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(HTA)

Return of Organization Exempt From Income Tax

OMB No 1545-0047

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

artment of the Treasury

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

A	For the	2009 cale	endar yea	ar, or tax year b	eginning		4/1/200	9	, and	d ending			3/31/2	2010	<u>-</u>	
В	Check if ap	plicable	Please	C Name of orga	anization	BPOE J	efferson Loc	lge 2306		,	_	Empl	oyer id	entification	number	
	Address	change	use IRS label or	Doing Busine	ess As						42	2-0889	9496			
\sqcap_{i}	Name ch	ange	print or	Number and	street (or P (O box if mail	is not delivered	to street add	ress)	Room/su		Telep		umber		
=	nıtıal retu	-	type See	Box 6					,						h	
=	Terminat		Specific	City or town,	state or cour	ntry and 7IP	+ 4			1	+					
	mended		Instruc- tions	Jefferson	0.0.00	ia,, 5110 211	I.	1	50129	a	٦	Gross	s receipt	ts \$	1	24,434
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-2	<u> </u>			oberts 506 S \			_			— Н(Б)		ıll affiliat			XYes	No
П	ax-exer	nptstatus:	X 50	01(c) (8)	(inserti	no)	4947(a)(1)c	r 5	27		If "No	o," attacl	n a list	(see instruct	ions)	
J.V	Vebsite	: _► N/A								H(c)	Group	exemp	tion nur	mber ► 11	56	
K ∓	orm of o	rganization	Пс	orporation	Trust /	Association	X Other ▶		L	Year of for	matio	n 1	964	M State of	legal domicile	· IA
1	art l		nmary	<u></u>												 -
	1			the organizati	on's miss	ion or mos	st significant	activities							1, 4	
≟`9	1 '			principles of c						y and to	nrac	tice th	nose n	rincinles		
28				the Lodge. To											ئۇرۇرىلى ئۇرۇرىي	
Activities & Governmende		23 1110111	0013-01	ine Louge. To	give sup	poit to ou	Community	With abou	Jai ooii	0011110	- J	outil c	ila vo	torano:		
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တိ	2		Check this box [If the organization discontinued its operations or disposed of more than 25% of Number of voting members of the governing body (Part VI, line 1a)								.5% UI	_	,5615. ' ^r	7		
න්	3			pendent voting	-	-	-		Lina 1k	b)	•		-	4		0
)ţį	4			pendent voling Femployees (F	-	_	verning bod	y (Fait Vi	, iiiie it	D)	•		F	5		10
Ę	5			volunteers (e		-	٨	• •	•				-	6		
٩	6 7a			elated busines		_		. (C) line	12		•		-	7a		0
	b			usiness taxabl					12					7b	-	0
	0	Net unit	siated bi	usiness taxabi	e income	HOIH FOIH	1 990-1, 11116	54.				Prior Ye		7.0	Current Yes	
	8	Contribi	itione ar	nd grants (Par	t VIII line	1h)				-		1101 10	31,0	208		50,163
_ e								•	•	-		-	50,0			69,236
Revenue	1	10 Investment income (Part VIII column (A), lines 3, 4, and 7d)						0	1,51	03,230						
ě	1						5.0	945		5,035						
	12		-							-					1	24,434
	13												0,,			0
	14			•	•			٥,		·						0
	15							umn (A).	Imes 5–	-10			25.7	755		25,376
ses	16a							(* ·//		1					5, 	0
Expenses	b					must equal Part VIII, column (A), line 12) Part IX, column (A), lines 1–3) art IX, column (A), line 4) loyee benefits (Part IX, column (A), lines 5–10) IX, column (A), line 11e) column (D), line 25) ▶ 0	11									
蓝	17	Other ex	coenses	(Part IX, colu	mn (A). lir	nes 11a-1	1d. 11f–24f)						76,3	322		91.760
	18			Add lines 13-					25) .				102,0			17,136
	19			xpenses Sub				(),	,				-15,0	_		7,298
ces Ces	1									Beg	innin	g of Cu			End of Year	
Assets d Balanc	20	Total as	sets (Pa	art X, line 16)									79,7			71,990
t Ass d Ba	21			Part X, line 26										308		904
	22		-	ind balances	-	ine 21 fror	n line 20						78,9			71,086
	rt II		nature		· · ·											
		Unde	r penalties	s of perjury, I decla	re that I have	e examined tl	nis return, includ	ing accompa	nying sch	nedules an	d state	ements,	and to	the best of m	ny knowledge	
		and t	oelief, it is	true, correct, and	complete De	eclaration of p	reparer (other th	nan officer) is	s based o	n all inforn	nation	of which	h prepai	rer has any l	(nowledge:	
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	d	1 -		T M Wittrock				7/13/2	2010	employe	ed	► ≥	∐ [`			
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				eturn with the) · ·		٠	• •	<u> </u>	·	X Yes	∐ No
For	Privacy	Act and	Paperwo	rk Reduction A	ct Notice,	see the sep	arate instruc	tions.							Form- 98	0 (2009)

