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Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

A F	or the	e 2009 calendar year, or tax year beginning APR 1, 2009 and ending	MAR 31, 2010)
B c	heck if	Please C Name of organization	D Employer identif	ication number
a	pplicable	USE IRS BENEVOLENT & PROTECTIVE ORDER OF ELKS		
	Addres	ss label or EVERETT LODGE #479		
	Name	type D D	91-0	142755
	Initial	See Number and street (or P.O. box if mail is not delivered to street address) Room/s	uite E Telephone numbe	er
	Termin	Specific 2802 HOYT AVE #100	425-	252-4179
	Ameno		G Gross receipts \$	195,766.
F	Application		H(a) Is this a group r	
	pendin	F Name and address of principal officer GARY DAVIS	for affiliates?	Yes X No
		SAME AS C ABOVE	H(b) Are all affiliates in	
1 T	ax-exe	empt status X 501(c) (8		a list (see instructions)
		te. ► N/A	 1	on number ▶ 1156
				M State of legal domicile, WA
	ırt I	Summary		
		Briefly describe the organization's mission or most significant activities TO INCUL	CATE THE PRIN	ICTPLES OF
Governance		CHARITY, JUSTICE, BROTHERLY LOVE AND FIDELIT		
naı		Check this box if the organization discontinued its operations or disposed of r		
ver		Number of voting members of the governing body (Part VI, line 1a)	3	5
Go	_	Number of independent voting members of the governing body (Part VI, line 1b)	4	5
S	l	Total number of employees (Part V, line 2a)	5	22
Activities &	5	Total number of volunteers (estimate if necessary INTERNAL REVENUE SER	VICE 6	0
trv	6	Total gross unrelated business revenue from Part VIII, course 12 12 12 12 12 12 12 12 12 12 12 12 12	7a	<u> </u>
A	7a	Net unrelated business taxable income from Form 990-T, line 34	7 <u>a</u> 7b	
	b	Net unrelated business taxable income nom Form 990-1, line 34		
		Contributions and greats (Part VIIII line 1b)	Prior Year 54,840.	Current Year 65,570.
ıne	ĺ	Contributions and grants (Part VIII, line 1h) Dragger aggregation (Part VIII, line 2a)	34,040.	03,370.
Revenue	l	Program service revenue (Part VIII, line 2g)	151.	1,678.
Re		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,469.	
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, aRECEIVED		
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, columnia) line 20 Grapts and similar amounts and (Part IX, column (A), lines 1.3)	58,460.	95,792.
	13	Grants and similar amounts paid (Fart IX, Column (A), lines 1-3)		
	l	Benefits paid to or for members (Part IX, column (A), line 4)	17 770	EC ECC
Expenses	ł	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	17,778.	56,566.
eu	l	Professional fundraising fees (Part IX, column (A), line 11e)		
ВX	l	Total fundraising expenses (Part IX, column (D), line 25)	25 000	1.60 074
_	l	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	35,082.	
	l	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	52,860.	
_ &	19	Revenue less expenses Subtract line 18 from line 12	5,600.	
Assets or		T	Beginning of Current Year	End of Year
SS	20	Total assets (Part X, line 16)	5,620,918.	
o i	i	Total liabilities (Part X, line 26)	3,245,182.	
		Net assets or fund balances Subtract line 21 from line 20	2,375,736.	2,245,687.
V-	irt II	Signature Block	and a the best of my beauties	dan and bakat it is two parent
2		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and stateme and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowle	edge	age and belief it is true, correct,
Sign		$\begin{pmatrix} 1 & 1 & 2 & 1 \\ 1 & 1 & 1 & 1 \end{pmatrix}$	1	
Sīgr	ו	Signature of officer	Data	
Her	е	, · · · · ·)	Date	
֓֞֝֟֝֟֝֟֝֟֝֟֓֓֓֓֓֟֟֓֓֓֟֟֓֓֓֓֓֟֓֓֓֓֓֟֓֓֓֓֓֓		GARY DAVIS, CHAIRMAN OF THE BOARD		
		Type or print name and title	I Chapter (
Paid		Preparer's Date	Self- (see in	rer's identifying number instructions)
Prep	arer's	signature P C 2 Charles CPA 7/26/10	employed L	
Use		yours it HASCAL SOURCEM AND COMPANY PLLC	EIN ▶	
-		self-employed) PO BOX 1188		
		ZIP + 4	Phone no 🕨 (425) 252-3173
May	the IF	RS discuss this return with the preparer shown above? (see instructions)		X Ves No

LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form **990** (2009)

Form		EVOLENT & PRORETT LODGE #	OTECTIVE ORDER OF 1		142755	Page 2
	rt III Statement of Progra			31-0	142/33	raye 2
1	Briefly describe the organization's TO INCULCATE THE	mission SEE See PRINCIPLES	CHEDULE O FOR CONT OF CHARITY, JUSTIC	E, BROTHERLY L		
	ENHANCE THE HAPPI	NESS OF ITS	IEF IN GOD; TO PROM MEMBERS; TO QUICK IVATE GOOD FELLOWS	EN THE SPIRIT	OF	
2	Did the organization undertake ar the prior Form 990 or 990-EZ? If "Yes." describe these new serv		ervices during the year which were n	not listed on	Yes [X No
3		cting, or make significa	nt changes in how it conducts, any p	orogram services?	Yes	X No
4	Section 501(c)(3) and 501(c)(4) or	ganizations and section	he organization's three largest progr a 4947(a)(1) trusts are required to rep any, for each program service report	ort the amount of grants an	d	
4a	AND CARRY OUT LOC	ONS AS A CENT CAL, REGIONA	including grants of \$ TRAL MEETING POINT L, STATE AND NATION VICE TO THE COMMUN	NAL PROGRAMS F		AN
4b	(Code) (Exper	nses \$	including grants of \$) (Revenue \$		
4c	(Code) (Experimental Code)	nses \$	including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$

4e Total program service expenses ► \$

Form **990** (2009)

) (Revenue \$

Form 990 (2009) EVERETT LODGE #479
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		<u>X</u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
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_		X
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		<u>X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		<u>X</u>
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		X
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		<u>X</u>
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	X	
•	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			
	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			
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		Х
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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		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		X
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		_X_
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? If "Yes,"			
	complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	000	X
		Form	99U /	2009)

Form 990 (2009)

Form 990 (2009) EVERETT LODGE #479
Part IV Checklist of Required Schedules (continued)

		i	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 employees? If "Yes," complete			
	Schedule J	23		X
24a	The state of the s			
	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		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		
d	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	1		
	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		Х
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	ŀ	ĺ	
	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		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
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		Х
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		Х
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
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		x
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		
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		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	
			990 (2009)
			•	

		•	Yes	No
15	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns Enter ·0· if not applicable			
ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
Ū	(gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 22			
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)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		X
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	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 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		1	ļ
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	ļ	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	ļ	Х
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		
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	ļ	X
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b	ļ	<u> </u>
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			١,,
	provided to the payor?	7a	 	X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	<u> </u>	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_	-	v
	to file Form 8282?	7c	 	X
	If "Yes," indicate the number of Forms 8282 filed during the year			İ
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	70		
	benefit contract?	7e 7f	 	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	 	
9	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	<u> </u>	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the	 _		
J	supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings			
	at any time during the year?	8	1	
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a		
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			
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)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	ļ	<u> </u>
<u>b</u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	<u> </u>	1	
		Form	990	(2009)

'Form 990 (2009)

EVERETT LODGE #479

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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

