

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-EZ**

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)

Sponsoning 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 \$5.00,000 and total assets less than \$1,250,000 at the end of the year may use this form.

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

OMB No 1545-1150 2009

Department of the Treasury Internal Revenue Service

Open to Public Inspection

_				₹ 31	L ,	2010
	Check (applicat	ole Please		D Empl	oyer i	identification number
	Addre Chang	ss use IRS tabel or	BENEVOLENT & PROTECTIVE ORDER OF BPOE,			
	Name	lonnt or	IOWA	42	2-0	713808
	Initia	type	Number and street (or P O box, if mail is not delivered to street address) Room/suite	_		number
F	Term	ıın- Specific	1956 GENEVA HILLS ROAD)858-9012
\vdash	ated Ame	Instruc- nded tions	04 - 4 - 4 - 4 - 7 - 7			emption
\vdash	retur Applij pendi	n zation	MUSCATINE, IA 52761		-	
					ber 🕨	X Cash Accrual
	- 36		A			Accidal
. ,	Mahai	te: ► N/	0			
						the organization is not
						dule B (Form 990, 990-EZ, or 990-PF)
K '	Check		the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not		nan \$2	25,000 A Form 990-EZ or
			orm 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.	ırn		
<u> </u>	Add Iir	ies 56, 66, ai	nd 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ		<u> </u>	
P	art I		nue, Expenses, and Changes in Net Assets or Fund Balances (See the instru	ctions 1	or Pa	rt I)
	1		ons, gifts, grants, and similar amounts received	L	1	
	2	Program se	ervice revenue including government fees and contracts	. L	2	
	3	Membersh	up dues and assessments	L	3	26,031.
	4	Investment	t income	L	4	4,663.
	5a	Gross amo	ount from sale of assets other than inventory 5a			
	b	Less cost	or other basis and sales expenses 5b			
	C	Gain or (los	ss) from sale of assets other than inventory (Subtract line 5b from line 5a)	-	5¢	
ne	6	Special eve	ents and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here			
evenue	a		enue (not including \$ of contributions			
è	1	reported or	n line 1) 6, 06	57.		
_	ь	•	ct expenses other than fundraising expenses 6b 9,77	73.		
	C		e or (loss) from special events and activities (Subtract line 6b from line 6a)		6c	-3,706.
	7a		s of inventory, less returns and allowances	-	00	37,00.
	b		of goods sold 7b	\dashv		
	C		fit or (loss) from sales of inventory (Subtract line 7b from line 7a)	-	7-	
	8			3 1	7c	22 222
	9			<u>`</u> .'	8_	32,223. 59,211.
_	10		nue Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8		9	39,211.
	11		d similar amounts paid (attach pehedyte) VED	- 1	10	
	1	Colorino et	ther compensation and employee benefits all fees and other payments to (notepe) denticontractors in	-	11_	7 5 2 6
penses	12	Salaries, of	ther compensation and employee benefits		12	7,536.
ĕ	13	Protession	al rees and other payments to independent contractors of	- }	13	84.
ă	14	Оссирансу	y, rent, utilities, and maintenance	-	14	15 460
	15	Printing, pi	ublications, postage, and shaped DEN, UT serses (describe > OGDEN, UT SEE STATEMENT	-	15_	15,463.
	16		022 011121121	<u>L</u>)	16	27,884.
_	17		enses Add lines 10 through 16	•	17	50,967.
S	18		(deficit) for the year (Subtract line 17 from line 9)	-	18	8,244.
Se	19		or fund balances at beginning of year (from line 27, column (A))			
Net Assets	1		ee with end-of-year figure reported on prior year's return)	.	19	211,369.
Š	20		nges in net assets or fund balances (attach explanation) SEE STATEMENT	։	20	15,280.
-	21		or fund balances at end of year. Combine lines 18 through 20	<u> </u>	21	234,893.
P	art I	Balan	nce Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Fo		-EZ	
			(See the instructions for Part II) (A) Beginning of		<u> </u>	(B) End of year
22			and investments 10,5	985	_	17,419.
23		nd and buildi	· · · · · · · · · · · · · · · · · · ·		23	
24		ner assets (d				217,474.
25		tal assets	223,2			
26			s (describe ► DUE TO CHARITABLE TRUST) 11,9			
27	Ne	t assets or fo	lund balances (line 27 of column (B) must agree with line 21)	369	. 27	
932	171 08-10	LHA F	or Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.			Form 990-EZ (2009)