Pε	art III Statement of Program Service Accomplishments	. 0000400	, Atago
1	Briefly describe the organization's mission:		7
	To support the principles of our Order, charity, justice, brother love and fidelity and to practice those princip	oles	
	as members of the Lodge. to give support to our community with special concern to our yourth and veteral	ns	
		39	-:
2	Did the organization undertake any significant program services during the year which were not listed on		-: 7
	the prior Form 990 or 990-EZ?	Yes	X No
	If "Yes," describe these new services on Schedule O.	ies	i NO
3	Did the organization cease conducting, or make significant changes in how it conducts, any program		
•	services?	Yes	X No
	If "Yes," describe these changes on Schedule O.	l les	NO
4	Describe the exempt purpose achievements for each of the organization's three largest program services by		
7	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount	, expenses.	and
	allocations to others, the total expenses, and revenue, if any, for each program service reported.	int or grants	anų
	allosations to extere, the total expenses, and revenue, if any, for each program service reported.		
4-	(Code: \(\(\) \(
4a	(Code ⁻) (Expenses \$0 including grants of \$0) (Revenue \$		<u>, 0</u>)
			.J
4b	(Code.) (Expenses \$ 0 including grants of \$ 0) (Revenue \$		0)
	•••••••••••••••••••••••••••••••••••••••		-
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4c	(Code) (Expenses \$0 including grants of \$0) (Revenue \$		· (·0·)

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	***************************************		,
4d	Other program services. (Describe in Schedule O.)		
	(Expenses \$ 104,041 including grants of \$ 0) (Revenue \$	0)	
4e	Total program service expenses ► 104.041		

Par	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,"			
2	complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have	-		
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part	-	-	
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"	-	.	
	complete Schedule D, Part IV	9	-	Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
	quasi-endowments? If "Yes," complete Schedule D, Part V	10	-	X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	х	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI			į
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	#		12
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			-
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			5
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	: :		
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that			
12	addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X. Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
12	Schedule D, Parts XI, XII, and XIII.	12	- Y	
2Δ	Was the organization included in consolidated, independent audited financial statements for the tax Yes No	12		n onem
27	year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	di.		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	1	Х
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,		-	
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I.	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	;	Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	٠, ا		
20	If "Yes," complete Schedule G, Part III	19	<u> </u>	X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		ΙĀ

Par	Checklist of Required Schedules (continued)		;	<u> </u>
	•		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations		;	
	In the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II .	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the		,]	
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			1
	employees? If "Yes," complete Schedule J	23	,	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than		f	
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines		I ;	
	24b through 24d and complete Schedule K. If "No," go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	3 .	Х
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year		•	
	to defease any tax-exempt bonds?	24c	' ù	Х
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	ş	Х
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction		,	
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	,	X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a		7.1	
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or		_	l
	990-EZ? If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?		_	
	If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b	á	X
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a	Ì		İ
	family member) was an officer, director, trustee, or direct or indirect owner? 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	-	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	١		,_
	III, IV, and V, line 1	34	-	X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete		Ι.	
	Schedule R, Part V, line 2	35	 	X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			ŀ
~ -	organization? If "Yes," complete Schedule R, Part V, line 2	36	-	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		1.	1
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part	27		
	VI	37	 	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	l