Sec	tion A. Governing Body and Management					·····	
		,				Yes	No
1a	Enter the number of voting members of the governing body	1a		5			
b	Enter the number of voting members that are independent	1b	<u> </u>	5		-	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	ip with	any other				
	officer, director, trustee, or key employee?			-	2		<u>X</u>
3	Did the organization delegate control over management duties customarily performed by or under the	he dire	ct supervision				
	of officers, directors or trustees, or key employees to a management company or other person?				3		<u>X</u>
4	Did the organization make any significant changes to its organizational documents since the prior Fo		90 was filed?		4		<u>X</u>
5	Did the organization become aware during the year of a material diversion of the organization's asse	ets?			5		<u>X</u>
6	Does the organization have members or stockholders?			_	6	Х	
7a	Does the organization have members, stockholders, or other persons who may elect one or more more more more more more more	embe	s of the				
	governing body?				'a	X	
þ	Are any decisions of the governing body subject to approval by members, stockholders, or other pe			7	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken	n durin	g the year				
	by the following			l l			
	The governing body?			-	3a	X	
	Each committee with authority to act on behalf of the governing body?			8	3b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ached	at the				
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O				9		<u>X</u>
sec	tion B. Policies (This Section B requests information about policies not required by the Internal F	revent	ie Code)			. 1	
40-	December of the state of the st			Г		Yes	No X
	Does the organization have local chapters, branches, or affiliates?	aban	toro offiliatos	1	0a		
D	If "Yes," does the organization have written policies and procedures governing the activities of such and branches to ensure their operations are consistent with those of the organization?	тспар	ters, armates,		ОЬ		l
44	Has the organization provided a copy of this Form 990 to all members of its governing body before f	filina ti	no form?		11	Х	
11	Describe in Schedule O the process, if any, used by the organization to review this Form 990	ming t	ie ioiiii.	<u> </u>	'' -		
	Does the organization have a written conflict of interest policy? If "No," go to line 13				2a		х
	Are officers, directors or trustees, and key employees required to disclose annually interests that co	uld ar	ua rica	- <u>-</u>	20		
D	to conflicts?	Juliu gi	ve rise		2b		Į
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	"Yes	" describe	<u> </u>	20		
·	in Schedule O how this is done	, 55,	400000	1	2c		
13	Does the organization have a written whistleblower policy?			<u> </u>	13		X
14	Does the organization have a written document retention and destruction policy?				14		X
15	Did the process for determining compensation of the following persons include a review and approv	al by	ndependent				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	-	•				
а	The organization's CEO, Executive Director, or top management official			1	5a	х	
b	Other officers or key employees of the organization				5b	Х	
	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 arrange	ement	with a				
	taxable entity during the year?			1	6a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eva-	aluate	its participation				l
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the org	ganıza	tion's	-			1
	exempt status with respect to such arrangements?			1	6ь		
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed ▶WA						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (501	(c)(3)s only) ava	lable fo	r		
	public inspection. Indicate how you make these available. Check all that apply						
	Own website Another's website X Upon request						
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, or	conflic	t of interest pol	cy, and	fınar	ncial	
	statements available to the public						
20	State the name, physical address, and telephone number of the person who possesses the books a	and re	cords of the org	anızatıoı	n >		
	LODGE SECRETARY - 425-252-4179						
	2802 HOYT AVE #100, EVERETT, WA 98201				a 1	<u>aan /</u>	2009)

Form 990 (2009) 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

Hours per week week week week week week week we	X Check this box if the organization did not c	(B)	(C)						(D)	(E)	(F)
Per week Per week	Name and Title		l (c					lv)	Reportable		
CHAIRMAN OF THE BOARD 6.00 X X 0. 0. BRUCE CRAWFORD HOUSE COMMITTEE CHAIRMAN 6.00 X X 0. 0. DENNIS ANDERSEN TRUSTEE 6.00 X 0. 0. DOUG BERRY TRUSTEE 6.00 X 0. 0. SHARON SKURLOCK		per							from the organization	from related organizations	other compensation
### BRUCE CRAWFORD HOUSE COMMITTEE CHAIRMAN 6.00 X X 0. 0. DENNIS ANDERSEN TRUSTEE 6.00 X 0. 0. DOUG BERRY TRUSTEE 6.00 X 0. 0. SHARON SKURLOCK		6.00	x		x				0.	0.	0.
TRUSTEE 6.00 X 0. 0. DOUG BERRY TRUSTEE 6.00 X 0. 0. SHARON SKURLOCK	BRUCE CRAWFORD HOUSE COMMITTEE CHAIRMAN										0.
TRUSTEE 6.00 X 0. 0. SHARON SKURLOCK	TRUSTEE	6.00	x						0.	0.	0.
	TRUSTEE	6.00	x						0.	0.	0.
		6.00	x						0.	0.	0.
					-		ļ 				
				_							
			-	_							
			-	_			-				
			-								

