

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



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)

Department or the Treasury

SCANNED AUG 3 1 2010

Open to Public

OMB No 1545-0047

		nue Service		The Organization		VI.71			_			Inspection	
			_	year, or tax year		APRIL		2009, and e	nding		CH 31	, 20 10	
В	heck if	applicable	Please use IRS	C Name of organi		ER B.P.O. EL	KS LODE	SE #1683				er identification number	
		s change	label or	Doing Business							82	:0184676	
	lame c	hange	print or type.	Number and stree	et (or PO. box nfπ	nail is not delivered	to street addr	ess) Roo	m/suite			ne number	
	nitial re	turn	See Specific	PO BOX 769		·					(BOB)	549-9922	
	ermina	ited	Instruc-	City or town, st	tate or country,	and ZIP + 4							
		ed return	tions.	WEISER, ID	83672						G Gross red	cerpts \$	
	pplicate	on pending	F Nan	ne and address of	principal officer					H(a) Is this	a comun return	for affiliates? Yes No	
			TONY	HALL POB	OX 769 WE	ISER, ID 836	72					ncluded? X Yes X No	
ī	Tax-ex	empt status		501(c) (8)◀ (inse		947(a)(1) or	527					list (see instructions)	
J	Webs	ite: ▶								1		nber ► /156	
K	Form of	organization	☑ Corp	oration 🔲 Trust 🗀	Association	Other ▶		L Year of fo	mation:			legal domicile: JDAH o	
	rt I	Summ								• > • •		logar dormano 20 pt 40	
							····	T(CAR	RY ON F	PATERN	AL ACTIVITIES	
	1			the organization							·		
9				LBE PURPOS		INCOME BI	ING USE	D EXCLU	SIVEL	I FUR DE	NEVOLE	:N I	
ğ		AND Ch	IANIIA	LBE FURFUS)E3					·			
Governance													
é				if the organiza		-	-						
త				ng members of							3	15	
ties	4	Number	of inde	pendent voting	g members (of the govern	ng body	(Part VI, lın	e 1b)			15_	
Activities &	5	Total nur	mber of	f employees (F	Part V, line 2	a) <i>.</i> .					. 5	6	
Ac	6	Total nur	mber of	f volunteers (e:	stimate if ne	cessary) .					. 6	40	
	7a	Total gro	oss unre	elated busiņes:	s revenue fro	om Part VIII, d	column (C), line 12.			. 7a	0	
	b	Net unre	lated b	usiness taxabl	e income fro	m Form 990-	T, line 34	·	<u></u>	<u> </u>	. 7b	0	
		8 Contributions and grants (Part VIII, line 1h)									ar	Current-Year-	
_	8	Contribu	itions a	nd grants (Par	t VIII, line 1h)					37045	27081	
Revenue	9 Program service revenue (Part VIII, line 2g)												
		-		ome (Part VIII,	-						491	805	
æ			ner revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)						19051	34057			
				add lines 8 thro)		56587	61943	
			_	ilar amounts p						•			
				or for member	-		-		·				
es	t		-				•				5226		
SUS	ł			ompensation, e					'			6084	
Expenses	1			ndraising fees (F		• •	-		# N	Win Pro			
ш			-	g expenses (Par				· · · · · · · · · · · · · · · · · · ·		market Constitution	40901	46997	
	17	Other ex	penses	(Part IX, colu	mn (A), lines		1241		·		46127	53081	
	18	Total exp	penses.	. Add lines 13-	-17 (must jed	Juai Hatt (X, E	dirium (9)), line (25).	•			8862	
_ <u></u>	19	Revenue	iess ex	penses. Subtra	ct line 18 yo	ignine 12 .	• • •	၂တိ 	· -		10460		
ts o						BUG 0	9 2010	. 8-0	Бе	ginning of C		End of Year	
Assets or designation	20		•	art X, line 16).		ر برون .		· 80 · ·	• ⊢		227066	220697	
Net A Fund 6	21			(Part X, line 26)		<u></u>		<u> 그</u> 뿐	·		29102	13871	
				und balances.	Subtract line	21 From mg	<u> 경식</u> ; 니				197964		
146	rt II			Block									
		Under pe	enalties o ef. it is tn	if perjury, I declare	that I have exam molete Declara	nined this return,	including action of the control of t	ccompanying : officer) is base	scheduk ed on all	es and stater information	nents, and t of which or	o the best of my knowledge eparer has any knowledge	
			/-	4 m	////					1	_ /	_	
Sig	jn		m	rug //x	Soul_					<u> </u>	uly 2	9 2010	
He	re	Sign	nature of							Dat	e /	′	
			NTHO	My M. HE	ING EX	AULTED R	<u>uler</u>						
		Тур	e or print	name and title	//								
		Preparer	r's	a () (Date	Chec	k ıf		dentifying number	
D-i-								oyed ▶ 🏿	(see instruct	tions)			
Paid				Lulx	the 19	15	1	7/28/10			ĺ		
	oarer's	i Firm's na	ame (or y	ours CARI	GLARBOR	GCRA				EIN	→		
Use	Only		nployed), , and ZIP	444.0		VEISER, ID 8:	3672			Phone n	o > ()	
Ma	v the			s return with th				structions)				. X Yes No	