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Par	Statements Regarding Other IRS Filings and Tax Compliance			
4.	February 1997 A 15 B 19 C 15 1999 A 1990 A 1999 A 1990 A 1		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			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	4		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	4		ļ
·	gaming (gambling) winnings to prize winners?	1c	x	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	10	^-	├
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 10	,		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	x	
	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
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
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			١
	account)?	4a		X
b	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?	50		_v -
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a 5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	100		 ^-
	Prohibited Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible?	6a		Х
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).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		`	
	and services provided to the payor?	7a	<u> </u>	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? .	7b	-	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	70	-	V
d	If "Yes," indicate the number of Forms 8282 filed during the year	7c		X
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	1		
•	benefit contract?	7e	-	x
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? .	7g		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7h		X
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	١.:		
^	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	0-	-	-
a b	Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b	-	
10	Section 501(c)(7) organizations. Enter:	30	-	
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	1	.	
11	Section 501(c)(12) organizations. Enter.	1		
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			İ
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	<u> </u>	<u> </u>
<u>b</u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . 12b	<u></u>		<u> </u>

Part VI

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sect	tion A. Governing Body and Management				
	1	1		Yes	No
1a	Enter the number of voting members of the governing body	7			
b	Enter the number of voting members that are independent	0		•	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relation any other officer, director, trustee, or key employee?	ship with	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	r person? .	3		Х
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed	d? .	4		X
5	Did the organization become aware during the year of a material diversion of the organization's as	sets?	5		Х
6	Does the organization have members or stockholders?		6	Χ	
7a	Does the organization have members, stockholders, or other persons who may elect one or more of the governing body?	members	7a	Х	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other p	ersons?	7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertake				
	the year by the following.	J			
а	The governing body?		8a	X.	
b	Each committee with authority to act on behalf of the governing body?		8b	Х	
9	Is there any officer, director, 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	•	9a	1	Х
Sect	tion B. Policies (This Section B requests information about policies not required by the Int	ernal		1,	
	enue Code.)			•	
				Yes	No
10a	Does the organization have local chapters, branches, or affiliates?		10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of suc affiliates, and branches to ensure their operations are consistent with those of the organization?	h chapters,	10b	1	
11	Has the organization provided a copy of this Form 990 to all members of its governing body befor	e filing the		tr.	
	form?		11	Х	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990				
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13		12a	-1.	X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that crise to conflicts?	could give	12b	Ķ	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy?	If "Ves "	120	<u> </u>	-
C	describe in Schedule O how this is done	11 100,	12c	,	
13	Does the organization have a written whistleblower policy?		13) mai 44-	X
14	Does the organization have a written document retention and destruction policy?	•	14		$\frac{\hat{x}}{x}$
15	Did the process for determining compensation of the following persons include a review and approximately an approximately an approximately and approximately and approximately and approximately an approximately an approximately an approximately an approximately an approximately an approximately an approximately an approximately an approximately an approximately approximately an approximately	val hv		-:	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation	•			
а	The organization's CEO, Executive Director, or top management official		15a		
b	Other officers or key employees of the organization	•	15b		
~	If "Yes" to line 15a or 15b, 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 arrar	aement			
	with a taxable entity during the year?		16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to e	valuate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to			_	
	the organization's exempt status with respect to such arrangements?		16b	٠٠ ⁻	х
Sect	tion C. Disclosure		_		
17	List the states with which a copy of this Form 990 is required to be filed ► IA				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 9	90-T (501(c)(3)s	only)		
	available for public inspection. Indicate how you make these available. Check all that apply.			٠,	
	Own website Another's website X Upon request			<u>*</u> -≻	
19	Describe in Schedule O whether (and if so, how), the organization makes its governing document	s, conflict of inte	rest	4	
	policy, and financial statements available to the public.		1-	ļ	
20	State the name, physical address, and telephone number of the person who possesses the books	and records of t	he 🚣	چ.سر-	
	organization: ► Steve Brown	515 386 210	6 3	¥	
	408 W Lincolnway, Jefferson, IA 50129			,	

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. Report compensation for the calendar year ending with or within the organization's tax year. 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. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- 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.