Form 990 (2009)

EVERETT LODGE #479

Pan	(A) Name and title	(B) Average			(C Pos	C) ition			(D) Reportable compensation	(E) Reportable compensation		(F) stimate	
		per week	Individual trustee or director	Institutional trustee	Officer		Highest compensated Semployee		from the organization (W 2/1099-MISC)	from related organizations (W-2/1099-MISC)	cor	other npensa from th ganizat nd relat janizati	ation e ion ied
										,			
													
16	Total								0.	C			0.
2	Total number of individuals (including but is compensation from the organization	not limited to th	nose	liste	ed al	bovi	e) wł	no re			• 1	————	0
	Did the organization list any former officer line 1a? If "Yes," complete Schedule J for s			, ke	y em	nplo	yee,	or h	nighest compensated ei	mployee on	3	Yes	No X
	For any individual listed on line 1a, is the s and related organizations greater than \$15 Did any person listed on line 1a receive or	60,000? If "Yes,	" co	mple	ete S	Sche	edule	e J f	or such individual	-	4	-	Х
Sect	the organization? If "Yes," complete Schedion B. Independent Contractors	dule J for such	pers	on							5	<u>L</u> _	Х
	Complete this table for your five highest countries the organization NONE (A)	ompensated in	depe	ende ——	ent c	onti	racto	ors t	hat received more than (B)	\$100,000 of compe		from (C)	
	Name and business	s address							Description of s	services		ensatio	on
			·								·—··—··		
	Total number of independent contractors (\$100,000 in compensation from the organ	-	ot lii	mite	d to		se lis	sted	l above) who received n	nore than	Form	1 990 (2000

Pa	rt VII	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
Contributions, gifts, grants and other similar amounts	1 a b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions) All other contributions, gifts, grants, and				
Contributi and other	g	similar amounts not included above Noncash contributions included in lines 1a-1f \$ Total. Add lines 1a-1f	65,570.			
	2 a	Business Code	03,370.			
Program Service Revenue	b d					
Pro		All other program service revenue Total. Add lines 2a-2f				
	3 4 5	Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties	1,678.			1,678.
	6 a b	Gross Rents Less rental expenses (i) Real 2,738. 2,738.				
		Rental income or (loss) Net rental income or (loss) Gross amount from sales of assets other than inventory	3,620.			3,620.
	С	Less cost or other basis and sales expenses Gain or (loss)				
Other Revenue	8 a	Net gain or (loss) Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18				
Off	С	Less direct expenses b 932. Net income or (loss) from fundraising events Gross income from gaming activities See Part IV, line 19	3,761.	3,761.		
	С	Less direct expenses b Net income or (loss) from gaming activities Gross sales of inventory, less returns	2,260.	· · · · · · · · · · · · · · · · · · ·		2,260.
		and allowances Less cost of goods sold Net income or (loss) from sales of inventory	9,300.	9,300.		
	11 a	MISCELLANEOUS Business Code 900099	9,603.	9,603.		
	c d e	All other revenue Total. Add lines 11a-11d	9,603.			
93200	12	Total revenue See instructions	95,792.	22,664.	0.	7,558.

`Form 990 (2009)

EVERETT LODGE #479

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).

	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	40,735.			
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
0	Payroll taxes	15,831.	· · · · · · · · · · · · · · · · · · ·		
1	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting	3,515.			
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other				
2	Advertising and promotion	<109.	>		
3	Office expenses	3,687.			
4	Information technology				
5	Royalties				
6	Occupancy	4,443.			
7	Travel				
В	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	1,704.			
0	Interest	34,388.			
1	Payments to affiliates				
2	Depreciation, depletion, and amortization	69,384.			
3	Insurance	2,367.			
4	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)				
а	MA WEG	16,667.			
b	UTILITIES	14,175.			
С	MISCELLANEOUS	5,416.			
d	REPAIRS AND MAINTENANCE	3,879.			
e	POSTAGE AND SHIPPING	2,856.	• •		
f	All other expenses	6,902.			
5	Total functional expenses Add lines 1 through 24f	225,840.			
 6	Joint costs Check here ▶ if following				
	SOP 98-2 Complete this line only if the organization			}	
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				