Form **990** (2009)

Par	t III Statement of Program Service Accomplishments
1	Briefly describe the organization's mission: TO CARRY ON FRATERNAL ACTIVITIES UNDER THE LODGE SYSTEM WITH NET INCOME BEING USED EXCLUSIVELY FOR BENEVOLENT AND CHARITABLE PURPOSES.
	EXCLUSIVELY TON BENEVOLENT AND CHARITABLE PURPOSES.
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
•	services?
	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 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
42	(Code:) (Expenses \$including grants of \$) (Revenue \$)
48	

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

40	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	(/ (
	•
4d	Other program services. (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ▶

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," complete Schedule A	1		1
2	Is the organization required to complete Schedule B, Schedule of Contributors?.	2		\
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		✓
4	Section 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		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		✓_
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		✓
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		✓
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	✓	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.			
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more 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.	35		
•	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 addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.	W. W.		
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12	₹¹₹1 ⁴ °,	1
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	alle		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	 	1
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
b	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		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		✓
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		✓
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	1	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	10		1
20	If "Yes," complete Schedule G, Part III	19 20		7

r ai	Checklist of Required Schedules (continued)			
_,			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		✓
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		✓
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 employees? If "Yes," complete Schedule J	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 lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		✓
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		1
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		1
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		✓
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		✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		√
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		✓
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		√
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):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		√
C	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		1
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		1
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	1	

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		2.3	134
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	/	
	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 1	2b	✓	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	25 B	√
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		✓
	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	TRACE COM	√
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?	5a		V
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		-
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		1
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	✓	
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).	4.1		
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 7b		V
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	70		-
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		√
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	<u> </u>	
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? .	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	7.		/
_	required?	7h	2500	V C
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 organization, have excess business holdings at any time during the year?	8		√
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a	<u> </u>	1
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		▼
10	Section 501(c)(7) organizations. Enter:			
а	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			
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
а	dioss modifie from members of shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			· 公司
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	- EX.15	1
a	If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b			

Form 990 (2009) Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and Part VI for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body ... 15 **b** Enter the number of voting members that are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 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? 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 5 5 Did the organization become aware during the year of a material diversion of the organization's assets? 6 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7b **b** Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a a The governing body? 8b **b** Each committee with authority to act on behalf of the governing body? 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 . . . Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with those of the organization? Has the organization provided a copy of this Form 990 to all members of its governing body before filing the 11 بَرْيَةٍ لِمُ 11A Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 b Are officers, directors or trustees, and key employees required to disclose annually interests that could give 12b rise to conflicts? c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." 13 13 Does the organization have a written whistleblower policy? 14 14 Does the organization have a written document retention and destruction policy? 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? 15a a The organization's CEO, Executive Director, or top management official 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 arrangement 16a b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard

se	ction C. Disclosure
7	List the states with which a copy of this Form 990 is required to be filed ▶ IDAHO
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 ☐ Another's website ☑ Upon request
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.