Check this box if the organization did not compensate any current officer, director, or trustee. √(É) (A) (B) (D) (E) Position (check all that apply) Name and Title Reportable Average Reportable Estimated compensation hours per Former compensation amount of Individual trustee employee Institutional trustee Key employee week lighest compensated from from related other compensation the organizations organization (W-2/1099-MISC) from the (W-2/1099-MISC) organization and related organiżations Stephen A Brown iį 5 1,200 0 Secretary Jerry Roberts 10 Ruler 0 0 0 Don Franey Lead Kn 0 Roger Overby Loyal Kn 0 0 0 Tom Duncan Lectruing 1. 0 0 Dave Walker ميهر أ Treasurer 3. n 0 John Russell Х 0 0 Chairman of Trustees بطالا الدر مطالا الدر

42-0889496

reportable compensation from the organization O Yes N Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		. (A)	(B)	_		•	C)			(D)	(E)	, (F)
the Total Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such midvidual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such midvidual For any individual listed on line 1a receive or accrue compensation and other compensation from the organization greater than \$150,000? If "Yes," complete Schedule J for such midvidual Solid any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors Compensation from the organization. (A) Name and business address Obscription of services Compensation		Name and title	hours per	├						compensation from the organization	compensation from related organizations	amo ol compe fror orgar and organ	unt of ther ensation in the lization related izations
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services rendered to the organization? If "Yes," complete Schedule J for such person												4 J	x
Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. (A) (B) (C) Compensation Compensation	5									organization for		5	- x
Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. (A) (B) (C) Compensation Compensation Compensation	Sec		oo, comprate c	707700			ouo.	, po.	0011			<u> </u>	1 /
(A) Name and business address Description of services Compensation		Complete this table for your five highest cor	mpensated inde	pend	dent	cont	racto	ors th	at re	eceived more th	an \$100,000 of		
2 Total number of independent contractors (including but not limited to those listed above) who received		(A)	ddress			_					vices C		
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Total number of independent contractors (including but not limited to those listed above) who received			,,,									 .	
2 Total number of independent contractors (including but not limited to those listed above) who received									\vdash				
	2	Total number of independent contractors (in	ncludina but not	limit	ed to	o tho	se li	sted	abo	ve) who receive	d		;

Contributions, gifts, grants

d

12

All other revenue Total. Add lines 11a-11d Total revenue. See instructions.

BPOE Jefferson Lodge 2306 42-0889496 Page 9 Part VIII Statement of Revenue (A) (B) (C) Unrelated (D) Related or Total revenue Revenue exempt business excluded from function revenue tax under sections revenue 512, 513, or 514 Federated campaigns 1a and other similar amounts 19,514 Membership dues . . 1b С Fundraising events 1c d Related organizations 1d Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above 1f 30,649 Noncash contributions included in lines 1a-1f: \$ 50,163 Total. Add lines 1a-1f **Business Code** Program Service Revenue 900099 1,512 1,512 2a Dances 8,285 Dinners 900099 8,285 900099 420 420 Advertising 10.820 10,820 900099 900099 48,199 48,199 Other f All other program service revenue 69,236 Total. Add lines 2a-2f 3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds . 5 Rovalties (II) Personal (ı) Real 6a Gross Rents 5,035 b Less rental expenses 5,035 c Rental income or (loss) 5.035 d Net rental income or (loss). ₽ 7a Gross amount from sales of (i) Securities (ii) Other assets other than inventory. Less: cost or other basis and sales expenses 0 c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising Other Revenue events (not including \$ of contributions reported on line 1c). See Part IV. line 18 **b** Less direct expenses c Net income or (loss) from fundraising events . 9a Gross income from gaming activities. See Part IV, line 19. 0 **b** Less direct expenses Net income or (loss) from gaming activities 0 10a Gross sales of inventory, less returns and allowances 0 Less cost of goods sold . . . Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11a b C