BENEVOLENT & PROTECTIVE ORDER OF BPOE,

Foti	n 990-EŽ (2009) IOWA	•		42-	07138	08 Page 2
P:	art III Statement of Program Service Accomplishmen	its (See the instructions for	Part III)		Ex	penses
Wh	at is the organization's primary exempt purpose? SEE STATEMENT	6				section 501(c)(3)
Des	scribe what was achieved in carrying out the organization's exempt purp	ooses. In a clear and conci	se manner, descri	be	l.	organizations and (a)(1) trusts, optional
	services provided, the number of persons benefited, and other relevant				for others)	(4) Tuusts, optional
28	IOWA AND GRAND LODGE RITUAL-TO ENHA	NCE THE PRINC	IPLES OF			
	ELKDOM.					
	(Grants \$) If this amount includes foreign g	rants, check here			28a	
29	ELEVENTH HOUR PUBLICATION-VENUE FOR	EDITORIALS A	ND			
	ARTICLES COVERING ELKDOM PRINCIPLE	S AND CHARITA	BLE EVENT	S		
	IN WHICH THE ELK'S ASSOCIATION ARE	INVOLVED.				
	(Grants \$) If this amount includes foreign g	rants, check here	>		29a	
30	A PORTION OF THE MANAGEMENT AND COM	MITTEEMAN EXP	ENSES WER	E		
	FOR PROMOTING MEMBERSHIP AND PROVI	DE MGMT FOR	THE		1 1	
	ORGANIZATIONS NEWSLETTERS TO MEMBER	S.				
	(Grants \$) If this amount includes foreign g	rants, check here			30a	
31	Other program services (attach schedule)					
	(Grants \$) If this amount includes foreign g	rants, check here	>		31a	
32	Total program service expenses (add lines 28a through 31a)			▶	32	
P	art IV List of Officers, Directors, Trustees, and Key E	mployees. List each one ev	en if not compensated	(See the	instructions f	or Part IV)
		(h) 7.0	4.10		ontributions	(-) 5
	(a) Name and address	(b) Title and average hours per week devoted to	(c) Compensation (If not paid, enter		employee	(e) Expense account and
	(4) 110.110 0110 000000	position	-0)		efit plans & leferred	other allowances
		P	,		pensation	
NI	EIL CROSSLAND, 807 E BROADWAY AVE,	PRESIDENT			<u> </u>	
F	AIRFIELD, IA 52556	1.00	0.		0.	0.
L	ESLIE FISTER	PRESIDENT-ELE	CT			
	14 S ELM ST, JEFFERSON, IA 50129	1.00	0.		0.	0.
D	AVID STARKWEATHER, 1956 GENEVA	SECRETARY				
H	ILLS ROAD, MUSCATINE, IA 52761	1.00	4,000.		0.	0.
J	ERRY LONG	TREASURER				
1	501 BROADWAY PLACE, ELDORA, IA 50627	1.00	3,000.		0.	0.
S	TEVE SMITH	TRUSTEE				
3	615 DUPONT ST, SIOUX CITY, IA 51104	0.00	0.		0.	0.
R	ON RODEMEYER, 6917 WATERVIEW DR SW,	TRUSTEE				
C:	EDAR RAPIDS, IA 52404	0.00	0.		0.	0.
J	OHN OCHANPAUGH, 3015 JOHN PATTERSOB	TRUSTEE				
	D, DES MOINES, IA 50317	0.00	0.	<u> </u>	0.	0 .
A	RT KLEIN, 1411 JEFFERSON STREET,	TRUSTEE				
В	URLINGTON, IA 52601	0.00	0.		0.	0.
C.	LIFF SAID	VICE-PRES.				
	402 WOODLAND DR, JEFFERSON, IA 50129		0.		0.	0.
	AMES MATHIS	VICE-PRES.				İ
	10 SOUTH AVE, DECORAH, IA 52101	0.00	0.		0.	0
	COTT KIRSTEIN	VICE-PRES.				1
_	870 NE BERWICK DR, ANKENY, IA 50021	0.00	0.		0.	0
	ALEY FLEIG	VICE-PRES.				
3	08 IOWA AVE, FAIRFIELD, IA 52556	0.00	0.		0.	0
_						
				1_		
_				<u> </u>		-
		_				
_						
_]				
_						
_			1			