State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► JIM RAMBERG 38 W IDAHO ST WEISER, ID 83672

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.

(A)	(B)			(0	;)			tor, or trustee. (D)	(E)	(F)
Name and Title	Average hours per	Position (check all that apply)						Reportable compensation	Reportable compensation	Estimated amount of
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
ANTHONY HALL EXALTED RULER	5			1				0	0	(
GERALD BARNARD LEADING KNIGHT	1			✓				0	0	(
WAYNE QUIGLEY LOYAL KNIGHT	1			1				0	0	(
QUINCY WALLA LECTURING KNIGHT	1			✓				0	0	(
EARL NEUMEISTER SECRETARY	1			✓				1575	0	(
JIM RAMBERG TREASURER	1			✓		-		0	0	(
MARY FIELDS TILER	1			1				0	0	
TIM BATES TRUSTEE	1			1				0	0	
PHIL BYINGTON TRUSTEE	1			1				0	0	
JAMES SAPP TRUSTEE	1			1				0	0	
DAVID THOMAS TRUSTEE	1			1				0	0	(
JOHN FIELD TRUSTEE	1			/				0	0	
DAN ALMQUIST INNER GUARD	1			1				0	0	
JOSEPH GAMS CHAPLIN	1			√				0	0	(
RICHARD CORONADO ESQUIRE	1			1	_			0	0	

Part VII Section A. Officers, Directors, Tru (A)		⊏mp	ioy			u riigi	nest			
(A) Name and title	(B) Average	Positi	on (r	•	C) kalli	that ap	(vla	(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	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
									·	
									<u> </u>	
							L			
1b Total							>			
Total number of individuals (including but reportable compensation from the organization)	ation >									Yes No
3 Did the organization list any former office employee on line 1a? If "Yes," complete S	Schedule J	for s	ıch	ind	ivid	ual	٠.			3 🗸
4 For any individual listed on line 1a, is the state organization and related organizations individual.	greater tha	an \$1	50,0	000,	? If	"Yes,'	" co	mplete Schedu	ile J for such	4
5 Did any person listed on line 1a receive services rendered to the organization? If "	or accrue	com	pen	sati	on	from	anv	unrelated ord	anization for	5
Section B. Independent Contractors										
 Complete this table for your five highest c compensation from the organization. 	ompensate	ed inc	lepe	ende	ent 	contr	acto	ors that receive	d more than \$1	00,000 of
(A) Name and business ad	dress							(B) Description of s	services	(C) Compensation
NONE					_					
2 Total number of independent contractors (including b	ut no	t lin	nited	d to	those	e list	ted above) who	received	
more than \$100,000 in compensation from										