124,434

69.236

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) but are not rec	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
_	organizations in the U.S. See Part IV, line 21	0			 <u>-</u>
2	Grants and other assistance to individuals in				
2	the U.S. See Part IV, line 22.	0			
3	Grants and other assistance to governments, organizations, and individuals outside the				
	U S. See Part IV, lines 15 and 16	o			
4	Benefits paid to or for members	0			<u> </u>
5	Compensation of current officers, directors,	<u>_</u>	· · ·		
,	trustees, and key employees	1,200		1,200	w.
6	Compensation not included above, to disqualified	1,200		1,200	
•	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	o			
7	Other salaries and wages .	22,202	22,202		
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions).	o			21
9	Other employee benefits	0			· · · · · · · · · · · · · · · · · · ·
10	Payroll taxes	1,974	1,882	92	<i>r</i> _D
11	Fees for services (non-employees):	.,	.,		1, 1
а	Management	ol			11
b	Legal	0			**
С	Accounting	1,700	1,700		7, 4
d	Lobbying	0	·		
е	Professional fundraising services See Part IV, line 17	0			*****
f	Investment management fees	0			
g	Other	0			
12	Advertising and promotion	1,638	1,638		
13	Office expenses .	2,324		2,324	
14	Information technology	0			
15	Royalties	0			-4
16	Occupancy	0			
17	Travel	0			•
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials .	0	~ ~		re to
19	Conferences, conventions, and meetings	0			
20	Interest	0			-
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	2,229	0	2,229	0
23	Insurance	0			
24	Other expenses. Itemize expenses not				- <u>.</u> -
	covered above (Expenses grouped together				4.
	and labeled miscellaneous may not exceed				
_	5% of total expenses shown on line 25 below.) Nat'l & State Convention	3,604	3.604		
a		1,303	1,303		
b	Licenses Repairs	16,052	16,052		
c d		4,609	4,609		
u e	Grand & State Dues	4,811	4,811		
f	All other expenses	53,490	46,240	1,250	
25	Total functional expenses. Add lines 1 through 24f	117,136	104,041	7,095	0
	Joint costs. Check here ► If following	117,130	104,041	7,095	
26	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				-
	educational campaign and fundraising				
	solicitation				
	JUNGITATION				

		•	(A)		
			Beginning of year		(B) End of year
	1,	Cash—non-interest-bearing	-7,372	1	7,532
	2	Savings and temporary cash investments	50,284	2	36,899
	3	Pledges and grants receivable, net	0	3	0
ŀ	4	Accounts receivable, net	0	4	0
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II of			
		Schedule L	0	5	
j	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete			_
		Part II of Schedule L	0	6	· · · · · · · · · · · · · · · · · · ·
ets	7	Notes and loans receivable, net	0	_ 7	0
Assets	8	Inventories for sale or use .	6,094	8	6,094
⋖	9	Prepaid expenses and deferred charges		9_	
i	10a	Land, buildings, and equipment: cost or 10a 182,344			
		other basis. Complete Part VI of Schedule D			
	b	Less accumulated depreciation 10b 160,879	30,752		21,465
	11	Investments—publicly traded securities .	0		0
	12	Investments—other securities See Part IV, line 11	0		- 0
	13	Investments—program-related See Part IV, line 11	0		<u> </u>
	14	Intangible assets	0		: <u>0</u>
- 1	15	Other assets See Part IV, line 11	0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	79,758		71,990
	17	Accounts payable and accrued expenses	808		- 904
	18	Grants payable		18	
	19	Deferred revenue		19	*
	20	Tax-exempt bond liabilities	0	20	
Liabilities	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	· · · · · · · · · · · · · · · · · · ·
.≣	22	Payables to current and former officers, directors, trustees, key			
ia		employees, highest compensated employees, and disqualified			
-	00	persons Complete Part II of Schedule L	0	22	• • •
- 1	23	Secured mortgages and notes payable to unrelated third parties .	0		0
	24	Unsecured notes and loans payable to unrelated third parties	0	25	0
- 1	25 26	Other liabilities Complete Part X of Schedule D	808	26	904
-	26	Total liabilities. Add lines 17 through 25	000	20	904
S		Organizations that follow SFAS 117, check here ▶ ☐ and			
2		complete lines 27 through 29, and lines 33 and 34.			
a	27	Unrestricted net assets		27)몇년
88	28	Temporarily restricted net assets		28	
밀	29	Permanently restricted net assets .		_29	
교		Organizations that do not follow SFAS 117, check here▶ X			
ō		and complete lines 30 through 34.			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds	-	30	
SS	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
ا کا	32	Retained earnings, endowment, accumulated income, or other funds	78,950		71,086
S	33	Total net assets or fund balances	78,950		71,086
i	34	Total liabilities and net assets/fund balances	79,758	34	71,990

Form **990** (2009)

<u>:-</u> :::

Part	XI Financial Statements and Reporting		
		Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		
	Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? 2a	Х	_
b	Were the organization's financial statements audited by an independent accountant? 2b	Х	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of		
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	x	
	If the organization changed either its oversight process or selection process during the tax year, explain in		
	Schedule O		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were		
	issued on a consolidated basis, separate basis, or both	1 -	
	X Separate basis Consolidated basis Both consolidated and separate basis	:n :	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		
	the Single Audit Act and OMB Circular A-133?	-	Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	· · ·	
	Fo	m 99 0	(2009)

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

► Attach to Form 990.