Form **990-EZ** (2009)

932172 02-08-10

T	$\triangle I \cdot I \cdot A$	
- 1	UWA	

42-0713808

_
Page
T AUR

Pa	art V Other Information (Note the statement requirements in the instructions for Part V.)			
			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	ļ	X
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34	ļ	X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not	ŀ	1	
	reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T			
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting,			
	and proxy tax requirements?	35a	1	X
	o If "Yes," has it filed a tax return on Form 990-T for this year?	35b	N/	A _
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes,"			,
	complete applicable parts of Sch. N	36	 	X
	a Enter amount of political expenditures, direct or indirect, as described in the instructions	0.		v
	b Did the organization file Form 1120-POL for this year?	37b	 	X
203	a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made	20-		Х
ь	in a prior year and still outstanding at the end of the period covered by this return? If "Yes," complete Schedule L, Part II and enter the total amount involved 38b N/A	38a	 	1
39	b If "Yes," complete Schedule L, Part II and enter the total amount involved Section 501(c)(7) organizations Enter			1
	a Initiation fees and capital contributions included on line 9 N/A	ŀ		
	37/2			
	a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under			
	section 4911 ► N/A , section 4912 ► N/A , section 4955 ► N/A			
þ	b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the			
	year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction		,	L
	has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	N/	Α
C	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers			
	or disqualified persons during the year under sections 4912, 4955, and 4958	<u> </u>		
đ	d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the			
_	organization N/F	<u>, </u>		
е	e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter	40-		x
41	transaction? If "Yes," complete Form 8886-T List the states with which a copy of this return is filed NONE	40e	1	1 A
	a The organization's books are in care of ► DAVID STARKWEATHER Telephone no ► 56	3-263-	3663	
		4 ▶ 5276		
h	b At any time during the calendar year, did the organization have an interest in or a signature or other authority	<u></u>		
_	over a financial account in a foreign country (such as a bank account, securities account, or other financial		Yes	No
	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.			
ε	c At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c	<u></u>	<u> </u>
	If "Yes," enter the name of the foreign country			
43	1	į.	•	
	and enter the amount of tax-exempt interest received or accrued during the tax year	N/I	<u> </u>	
			Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of			1
	Form 990-EZ	44		<u> </u>
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	<u> </u>	X
		Form	990-EZ	(2009)

. Form 990-EZ (2009)