Part	VIII	Statement of Revenue					
	-			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts	1a	Federated campaigns 1a				:	-
g a		Membership dues 1b	23824				j
s, (Fundraising events 10	;	·			
gif		Related organizations 10	1	-			į
ns,		Government grants (contributions).)				i
Contributions, gifts, grants and other similar amounts		All other contributions, gifts, grants,	1	-			
혈		and similar amounts not included above	3257			1	
שלים	g	Noncash contributions included in lines 1a-1f: \$. {
<u> </u>	h	Total. Add lines 1a-1f	<u></u> ▶	27081			
91			Business Code				
νеп	2a						
8	b		\ <u>-</u>				
<u>Xi</u>	С						
Ser	d						
ä	е						
Program Service Revenue	f	All other program service revenue .					
<u> </u>	g	Total. Add lines 2a-2f	<u>.</u> >		·		.1
	3	Investment income (including dividen	ds, interest, and				
			🕨	805			·
	4	Income from investment of tax-exempt be	ond proceeds 🕨				
	5	Royalties	<u> ▶</u>		1		
	•	4.5		-			
	6a		00		,		, '
	b	Less: rental expenses	_		, , , , ,	- \$ -	
	d	Rental income or (loss) Net rental income or (loss)		450			ļJ
		(2.0	, ► (ii) Other		···		
	7a	Gross amount from sales of assets other than inventory	(ii) Other				
				, , ,	*	* *	- 1
	þ	Less: cost or other basis		* .	-	- 3	
		and sales expenses .				, ,	
		Gain or (loss)					-
ø	l .	- · · · · ·	·		·	, , , , , , , , , , , , , , , , , , ,	,
	Ва	Gross income from fundraising events (not including \$		<u> </u>	·	2 7	6 5 50
š		of contributions reported on line 1c).		÷	-	,] _]
æ		See Part IV, line 18	a 65944	-		3,	. '
Other Revenu	Ь	Less: direct expenses	b 54011			ŧ	
ŏ		Net income or (loss) from fundraising	events ►	11933			
	000	Gross income from gaming activities.					
	Ja	See Part IV, line 19	a				
		Less: direct expenses	b				,
	C	Net income or (loss) from gaming ac	tivities > _		ļ		
	10a	Gross sales of inventory, less					
		returns and allowances	a 79413				
		2000, 000, 0. goddo 00	ь 57739		· · · · · · · · · · · · · · · · · · ·	ļ	
	C	Net income or (loss) from sales of inve		21674	-		
	<u> </u>	Miscellaneous Revenue	Business Code		 	ļ	
	11a				 	<u> </u>	
	b			 	 	 	
	C		· [
	1	All other revenue				 	
		Total. Add lines 11a-11d				 	1
	ր2	Total revenue. See instructions.	<u> – – </u>	61943			<u> </u>

Part IX Statement of Functional Expenses

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

	All other digamizations must complete com		r required to comp	nete columns (D),	(O), and (D).
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				, , ,
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
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	5503			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions) .				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
	Management				
	Legal				
	Accounting				· · · · · · · · · · · · · · · · · · ·
d	, , , , , , , , , , , , , , , , , , , ,		NOTE THE TOTAL PROPERTY.		
е	Professional fundraising services. See Part IV, line 17			P 14 17 17 17 17 17 17 17 17 17 17 17 17 17	
f	Investment management fees				
g	Other				ļ
12	Advertising and promotion				
13	Office expenses				
14	Information technology			Ĺ <u> </u>	
15	Royalties				
16	Occupancy	8246			
	~ .		-		
17	Travel		<u> </u>		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .				
20	Interest		<u> </u>		
21	Payments to affiliates			 	
22	Depreciation, depletion, and amortization.				
23	Insurance	6133	(127.
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.)		2 - 3 # 1 x 2 2	1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m	KI TO SEE
а	DUES NATIONAL & STATE	5674			<u></u>
b	MEMBEDSHID EYDENSE	5215			<u></u>
-	TAXES & LICENSES	7302			
d	DEDAIDO	1010			
_	DDOCDAM EYDENSE	8174			
e		27.1			
25 26	All other expenses	53081			
_U	SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Pa	rt X	Balance Sneet			
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	66382	1	46012
ŀ	2	Savings and temporary cash investments		2	
- 1	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	487	4	
ļ	5	Receivables from current and former officers, directors, trustees, key			سر
		employees, and highest compensated employees. Complete Part II of Schedule L		5	\
1	_		2 (3	······································
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete	· · · · · · · · · · · · · · · · · · ·	6	
.		Part II of Schedule L		7	
Assets	7	Notes and loans receivable, net	6847	8	6335
1SS	8	Inventories for sale or use	0047	 	0333
4	9	Prepaid expenses and deferred charges	~ <u></u>	9	17.59EF 3.5
	10a	Land, buildings, and equipment: cost or 10a 168350 other basis. Complete Part VI of Schedule D	The state of the s	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	The state of the s
	b	Less: accumulated depreciation 10b	153350	10c	168350
	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	l .	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)	227066	16	220697
	17	Accounts payable and accrued expenses	1-11-	-	1422
	18	Grants payable		18	
	19	Deferred revenue		19	12449
	20	Tax-exempt bond liabilities		20	
S	21	Escrow or custodial account liability. Complete Part IV of Schedule D	1	21	
Liabilities	22	Payables to current and former officers, directors, trustees, key	Na to	3/4	• • • • • • • • • • • • • • • • • • •
펼	22	employees, highest compensated employees, and disqualified	1,0	200	
Ë		persons. Complete Part II of Schedule L		22	
	00	Secured mortgages and notes payable to unrelated third parties		23	
	23	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities. Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25		_	13871
es		Organizations that follow SFAS 117, check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.			
Fund Balances	27	Unrestricted net assets	197964		206826
8	28	Temporarily restricted net assets		28	
힏	29	Permanently restricted net assets		29	
or Fu		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.		April 1	
Net Assets or	30	Capital stock or trust principal, or current funds		30	
set	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds		32	
let	33	Total net assets or fund balances	197964	33	206826
~	34	Total liabilities and net assets/fund balances	227066	34	220697