► See separate instructions.

Name	of the organization		Emplo	yer identification	number .
BPO	E Jefferson Lodge 2306			42-0889	496
Par	Organizations Maintaining Don the organization answered "Yes"	or Advised Funds or Other Similar to Form 990, Part IV, line 6.	Funds o	Accounts.	Complete if
		(a) Donor advised funds	(t) Funds and other	accounts
1	Total number at end of year				
2	Aggregate contributions to (during year)		ļ		
3	Aggregate grants from (during year)				
4	Aggregate value at end of year		l		
5	Did the organization inform all donors and	_		or advised]. ————————————————————————————————————
	funds are the organization's property, subje			<u> </u>	Yes No
6	Did the organization inform all grantees, do		•		-
	used only for charitable purposes and not for		or, or for a	ny other	ı., 🗀
	purpose conferring impermissible private be				Yes No
Par	Conservation Easements. Comp	olete if the organization answered "Ye	es" to Forr	<u>n 990, Part IV</u>	, line 7. 🚈
1	Purpose(s) of conservation easements held				.,2;
	Preservation of land for public use (e.g	, recreation or pleasure) Preservation	on of an his	storically import	ant land area
	Protection of natural habitat	Preservation	on of a cert	ıfıed historıc stı	ructure
	Preservation of open space	_			is a second
2	Complete lines 2a through 2d if the organiz	ation held a qualified conservation contri	bution in th	e form of a cor	servation
	easement on the last day of the tax year.	,			. 1
	,			Held at the E	nd of the Tax.Year
а	Total number of conservation easements		. 2		,
b	Total acreage restricted by conservation ea	sements	2	b	** ***
С	Number of conservation easements on a ce		2	c	
d	Number of conservation easements include	d in (c) acquired after 8/17/06.	2	d	
3	Number of conservation easements modified	d, transferred_released, extinguished, or	r terminated	by the organiz	ation
	during the tax year				* #
4	Number of states where property subject to	conservation easement is located			77 1 0
5	Does the organization have a written policy	regarding the periodic monitoring, inspe-	ction, hand	ling of	
	violations, and enforcement of the conserva-	ition easements it holds? .			Yes No
6	Staff and volunteer hours devoted to monitor	oring, inspecting, and enforcing conserva	ition easem	ents during the	year
	•				**
7	Amount of expenses incurred in monitoring	inspecting, and enforcing conservation	easements	during the yea	r
_	\$				4.4
8	Does each conservation easement reported	on line 2(d) above satisfy the requireme	ents of secti	on	ı., mi'.,
	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?				∫ Yes No
9	In Part XIV, describe how the organization r	•		•	•
	balance sheet, and include, if applicable, the organization's accounting for conservat	-	s imanciai :	statements that	describes ,
Par		ons of Art, Historical Treasures, or Of	her Simila	r Assats	4.3
ı aı	Complete if the organization answere			7 733013.	-L
12	If the organization elected, as permitted und		a statement	and halance s	
Ia	art, historical treasures, or other similar ass				
	service, provide, in Part XIV, the text of the				or public
b	If the organization elected, as permitted und				
	historical treasures, or other similar assets	held for public exhibition, education, or re			oublic –
	service, provide the following amounts rela-	ing to these items:			-, <i>(</i>
	(i) Revenues included in Form 990, Part VI	II, line 1.		▶ \$	
	(ii) Assets included in Form 990, Part X			▶ \$	
2	If the organization received or held works of	f art, historical treasures, or other similar	assets for	financial gain,	provide the
	following amounts required to be reported u	inder SFAS 116 relating to these items:			•
а	Revenues included in Form 990, Part VIII, I	ine 1		▶ \$	•