IOWA

42-0713808

Par	t VI	Section 501(c)(3) organizations and section 4 organizations and section 4947(a)(1) nonexempt charitable and 51.								
46	Did the	e organization engage in direct or indirect political campaign activities	on behalf of or in opposition t	o candidates for put	olic		Yes	No		
	office?	If "Yes," complete Schedule C, Part I				46				
47	Did the	e organization engage in lobbying activities? If "Yes," complete Sch	hedule C, Part II			47				
		organization a school as described in section 170(b)(1)(A)(ii)? If "Yes	· · · · · · · · · · · · · · · · · · ·			48	<u> </u>			
		e organization make any transfers to an exempt non-charitable related	l organization?			49a	<u> </u>			
		," was the related organization a section 527 organization?	•	•		49b				
		lete this table for the organization's five highest compensated employed in 100,000 of compensation from the organization. If there is none, ente		ors, trustees and ke	/ employees) who e	ach re	cerved	more		
		(a) Name and address of each employee paid more than \$100,000 N/A	(b) Title and average hou per week devoted to position	rs (c) Compensati	(d) Contribution to employee benefit plans & deferred compensation	k a oth	e) Expe account er allov	and		
51	Comp	number of other employees paid over \$100,000 elete this table for the organization's five highest compensated indepensization. If there is none, enter "None" N/A (a) Name and address of each independent contractor paid more		ceived more than \$1			from th			
đ	Total	number of other independent contractors each receiving over \$100,00	00	>	<u> </u>					
Sign Here		Under penalties of penury declare that have examined this form, including correct and complete Dictaration of greparer (other than officer) is based on all signature of officer Oavid Stark west 1111 Type or print name and title	<u> </u>	ments, and to the best of any knowledge	of my knowledge and b	elief, it	is true,			
	arer's	Preparer's signature ► KEVIN L. BALLARD	1/2	Check if self-	Preparer's identifying i	number	(See ins	tr)		
Use (Firm's name (or yours street-employed). HOGAN — HANSEN, P.C. EIN ► 2750 FIRST AVE., NE. STE. 150						-366-8267			
May 1	the IR	S discuss this return with the preparer shown above? See instructions	S		>		/es [990-EZ	No (2009)		