Pai	t XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash Z Accrual Other	1 S	,	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			- 1
	Schedule O.		-	<u> </u>
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		1
b	Were the organization's financial statements audited by an independent accountant?	2b		1
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?	2c	ļ.,	
	If the organization changed either its oversight process or selection process during the tax year, explain in	5	3.	÷-,
	Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were	增建		À
	issued on a consolidated basis, separate basis, or both:		100	,
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	1		أخذ
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			ļ
	the Single Audit Act and OMB Circular A-133?	3a		1
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.	3b	L	

Form 990 (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.

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization
WEISER B.P.O. ELKS LODGE #1683

Employer identification number 82 0184676

Par		Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.						
	0.9	(a) Donor advised funds	(b) Funds and other accounts					
1	Total number at end of year							
2	Aggregate contributions to (during year)							
3	Aggregate grants from (during year) .							
4	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, sub-	ject to the organization's exclusive legal c	ontrol? 🗌 Yes 🗌 No					
6	Did the organization inform all grantees, dused only for charitable purposes and not purpose conferring impermissible private I	for the benefit of the donor or donor advi	sor, or for any other					
Pai	t II Conservation Easements. Com	plete if the organization answered "Yes"	to Form 990, Part IV, line 7.					
1	Purpose(s) of conservation easements held	d by the organization (check all that apply).					
2	☐ Preservation of land for public use (e.g.☐ Protection of natural habitat☐ Preservation of open space Complete lines 2a through 2d if the organize easement on the last day of the tax year.	☐ Preservat	on of an historically important land area ion of a certified historic structure ution in the form of a conservation					
	•		Held at the End of the Tax Year					
а	Total number of conservation easements							
b	Total acreage restricted by conservation e		· · 					
c	Number of conservation easements on a		· ·					
ď	Number of conservation easements include	* *	1 1					
3	Number of conservation easements modifithe tax year ▶							
4	Number of states where property subject	to conservation easement is located ▶						
5	Does the organization have a written policy violations, and enforcement of the consent	cy regarding the periodic monitoring, inspe						
6	Staff and volunteer hours devoted to mon	itoring, inspecting, and enforcing conserva	ation easements during the year					
7	Amount of expenses incurred in monitorin ▶\$	g, inspecting, and enforcing conservation	easements during the year					
8	Does each conservation easement reports 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?		Yes ∐ No					
9	In Part XIV, describe how the organization balance sheet, and include, if applicable, the organization's accounting for conserve	the text of the footnote to the organization						
Pa		lections of Art, Historical Treasures, owered "Yes" to Form 990, Part IV, line 8						
1a	If the organization elected, as permitted u art, historical treasures, or other similar ass provide, in Part XIV, the text of the footnot	ets held for public exhibition, education, or	research in furtherance of public service					
b	If the organization elected, as permitted u historical treasures, or other similar assets provide the following amounts relating to	s held for public exhibition, education, or r these items:	research in furtherance of public service					
	(i) Revenues included in Form 990, Part							
	(ii) Assets included in Form 990, Part X							
2	If the organization received or held works following amounts required to be reported							
a b	Revenues included in Form 990, Part VIII, Assets included in Form 990, Part X .							