Assets included in Form 990, Part X

Part	III. Organizations Maintaining C	ollections of	Art, His	torical	<u> Freasures,</u>	or Oth	er Similar As	sets (co	<u>ntinued)</u>
3 .	Using the organization's acquisition, ac use of its collection items (check all that		. \Box		•			gnificant	र्जा कर
а	Public exhibition		d	Loan	or exchange	progran	ns		
b	Scholarly research		е 💹	Other		- -			
С	Preservation for future generation	าร							
4	Provide a description of the organizatio Part XIV.	n's collections	and expl	ain how t	they further	the orga	nızatıon's exen	npt purpo	se iñ
5	During the year, did the organization so assets to be sold to raise funds rather t							r Yes	No
Part		gements. C	omplete	if the or	ganizatıon			orm 990	, Part
1a	Is the organization an agent, trustee, concluded on Form 990, Part X?					ons or ot	her assets not	Yes	No
b	If "Yes," explain the arrangement in Pa	rt XIV and com	nplete the	tollowing	g table:				
_	Beginning balance .					1c	AI	mount	.ii 0
c d	Additions during the year		• •			1d			'Dat
e	Distributions during the year	•		•		1e			-
f	Ending balance .				_	1f			
2a	Did the organization include an amount	on Form 990	Part Y II	ne 212	•			□ Voc	X No
b	If "Yes," explain the arrangement in Pa		, r ait 7, ii	116 21	•	•	•	163	
Part		te if the organ	nization	answere	ed "Yes" to	Form 9	90, Part IV, III	ne 10.	-
		a) Current year	(b) Pro		(c) Two years		d) Three years back		years back
1a	Beginning of year balance .	0							L)
b	Contributions .								
С	Net investment earnings, gains,								
	and losses .								1
d	Grants or scholarships .								
е	Other expenditures for facilities								-
	and programs .								-
f	Administrative expenses								,
g	End of year balance .	0		0			·	<u> </u>	
2	Provide the estimated percentage of the			l as:					
а	Board designated or quasi-endowment		%						1
b	Permanent endowment	<u>%</u> .							יריון:
С	Term endowment • %								C.
3a	Are there endowment funds not in the porganization by:	oossession of t	the organ	ization th	nat are held	and adn	ninistered for th		res No
	(i) unrelated organizations .			•				3a(i)	<u> </u>
	(ii) related organizations		•				•	3a(ii)	
b	If "Yes" to 3a(ii), are the related organia							_3b	
4 Part	Describe in Part XIV the intended uses VI Investments—Land, Buildin					art Y lin	10		
rail	Description of investment	(a) Cost or ot	her basis	(b) Co:	st or other (other)	(c) Ac	cumulated reciation	(d) Boo	k value -
1a	Land .		0		10,000				10,000
b	Buildings		0		71,097		68,591		2,500
c	Leasehold improvements	_	0		0		0		
d	Equipment		0		101,247		92,288		8,959
е	Other		0		0		0		-, (
Tota	I. Add lines 1a through 1e. (Column (d)	must equal Fo	rm 990, F	Part X, co	lumn (B), lır	ne 10(c).). ▶		21 ,4 6
							Sche	dule D (For	rm 990) 200
								_	570

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۲	age	J

Part VII Investments—Other Secur	rities. See Form 990, Part X, line	e 12.	l age C
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market val	ue .
Financial derivatives	. 0		
Closely-held equity interests	0		
Other	0		-
	0		_
• • • • • • • • • • • • • • • • • • • •	0		
	0		<u></u>
	0		
	0	-	
	0		
• • • • • • • • • • • • • • • • • • • •	0		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		· · · · · · · · · · · · · · · · · · ·	
	elated. See Form 990, Part X, line	e 13	
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market val	ue
	0		200
	0		
	0		eraj gar J
<u> </u>	0		
	0		
	0		
	0		·=-
	0		- <u>}</u>
	0		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)	b 0		
-Part IX - Other Assets. See Form 99			
	(a) Description		b) Book value
_			·~ (
		· · · · · · · · · · · · · · · · · · ·	· (
		- A1	**** (
			. (
			· · · · · (
Total. (Column (b) must equal Form 990, Par	rt X col (R) line 15)		<u> </u>
Part X Other Liabilities. See Form		· · · · · · · · · · · · · · · · · · ·	
1. (a) Description of liability	(b) Amount		-
Federal income taxes	0		
	0		-t
	0		
	0		-
	1 01		_
	0		-
	0		- 1
	0 0		- 1 - 1
	<u> </u>		- 1 - 1
	0		- : - :
Total (Column (b) must equal Form 990, Part X, ∞l (B) line 25)	0		- : - :