DESCRIPTION	FORM 990-EZ	OTHER EXPENSES		STATEMENT 1
PRESIDENT ELECT EXPENSES 1,972. VICE-PRESIDENT EXPENSES 2,453. TRUSTEE EXPENSES 2,453. TRUSTEE EXPENSES 5,079. TREASURER EXPENSE 1,6035. TRUSTEE EXPENSE 1,404. SECRETARY EXPENSE 1,6035. TRUSTER EXPENSE 1,6035. TRUSTER EXPENSE 1,6035. TRUSTER EXPENSE 278. OFFICE EXPENSES 378. OFFICE EXPENSES 3,049. TRUSTER EXPENSE 2,378. OFFICE EXPENSES 3,049. TRUSTER EXPENSES 3,049. TRUSTER EXPENSES 2,097. TRUSTER EXPENSES 3,049. TRUSTER EXPENSES EXPENSES EXPENSES 3,049. TRUSTER EXPENSES EXPENSES EXPENSES 3,049. TRUSTER EXPENSES EXPENSES EXPENSES EXPENSES 3,049. TRUSTER EXPENSES EXPE	DESCRIPTION			AMOUNT
PRESIDENT ELECT EXPENSES 1,972. VICE-PRESIDENT EXPENSES 2,453. TRUSTEE EXPENSES 2,453. TRUSTEE EXPENSES 5,079. TREASURER EXPENSE 1,6035. TRUSTEE EXPENSE 1,404. SECRETARY EXPENSE 1,6035. TRUSTER EXPENSE 1,6035. TRUSTER EXPENSE 1,6035. TRUSTER EXPENSE 278. OFFICE EXPENSES 378. OFFICE EXPENSES 3,049. TRUSTER EXPENSE 2,378. OFFICE EXPENSES 3,049. TRUSTER EXPENSES 3,049. TRUSTER EXPENSES 2,097. TRUSTER EXPENSES 3,049. TRUSTER EXPENSES EXPENSES EXPENSES 3,049. TRUSTER EXPENSES EXPENSES EXPENSES 3,049. TRUSTER EXPENSES EXPENSES EXPENSES EXPENSES 3,049. TRUSTER EXPENSES EXPE	PRESIDENT EXPENSES			4,442.
TRUSTEE EXPENSES 5,079. TREASURER EXPENSE 1,404. SECRETARY EXPENSE 1,635. GIFT-PRESIDENT 278. OFFICER TRAINING 475. PUBLIC RELATIONS 354. DIVISION CHAIRMAN EXPENSE 2,378. OFFICE EXPENSES 3,049. INSURANCE PREMIUMS 2,097. ELK OF THE YEAR 3,223. APPOINTED OFFICERS 1,864. BUSINESS PRACTICES 3,1049. FORM 990-EZ OTHER ASSETS STATEMENT 2 DESCRIPTION BEG. OF YEAR END OF YEAR LS-US GOVT SE. 1 FUND 212,313. 182,256. LODGE SAVINGS 0. 1,196. DUE FROM CHARITABLE TRUST 0. 34,022. TOTAL TO FORM 990-EZ, LINE 24 212,313. 217,474. PORM 990-EZ OTHER REVENUE STATEMENT 3 DESCRIPTION AMOUNT ALLOCATION OF MANAGEMENT EXPENSES-IOWA ELKS ASSOCIATION CHARITABLE TRUST 31,629. MISCELLANEOUS 594.				
TREASURER EXPENSE 1,404. SECRETARY EXPENSE 1,635. GIFT-PRESIDENT 278. OFFICER TRAINING 475. DIVISION CHAIRMAN EXPENSE 2,378. OFFICE EXPENSES 3,049. INSURANCE PREMIUMS 2,207. ELK OF THE YEAR 323. APPOINTED OFFICERS 1,864. BUSINESS PRACTICES 81,864. FORM 990-EZ OTHER ASSETS STATEMENT 2 DESCRIPTION BEG. OF YEAR END OF YEAR LS-US GOVT SE. 1 FUND 212,313. 182,256. LODGE SAVINGS 0. 1,196. DUE FROM CHARITABLE TRUST 0. 34,022. TOTAL TO FORM 990-EZ, LINE 24 212,313. 217,474. DESCRIPTION STATEMENT 3 DESCRIPTION 5 212,313. 217,474. FORM 990-EZ OTHER REVENUE STATEMENT 3 DESCRIPTION 5 34,022. TOTAL TO FORM 990-EZ, LINE 24 212,313. 217,474. ALLOCATION OF MANAGEMENT EXPENSES-IOWA ELKS ASSOCIATION CHARITABLE TRUST 31,629. MISCELLANEOUS 594.	VICE-PRESIDENT EXPENSES			