Par	Organizations Maintaining	Collections	of Art, His	storic	al Treasures	, or (Other Simila	ar Ass	ets (co	ontinu	ed)
3	Using the organization's acquisition, accollection items (check all that apply):	cession, and c	other recor	ds, ch	neck any of the	follo	wing that are	a sigi	nificant	use o	f its
а	Public exhibition		d		Loan or excha	ange	programs				
b	Scholarly research		е		Other						-
С	Preservation for future generations										
4	Provide a description of the organization Part XIV.	n's collections	s and expl	ain ho	ow they further	the o	organization's	exen	npt pun	oose i	n
5	During the year, did the organization solic assets to be sold to raise funds rather that	n to be mainta	ained as pa	art of t	the organization	's col	llection?			es 🗌	No
Par	Escrow and Custodial Arrai IV, line 9, or reported an amo					answe	ered "Yes" to	o Form	n 990,	Part	
								s not	□ Ye	es 🗌	No
b	If "Yes," explain the arrangement in Par	t XIV and con	nplete the	follov	ving table:				 		
						<u> </u>		Am	ount		
С	Beginning balance					. 1					
ď	Additions during the year					. —	<u>d</u>				
е	Distributions during the year						e				
f	Ending balance					. [1	<u>f </u>				
2a b	Did the organization include an amount If "Yes," explain the arrangement in Par	t XIV.				· ·				es 🗀	No
Par	t V Endowment Funds. Comp										
	(4	a) Current year	(b) Pno	r year	(c) Two year						
1a	Beginning of year balance					1111	1042-7-1		HELE		
þ	Contributions				24.35	. 14					r S
С	Net investment earnings, gains, and losses						, iii				
d	Grants or scholarships		ļ				i in March !		* 05(3)		
е	Other expenditures for facilities and programs					1000					
f g	Administrative expenses End of year balance					<u>: </u>			idir. Krim		51. 0 7
2	Provide the estimated percentage of the	e year end ba	lance held	d as:							
а	Board designated or quasi-endowment	>	%								
b	Permanent endowment ▶	%									
C	Term endowment ▶%										
За	Are there endowment funds not in the poorganization by:	ossession of the	he organiz	ation 1	that are held ar	nd ad	ministered for	r the		Yes	No
	(i) unrelated organizations								3a(i)		
	· · · · · · · · · · · · · · · · · · ·								3a(ii)		
b	If "Yes" to 3a(ii), are the related organiz								3b		
4	Describe in Part XIV the intended uses										
Pai	t VI Investments—Land, Buildi	ings, and Ed	quipment	t. See	Form 990, F	art X	, line 10.				
	Description of investment	(a) Cost or o (investr			Cost or other pasis (other)	•) Accumulated depreciation		(d) Boo	ok value	1
1a	Land		15000		15000	,		E		15	5000
b	Buildings		100000		100000					100	0000
c	Leasehold improvements	L									
d	Equipment	ļ	53350		53350		··			53	3350
e	Other										
Tota	I. Add lines 1a through 1e. (Column (d) mus	t equal Form 9	990, Part X,	, colur	nn (B), line 10(c).) .	<u> </u>	>		<u>168</u>	<u>8350</u>

Part VII	Investments—Other Securities	. See Form 990, Part X	, line 12.	
(a) [Description of security or category (including name of security)	(b) Book value	(c) Method of valua Cost or end-of-year mar	
Financial de	erivatives			
	d equity interests			
			·	
· · · · · · · · · · · · · · · · · · ·				
• • • • • • • • • • • • • • • • • • • •				
			 	