932010 02-04-10

Form 990 (2009)

art	X	Balance Sheet		Т	(D)
		_	(A) Beginning of year	<u> </u>	(B) End of year
	1	Cash - non-interest bearing	3,880.	1	8,095.
	2	Savings and temporary cash investments	250,648.	2	252,720
	3	Pledges and grants receivable, net		3	
Ī	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key			
- 1		employees, and highest compensated employees. Complete Part II			
		of Schedule L		5	
	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		6	
٠	7	Notes and loans receivable, net		7	
Hasella	8	Inventories for sale or use		8	4,079
₹	9	Prepaid expenses and deferred charges	2,718.	9	1,464
		Land, buildings, and equipment cost or other			
		basis Complete Part VI of Schedule D 10a 3, 257,	969.		
	b		384.	10c	3,188,585
	11	Investments - publicly traded securities		11	
	12	Investments - other securities See Part IV, line 11		12	
- 1	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	
- 1	15	Other assets See Part IV, line 11	5,363,672		5,095,797
	16	Total assets. Add lines 1 through 15 (must equal line 34)	5,620,918.		8,550,740
	17	Accounts payable and accrued expenses	3,354.		9,695
	18	Grants payable		18	***************************************
1	19	Deferred revenue	33,180.	19	41,515
1:	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employe	es,		
		highest compensated employees, and disqualified persons. Complete Pa			
ן נֿ		of Schedule L.		22	
- :	23	Secured mortgages and notes payable to unrelated third parties	3,000,106.	23	6,024,588
١:	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities Complete Part X of Schedule D	208,542.		229,255
1:	26	Total liabilities. Add lines 17 through 25	3,245,182.	26	6,305,053
		Organizations that follow SFAS 117, check here and comp			
χ.		lines 27 through 29, and lines 33 and 34.			
Net Assets or rund balances	27	Unrestricted net assets		27	
<u> </u>	28	Temporarily restricted net assets		28	
9	29	Permanently restricted net assets		29	
5		Organizations that do not follow SFAS 117, check here X ar	nd		
5		complete lines 30 through 34.			
3	30	Capital stock or trust principal, or current funds	0.	30	0
	31	Paid in or capital surplus, or land, building, or equipment fund	0.		0
. :	32	Retained earnings, endowment, accumulated income, or other funds	2,375,736		2,245,687
ž ;	33	Total net assets or fund balances	2,375,736		2,245,687
	34	Total liabilities and net assets/fund balances	5,620,918		8,550,740

Form **990** (2009)

	Yes	No
1 Accounting method used to prepare the Form 990	h X Accrual Other	
If the organization changed its method of accounting from	rior year or checked "Other," explain in Schedule O	
2a Were the organization's financial statements compiled or re	wed by an independent accountant?	
b Were the organization's financial statements audited by an	ependent accountant?	X
c If "Yes" to line 2a or 2b, does the organization have a comm	ee that assumes responsibility for oversight of the audit,	
review, or compilation of its financial statements and select	of an independent accountant?	_
If the organization changed either its oversight process or s	ction process during the tax year, explain in Schedule O	
d If "Yes" to line 2a or 2b, check a box below to indicate whe	r the financial statements for the year were issued on a	
consolidated basis, separate basis, or both		
X Separate basis Consolidated basis	n consolidated and separate basis	
3a As a result of a federal award, was the organization required	undergo an audit or audits as set forth in the Single Audit	
Act and OMB Circular A-133?	3a	_X
b If "Yes," did the organization undergo the required audit or	dits? If the organization did not undergo the required audit	
or audits, explain why in Schedule O and describe any step	aken to undergo such audits	

Schedule D

Department of the Treasury

Internal Revenue Service

(Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes." to Form 990.

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.