SECRETARY EXPENSE 1,635. GIFT-PRESIDENT 278. OFFICER TRAINING 475. PUBLIC RELATIONS 354. DIVISION CHAIRMAN EXPENSE 2,378. OFFICE EXPENSES 3,049. INSURANCE PREMIUMS 2,097. ELK OF THE YEAR 323. APPOINTED OFFICERS 1,864. BUSINESS PRACTICES 81. TOTAL TO FORM 990-EZ, LINE 16 27,884. FORM 990-EZ OTHER ASSETS STATEMENT LS-US GOVT SE. 1 FUND 212,313. 182,256. LODGE SAVINGS 0. 1,196. DUE FROM CHARITABLE TRUST 0. 34,022. TOTAL TO FORM 990-EZ, LINE 24 212,313. 217,474. FORM 990-EZ OTHER REVENUE STATEMENT 3 DESCRIPTION AMOUNT ALLOCATION OF MANAGEMENT EXPENSES-IOWA ELKS ASSOCIATION 31,629. CHARITABLE TRUST 31,629. MISCELLANEOUS 594.				
SIFT_PRESIDENT				
OFFICER TRAINING 475. PUBLIC RELATIONS 354. DIVISION CHAIRMAN EXPENSE 2,378. OFFICE EXPENSES 3,049. INSURANCE PREMIUMS 2,097. ELK OF THE YEAR 323. APPOINTED OFFICERS 1,864. BUSINESS PRACTICES 81. TOTAL TO FORM 990-EZ, LINE 16 27,884. FORM 990-EZ OTHER ASSETS STATEMENT DESCRIPTION BEG. OF YEAR END OF YEAR LS-US GOVT SE. 1 FUND 212,313. 182,256. LODGE SAVINGS 0. 1,196. DUE FROM CHARITABLE TRUST 0. 34,022. TOTAL TO FORM 990-EZ, LINE 24 212,313. 217,474. FORM 990-EZ OTHER REVENUE STATEMENT 3 DESCRIPTION AMOUNT ALLOCATION OF MANAGEMENT EXPENSES-IOWA ELKS ASSOCIATION AMOUNT ALLOCATION OF MANAGEMENT EXPENSES-IOWA ELKS ASSOCIATION 31,629. MISCELLANEOUS 594.				
PUBLIC RELATIONS 354. DIVISION CHAIRMAN EXPENSE 2,378. OFFICE EXPENSES 3,049. INSURANCE PREMIUMS 2,097. ELK OF THE YEAR 323. APPOINTED OFFICERS 1,864. BUSINESS PRACTICES 81. TOTAL TO FORM 990-EZ, LINE 16 27,884. FORM 990-EZ OTHER ASSETS STATEMENT LS-US GOVT SE. 1 FUND 212,313. 182,256. LODGE SAVINGS 0. 1,196. DUE FROM CHARITABLE TRUST 0. 34,022. TOTAL TO FORM 990-EZ, LINE 24 212,313. 217,474. FORM 990-EZ OTHER REVENUE STATEMENT 3 DESCRIPTION AMOUNT ALLOCATION OF MANAGEMENT EXPENSES-IOWA ELKS ASSOCIATION CHARITABLE TRUST MISCELLANEOUS 31,629. MISCELLANEOUS 594.				
DIVISION CHAIRMAN EXPENSE 2,378. OFFICE EXPENSES 3,049. INSURANCE PREMIUMS 2,097. ELK OF THE YEAR 323. APPOINTED OFFICERS 1,864. BUSINESS PRACTICES 81. TOTAL TO FORM 990-EZ, LINE 16 27,884. FORM 990-EZ OTHER ASSETS STATEMENT 2 DESCRIPTION BEG. OF YEAR END OF YEAR LS-US GOVT SE. 1 FUND 212,313. 182,256. LODGE SAVINGS 0. 1,196. DUE FROM CHARITABLE TRUST 0. 34,022. TOTAL TO FORM 990-EZ, LINE 24 212,313. 217,474. DESCRIPTION STATEMENT 3 DESCRIPTION STATEMENT 3 ALLOCATION OF MANAGEMENT EXPENSES—IOWA ELKS ASSOCIATION CHARITABLE TRUST 31,629. MISCELLANEOUS 594.				