Schedule D (Form 990) 2009 Page 4 Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements Part XI Total revenue (Form 990, Part VIII, column (A), line 12) 124,434 2 2 Total expenses (Form 990, Part IX, column (A), line 25) 117,136 3 Excess or (deficit) for the year Subtract line 2 from line 1. 3 7,298 4 Net unrealized gains (losses) on investments. 4 5 Donated services and use of facilities. 5 6 6 investment expenses . . Prior period adjustments. 7 7 8 Other (Describe in Part XIV.) . . 8 Total adjustments (net) Add lines 4 through 8 . . . 9 0 q 10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9. 10 7,298 Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Part XII Total revenue, gains, and other support per audited financial statements. . . 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: è' а Net unrealized gains on investments . . . 2a Donated services and use of facilities . 2b h 2c Recoveries of prior year grants C Other (Describe in Part XIV.) 2d d Add lines 2a through 2d. 0 e 3 3 Subtract line 2e from line 1 . . Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a 4b Other (Describe in Part XIV.) . . . Add lines 4a and 4b C Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 5 Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Part XIII 1 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: 2 Donated services and use of facilities 2a а 2b Prior year adjustments . . . b 2c Other losses C 2d d Other (Describe in Part XIV) Add lines 2a through 2d . . e 3 0 Subtract line 2e from line 1 3 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a Other (Describe in Part XIV) 4b C Add lines 4a and 4b . 0 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Part XIV Supplemental Information Complete 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 and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b Also complete this part to provide any additional information.

BPOE Jefferson	Lodge	2306
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42-0889496

Schedule D (Form	990) 2009	Page 5
Part XIV	Supplemental Information (continued)	_
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SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047
2009

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

Open to Public Inspection

BPOE Jefferson Lodge 2306 42-0889496 Form 990 Part Part 5 Line 1a One officer included in total. (Secretary of organization) 1 (1 (1)) 1 (1) (1) 1 (1) (1) 1 (1) (1) 1 (1) (1) 4

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Form

Depreciation and Amortization

OMB No 1545-0172

Attachment

Department of the Treasure Internal Revenue Service

(Including Information on Listed Property)

► See separate instructions. Attach to your tax return. Sequence No 67 Business or activity to which this form relates Name(s) shown on return Identifying number BPOE Jefferson Lodge 2306 42-0889496 **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I 1 Maximum amount See the instructions for a higher limit for certain businesses . . . 250,000 2 Total cost of section 179 property placed in service (see instructions) 2 5,557 Threshold cost of section 179 property before reduction in limitation (see instructions). 3 800,000 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 250.000 6 (a) Description of property (b) Cost (business use only) (c) Elected cost 7 Listed property. Enter the amount from line 29 7 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 0 9 Tentative deduction. Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562 10 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions). 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12 **▶** 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 149 15 Property subject to section 168(f)(1) election. 15 16 Other depreciation (including ACRS) 16 MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2009 . 17 1,840 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2009 Tax Year Using the General Depreciation System (b) Monthand (c) Basis for (d) Recovery (e) (f) (g) yearplaced penod Convention Method (a) Classification of property depreciation Depreciation deduction inservice (business/investment) 19 a 3-year property MQ 148 200DB +16 5-year property 52 7-year property MQ 5,260 200DB 188 d 10-year property e 15-year property f 20-year property g 25-year property 25 yrs. S/L 27.5 yrs. MM S/L h Residential rental 27.5 yrs. MM S/L property MM i Nonresidential real S/L 39 yrs. MM S/L Section C - Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System 20 a Class life S/L S/L 12 yrs. b 12-year c 40-year MM S/L 40 yrs. Summary (See instructions.) 21 Listed property Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions 2.229 23 For assets shown above and placed in service during the current year, enter the portion 23 of the basis attributable to section 263A costs