2009
Open to Public Inspection

Name of the organization

BENEVOLENT & PROTECTIVE ORDER OF ELKS

Employer identification number 91-0142755

EVERETT LODGE #479 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts 10 Total number at end of year 73,753. 2 Aggregate contributions to (during year) 71,732. Aggregate grants from (during year) Aggregate value at end of year 210,564. 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year a Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes violations, and enforcement of the conservation easements it holds? 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) Yes and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

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

Schedule D (Form 990) 2009

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

Part VI Investments - Land, Buildi	n <mark>gs, and Equipment.</mark> Se	e Form 990, Part X, line 1	0	
Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		311,773.		311,773.
b Buildings		2,786,196.	52,241.	2,733,955.
c Leasehold improvements				
d Equipment		160,000.	17,143.	142,857.
e Other				
Total Add lines 1a through 1e (Column (d) mus	t equal Form 990. Part X. colur	nn (B), line 10(c))	•	3,188,585.

Schedule D (Form 990) 2009

Yes

3a(i)

3a(ii) 3b

No

by

(i) unrelated organizations

(ii) related organizations

Schedule D (Form 990) 2009 EVERETT LO Part VII Investments - Other Securities.	DGE #479	ne 12	91-	0142755 Page
(a) Description of security or category) Method of valuation	on
(including name of security)	(b) Book value		or end-of-year marke	
Financial derivatives				
Closely-held equity interests				
Other				
				·····
				
				
				· · · · · · · · · · · · · · · · · · ·
Total (Col (b) must equal Form 990, Part X, col (B) line 12.)				
Part VIII Investments - Program Related.	See Form 990, Part X, I	ine 13		7
(a) Description of investment type	(b) Book value		c) Method of valuation	
\	ļ , , , , , , , , , , , , , , , , , , ,	Cost	or end-of year marke	et value
				
			 	
				
	- 			
Total (Col (b) must equal Form 990, Part X, col (B) line 13)				**************************************
Part IX Other Assets. See Form 990, Part X, Iir				
	a) Description			(b) Book value
CONSTRUCTION IN PROCESS				5,095,797
	·········			
		 		
				
			<u></u>	
			····	
Total. (Column (b) must equal Form 990, Part X, col (B) li	ine 15.)			5,095,797
Part X Other Liabilities. See Form 990, Part	X, line 25	· · · · · ·	, . <u> </u>	5,050,15
1 (a) Description of liability		(b) Amount		
Federal income taxes				
RESTRICTED FUNDS		210,564.		
ADVANCE FROM LLC		18,691.		
Total. (Column (b) must equal Form 990, Part X, col (B) li	ne 25) 🕒	229,255.		

2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

932053 02-01-10

Schedule D (Form 990) 2009

'SCHEDULE O

Supplemental Information to Form 990

(Form 990)

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

BENEVOLENT & PROTECTIVE ORDER OF ELKS EVERETT LODGE #479

Employer identification number 91-0142755

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
IN GOD; TO PROMOTE THE WELFARE AND ENHANCE THE HAPPINESS OF ITS
MEMBERS; TO QUICKEN THE SPIRIT OF AMERICAN PATRIOTISM; TO CULTIVATE
GOOD FELLOWSHIP; TO PERPETUATE ITSELF AS A FRATERNAL ORGANIZATION, AND
TO PROVIDE FOR ITS GOVERNMENT, THE BENEVOLENT AND PROTECTIVE ORDER OF
ELKS OF THE UNITED STATES OF AMERICA WILL SERVE THE PEOPLE AND
COMMUNITIES THROUGH BENEVOLENT PROGRAMS, DEMONSTRATING THAT ELKS CARE
AND ELKS SHARE.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
ITSELF AS A FRATERNAL ORGANIZATION, AND TO PROVIDE FOR ITS GOVERNMENT,
THE BENEVOLENT AND PROTECTIVE ORDER OF ELKS OF THE UNITED STATES OF
AMERICA WILL SERVE THE PEOPLE AND COMMUNITIES THROUGH BENEVOLENT
PROGRAMS, DEMONSTRATING THAT ELKS CARE AND ELKS SHARE.
FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION IS A NON-PROFIT
CORPORATION WITH MEMBERS.
FORM 990, PART VI, SECTION A, LINE 7A: MEMBERS ELECT THE GOVERNING BODY.
FORM 990, PART VI, SECTION B, LINE 11: THE GOVERNING BODY REVIEWS THE
YEAR-END FINANCIAL STATEMENTS ALONG WITH THE FORM 990.
FORM 990, PART VI, SECTION B, LINE 15: NO COMPENSATION IS PAID FOR THE
ORGANIZATION'S OFFICERS. THERE ARE NO KEY EMPLOYEES.