OFFICE EXPENSES 3,049. INSURANCE PREMIUMS 2,097. ELK OF THE YEAR 323. APPOINTED OFFICERS 1,864. BUSINESS PRACTICES 81. TOTAL TO FORM 990-EZ, LINE 16 27,884. FORM 990-EZ OTHER ASSETS STATEMENT 2 DESCRIPTION BEG. OF YEAR END OF YEAR LS-US GOVT SE. 1 FUND 212,313. 182,256. LODGE SAVINGS 0. 1,196. DUE FROM CHARITABLE TRUST 0. 34,022. TOTAL TO FORM 990-EZ, LINE 24 212,313. 217,474. FORM 990-EZ OTHER REVENUE STATEMENT 3 DESCRIPTION AMOUNT ALLOCATION OF MANAGEMENT EXPENSES-IOWA ELKS ASSOCIATION CHARITABLE TRUST 31,629. MISCELLANEOUS 594.				
INSURANCE PREMIUMS 2,097.				
ELK OF THE YEAR APPOINTED OFFICERS BUSINESS PRACTICES TOTAL TO FORM 990-EZ, LINE 16 ENDINESS PRACTICES TOTAL TO FORM 990-EZ, LINE 16 DESCRIPTION BEG. OF YEAR END OF YEAR LS-US GOVT SE. 1 FUND LODGE SAVINGS DUE FROM CHARITABLE TRUST TOTAL TO FORM 990-EZ, LINE 24 DESCRIPTION BEG. OF YEAR END OF YEAR 182,256. 0. 1,196. 0. 34,022. TOTAL TO FORM 990-EZ, LINE 24 DESCRIPTION AMOUNT ALLOCATION OF MANAGEMENT EXPENSES-IOWA ELKS ASSOCIATION CHARITABLE TRUST MISCELLANEOUS 31,629. 594.				
APPOINTED OFFICERS BUSINESS PRACTICES TOTAL TO FORM 990-EZ, LINE 16 FORM 990-EZ OTHER ASSETS STATEMENT 2 DESCRIPTION BEG. OF YEAR END OF YEAR LS-US GOVT SE. 1 FUND LODGE SAVINGS 0. 1,196. DUE FROM CHARITABLE TRUST 0. 34,022. TOTAL TO FORM 990-EZ, LINE 24 DESCRIPTION AMOUNT ALLOCATION OF MANAGEMENT EXPENSES-IOWA ELKS ASSOCIATION CHARITABLE TRUST MISCELLANEOUS 1,864. 81. 81. 81. 81. 81. 81. 81. 81. 81. 81				
BUSINESS PRACTICES TOTAL TO FORM 990-EZ, LINE 16 PORM 990-EZ DESCRIPTION BEG. OF YEAR END OF YEAR LS-US GOVT SE. 1 FUND LODGE SAVINGS DUE FROM CHARITABLE TRUST TOTAL TO FORM 990-EZ, LINE 24 DESCRIPTION AMOUNT ALLOCATION OF MANAGEMENT EXPENSES-IOWA ELKS ASSOCIATION CHARITABLE TRUST MISCELLANEOUS 81. 27,884. 81. 27,884. 27,884. 21,884. AMOUNT 22 AMOUNT 31,629. 594.				
FORM 990-EZ OTHER ASSETS STATEMENT 2 DESCRIPTION BEG. OF YEAR END OF YEAR LS-US GOVT SE. 1 FUND 212,313. 182,256. LODGE SAVINGS 0. 1,196. DUE FROM CHARITABLE TRUST 0. 34,022. TOTAL TO FORM 990-EZ, LINE 24 212,313. 217,474. FORM 990-EZ OTHER REVENUE STATEMENT 3 DESCRIPTION AMOUNT ALLOCATION OF MANAGEMENT EXPENSES-IOWA ELKS ASSOCIATION CHARITABLE TRUST 31,629. MISCELLANEOUS 594.				
DESCRIPTION BEG. OF YEAR END OF YEAR LS-US GOVT SE. 1 FUND LODGE SAVINGS DUE FROM CHARITABLE TRUST TOTAL TO FORM 990-EZ, LINE 24 DESCRIPTION ALLOCATION OF MANAGEMENT EXPENSES-IOWA ELKS ASSOCIATION CHARITABLE TRUST MISCELLANEOUS BEG. OF YEAR END OF YEAR END OF YEAR END OF YEAR 182,256. 0. 1,196. 212,313. 217,474.	TOTAL TO FORM 990-EZ, LINE 16			27,884.
DESCRIPTION BEG. OF YEAR END OF YEAR LS-US GOVT SE. 1 FUND LODGE SAVINGS DUE FROM CHARITABLE TRUST TOTAL TO FORM 990-EZ, LINE 24 DESCRIPTION ALLOCATION OF MANAGEMENT EXPENSES-IOWA ELKS ASSOCIATION CHARITABLE TRUST MISCELLANEOUS BEG. OF YEAR END OF YEAR END OF YEAR END OF YEAR 182,256. 0. 1,196. 212,313. 217,474.	DODY 000 PZ	OWNED AGGERG		CMA MENUTATION 2