· · · · · · · · · · · · · · · · · · ·				
Total (Column (b) must equal Form 990, Part X, col. (B) line 12.)			Control of the Contro
Part VIII	Investments—Program Relate	d See Form 990 Part)		
) Description of investment type	(b) Book value		
	ny Description of investment type	(b) book value	(c) Method of value Cost or end-of-year ma	rket value
			 	
				
				
			 	
		· · · · · · · · · · · · · · · · · · ·		
Total. (Column)	(b) must equal Form 990, Part X, col. (B) line 13)		TO TO DECISE OF A PARTY OF A PARTY.	
Part IX	Other Assets. See Form 990, Pa	rt X, line 15.		
		(a) Description		(b) Book value
		···		
			·	
				
				
Total, (Colu	mn (b) must equal Form 990, Part X, col.	(B) line 15.)		
Part X	Other Liabilities. See Form 990,			
1.	(a) Description of liability	(b) Amount		THE PERSON NAMED IN
Federal inc				
				7.
Total. (Column	(b) must equal Form 990, Part X, col. (B) line 25) ▶		A COUNTY OF THE PARTY OF THE PA	

•		
Sched	, lule D (Form 990) 2009	Dana A
	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial S	Page 4
1		1
2	Total revenue (Form 990, Part VIII, column (A), line 12)	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 through 8	9
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenu	e per Return
1	Total revenue, gains, and other support per audited financial statements	1 1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	2 0 X
а	Net unrealized gains on investments	
b	Donated services and use of facilities	
С	Recoveries of prior year grants	
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 VIII, line 12, but not on line 1:	
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a	
b	Other (Describe in Part XIV)	
С	Add lines 4a and 4b	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	
Par	t XIII Reconciliation of Expenses per Audited Financial Statements With Expen	ses 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	
C	Other losses	
d	Other (Describe in Part XIV.)	William .
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:	
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a	
b	Other (Describe in Part XIV.)	
	Add lines 4a and 4b	. <u>4c</u>
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	. 5
	t XIV Supplemental Information	
	aplete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a	
	2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d a	and 4b. Also complete
uns	part to provide any additional information.	

Schedule D (For		Page 5
Part XIV	Supplemental Information (continued)	
•		
	······································	•••••
		•••••
		••••
• • • • • • • • • • • • • • • • • • • •		• • • • • • • • • • • • • • • • • • • •
		· • • • • • • • • • • • • • • • • • • •
		.
		• • • • • • • • • • • • • • • • • • • •
		•••••
		• • • • • • • • • • • • • • • • • • • •

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding
Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-F7

OMB No 1545-0047

Department of the Treasury nternal Revenue Service	Complete	organization en	tered more	than \$15,000	990, Part IV, lines 17, on Form 990-EZ, line See separate instruct	6a.	Open To Public Inspection
Name of the organization	ODOE # 455					Employer identif	ication number
WEISER B.P.O. ELKS L						82	0184676
Part I Fundraisin Form 990-	i g Activitie EZ filers ar	s. Complete if e not required	the orga to comp	nization a lete this p	answered "Yes" part.	to Form 990, Par	rt IV, line 17.
1 Indicate whether the a Mail solicitations		on raised funds t	hrough an		llowing activities. on of non-governr		y.
b Internet and em		ns	f [on of government		
c Phone solicitation	ons	,,,,	g 🔽		fundraising events	grants	
2a Did the organization or key employees lis	have a writt	en or oral agreer 990, Part VII) or	ment with a	any individ	ual (including office	ers, directors, trusto fundraising service	ees es? ☐ Yes 🗸 No
b If "Yes," list the ter to be compensated	n highest pai	id individuals or	entities (f		•	•	
(i) Name of individ or entity (fundraise		(ii) Activity	custody o	draiser have r control of outlons?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in	(vi) Amount paid to (or retained by) organization
			Yes	No		col (i)	
						, , ,	
				<u></u>			
							
