin		
) Description	(b) Book value
No ne		
Total. (Column (b) should equal Form 990, Part X, col (B) line 15)		
rotal. (Column (b) should equal Form 990, Part X, col (B) line 15)		
Part X Other Liabilities. See Form 990, Part X, (a) Description of liability	line 25.	
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Part X Other Liabilities. See Form 990, Part X, (a) Description of liability Federal Income taxes	line 25. (b) Amount	

Sched	ule D (Form 990) 2008 FRATERNAL ORDER OF EAGLES	93-0312668	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statement	s	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net). Add lines 4-8	9	
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	
Pa	Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Return	
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments	_	
ь	Donated services and use of facilities		
c	Recoveries of prior year grants		
ď	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
ь	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	5	
Pa	Reconciliation of Expenses per Audited Financial Statements With Expenses	per Return	
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments	7	
С	Losses reported on Form 990, Part IX, line 25	7	
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
	Other (Describe in Part XIV)	7	
	Add lines 4a and 4b	─ 4c	
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	5	
	1 XIV Supplemental Information		
	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b		
	th; Part V, line 4; Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b.		
<u> </u>			

	Federal Supporting Statemer	nts	2008 PG01
me(s) as shown on return RATERNAL ORDER OF	'EAGLES		93-0312668
	990-T, Schedule A, Line 4 Other Costs	b	Statement # 10
escription REGON LOTTERY LLOCATED COSTS			<u>Amount</u> \$105,056 \$45,465
		Total	\$150,521

990 Overflow Statement Page 1 Name(s) as shown on return FRATERNAL ORDER OF EAGLES 93-0312668

OFFICE EXPENSE

Description	Amount	
SUPPLIES	\$	1,818
Total:	\$	1,818

OCCUPANCY

Description	Amount	
FIRE SERVICE	\$	433
GAS & ELECTRIC		25,133
TELEVISION		23
TRASH		1,760
WATER & SEWER		3,456
TELEPHONE		2,856
INTERNET		428
Total:	\$	34,089