LS-US GOVT SE. 1 FUND LODGE SAVINGS DUE FROM CHARITABLE TRUST TOTAL TO FORM 990-EZ, LINE 24 DESCRIPTION ALLOCATION OF MANAGEMENT EXPENSES-IOWA ELKS ASSOCIATION CHARITABLE TRUST MISCELLANEOUS 182,256. 0. 1,196. 34,022. 212,313. 217,474. 212,313. 217,474.	FORM 990-EZ	OTHER ASSETS		STATEMENT 2
LODGE SAVINGS DUE FROM CHARITABLE TRUST TOTAL TO FORM 990-EZ, LINE 24 PORM 990-EZ OTHER REVENUE STATEMENT AMOUNT ALLOCATION OF MANAGEMENT EXPENSES-IOWA ELKS ASSOCIATION CHARITABLE TRUST MISCELLANEOUS 1,196. 34,022. 212,313. 217,474. AMOUNT 31,629. 594.	DESCRIPTION		BEG. OF YEAR	END OF YEAR
DUE FROM CHARITABLE TRUST TOTAL TO FORM 990-EZ, LINE 24 PORM 990-EZ OTHER REVENUE STATEMENT AMOUNT ALLOCATION OF MANAGEMENT EXPENSES-IOWA ELKS ASSOCIATION CHARITABLE TRUST MISCELLANEOUS O. 34,022. 212,313. 217,474. AMOUNT 31,629. 594.	LS-US GOVT SE. 1 FUND		212,313.	
TOTAL TO FORM 990-EZ, LINE 24 FORM 990-EZ OTHER REVENUE STATEMENT 3 DESCRIPTION ALLOCATION OF MANAGEMENT EXPENSES-IOWA ELKS ASSOCIATION CHARITABLE TRUST MISCELLANEOUS 31,629. 594.				
FORM 990-EZ OTHER REVENUE STATEMENT 3 DESCRIPTION AMOUNT ALLOCATION OF MANAGEMENT EXPENSES-IOWA ELKS ASSOCIATION CHARITABLE TRUST MISCELLANEOUS 31,629. 594.	DUE FROM CHARITABLE TRUST		0.	34,022.
DESCRIPTION ALLOCATION OF MANAGEMENT EXPENSES-IOWA ELKS ASSOCIATION CHARITABLE TRUST MISCELLANEOUS AMOUNT 31,629.	TOTAL TO FORM 990-EZ, LINE 24		212,313.	217,474.
DESCRIPTION ALLOCATION OF MANAGEMENT EXPENSES-IOWA ELKS ASSOCIATION CHARITABLE TRUST MISCELLANEOUS AMOUNT 31,629.			 	
ALLOCATION OF MANAGEMENT EXPENSES-IOWA ELKS ASSOCIATION CHARITABLE TRUST MISCELLANEOUS 31,629. 594.	FORM 990-EZ	OTHER REVENUE		STATEMENT 3
CHARITABLE TRUST MISCELLANEOUS 31,629. 594.	DESCRIPTION			AMOUNT
TOTAL TO FORM 990-EZ, LINE 8 32,223.	CHARITABLE TRUST	SES-IOWA ELKS ASSO	CIATION	
	TOTAL TO FORM 990-EZ, LINE 8			32,223.

FORM 990-EZ	OTHER	CHANGES	IN	NET	ASSETS	OR	FUND	BALANCES	STATEMENT	4
DESCRIPTION									AMOUNT	
UNREALIZED IN	VESTMEN'	r gain							15,28	30.
TOTAL TO FORM	990-EZ	, LINE 2	0						15,28	30.

FORM 990-EZ		INFORMATION REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS		5			
A)	DIRECTLY O	GANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, R INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL NTRACT?	f]	YES	[X]	NO
B)		GANIZATION, DURING THE YEAR, PAY PREMIUMS, R INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT? .	- (]	YES	[X]	NO

.990-EZ PG 2

STATEMENT

6

TO PROMOTE AND PROVIDE OUR YOUTH, VETERANS, AND COMMUNITY CHARITABLE SERVICES.