			<u> </u>				
			<u> </u>				
Total	<u> </u>	<u> </u>	<u> </u>				
3 List all states in which registration or licensing		nization is regis	tered or li	censed to	solicit funds or t	nas been notified	it is exempt from
							·····
			••••••				

Pai	rt II	Fundraising Events. Comore than \$15,000 on F	omplete if the organization orm 990-EZ, line 6a. L	tion answered "Yes" t ist events with gross r	o Form 990, Part IV, lir eceipts greater than \$	ne 18, or reported 5,000.
			(a) Event #1 FIDDLE FESTIVAL	(b) Event #2	(c) Other events	(d) Total events (add col (a) through col. (c))
<u>o</u>			(event type)	(event type)	(total number)	coi. (c))
Revenue	1	Gross receipts	65944			65944
Be	2	Less: Charitable	-			
	3	contributions				
_		minus line 2)				
	4	Cash prizes				
	5	Noncash prizes				
ses	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
)irect	8	Entertainment				
"	9	Other direct expenses	54011	<u> </u>		54011
1	10 11	Direct expense summary. Ad	d lines 4 through 9 in co	olumn (d)		(54011)
Pal		Net income summary. Comb Gaming. Complete if the summary.	the organization ansv	vered "Yes" to Form	990, Part IV, line 19,	, or reported more
		than \$15,000 on Form	990-EZ, line 6a.			·
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
æ	1	Gross revenue				
uses	2	Cash prizes				
Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses .				A CONTRACTOR OF THE CONTRACTOR
	6	Volunteer labor	☐ Yes% ☐ No	☐ Yes% ☐ No	Yes% No	
	7	()				
	8	Net gaming income summar	y. Combine line 1, colur	nn d, and line 7	<u> </u> ▶	<u> </u>
	_			inin-it-in		Yes No
9 a		ter the state(s) in which the o the organization licensed to o			es?	9a
b						
10a	W	ere any of the organization's	gaming licenses revoke	d, suspended or termi	nated during the tax ye	ar? 10a
b		'Yes," explain:				
11	Do	es the organization operate of	gaming activities with n	onmembers?		entity
12		the organization a grantor, be		a trust or a member of	a partnership or other	rentity

Sched	dule G (Form 990 or 990-EZ) 2009	<u> -</u>		age 3
			Yes	No
13	Indicate the percentage of gaming activity operated in:	,		- 1
a	The organization's facility	-	, .	
b	All outside facility	┨	_	- 4
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	-	-	
	Name ▶			
	Address ▶	, '		. !
45-	Dans the constitution has a sentence with a defined on the contract of the con) ·	'	1
158	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a		
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$	13/42 1815		
C	If "Yes," enter name and address of the third party:	A 3.3		
	Name ▶	lines di	- i- - i-	
	Address ▶	.`		
16	Gaming manager information:	Same -		
				<u>.</u>
	Name ▶			
	Gaming manager compensation ▶ \$,	- 1- 2-	1
	Description of services provided ▶	. , 		
		7, h	ئر بەر ئىر	
	☐ Director/officer ☐ Employee ☐ Independent contractor	3		
17	Mandatory distributions:	12.3		

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?
b Enter the amount of distributions required under state law to be distributed to other exempt organizations

or spent in the organization's own exempt activities during the tax year ▶ \$

, SCHEDULE O (Form 990)

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990.

Name of the organization Employer identification number WEISER B.P.O. ELKS LODGE # 1683 0184676 82 PART VI - LINE 6, 7A, 7B THE ORGANIZATION HAS MEMBERS, WHO ELECT OFFICERS AND VOTE ON IMPORTANT DECISIONS EFFECTING THE LODGE. PART VI - LINE 19 THE ORGANIZATION FINANCIAL STATEMENTS, 990 AND OTHER DOCUMENTS ARE AVAILABLE UPON REQUEST AT THE ORGANIZATIONS BUILDING 38 N IDAHO ST WEISER, ID 83672