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

Schedule O (Form 990) 2009

12330723 790342 41518

18

SCHEDULE O

(Form 990)

Department of the Treasury

Supplemental Information to Form 990

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

Attach to Form 990.

2009
Open to Public Inspection

Internal Re	/enue Se	rvice										O F OI II							порссион	
Name of the organization					BENEVOLENT & PROTECTIVE ORDER OF ELKS EVERETT LODGE #479 Employer identification numb 91-0142755												nber			
FORM	990) ,	PART	VI	, SE	CTI	ON	C,	LI	NE	19	: DC	CUM	ENTS	AR	EA	VAII	LABLE U	PON	
WRIT	TEN	RE	QUES'	r.	WRI	TTE	N	REQ	UES	STS	SH	OULI) BE	MA]	LED	TO	THI	E LODGE	SECRETAL	RY.
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	··																			

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

► Attach to your tax return.

OMB No 1545-0172 Attachment Sequence No 67

► See separate instructions.

990

Identifying number

Name(s) shown on return	-	· · · · ·		Business or a	tivity to wh	Identifying number		
BENEVOLENT & PROTECTIV	አሮሞ 10		01_0142755					
EVERETT LODGE #479 Part Election To Expense Certain Property	· Hadas Castina 1	70. Neto: If we				AGE 10	1/ hoforo ve	91-0142755
					орепу, с	complete Part	1	250,000.
1 Maximum amount See the instructions f	•			S			2	230,000.
2 Total cost of section 179 property placed)				3	800,000.
3 Threshold cost of section 179 property b							4	800,000.
4 Reduction in limitation Subtract line 3 fro							5	
5 Dollar limitation for tax year Subtract line 4 from line 1		-0- If married fil				(-) Flt		
6 (a) Description of prop	епу		(b) Cost	(business use	Only)	(c) Elected	COST	
				·				
					-			
			L			······································		
7 Listed property Enter the amount from li					7			
8 Total elected cost of section 179 proper	•	in column (c), lines 6	and 7			8	
9 Tentative deduction Enter the smaller of							9	
10 Carryover of disallowed deduction from I	•					10		
11 Business income limitation. Enter the sm		•		•	ine 5		11	·
12 Section 179 expense deduction Add line	-			an line 11			12	
13 Carryover of disallowed deduction to 20				<u> </u>	13			
Note: Do not use Part II or Part III below for I								
Part II Special Depreciation Allowan	ce and Other D	epreciation	(Do not	include list	ed prope	erty)	——Т	
14 Special depreciation allowance for qualif	ied property (oth	ner than liste	d proper	ty) placed	in service	e during		
the tax year							14	
15 Property subject to section 168(f)(1) election	tion						15	
16 Other depreciation (including ACRS)					··-···································		16	69,384.
Part III MACRS Depreciation (Do not	include listed pr			ions)				
		Se	ection A					
17 MACRS deductions for assets placed in	service in tax ye	ars beginnir	ng before	2009			_ 17	
18 If you are electing to group any assets placed in service						<u> </u>		
Section B - Assets F					the Ger	neral Deprecia	ation Syste	em
(a) Classification of property	(b) Month and year placed in service	(business/ii	or depreciation nvestment un instructions	se (a)	Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property								
b 5-year property								
c 7-year property								
d 10-year property								
e 15-year property								
f 20-year property								
g 25-year property				2	25 yrs		S/L	
. Decidental mental arrange	/			2	7 5 yrs.	MM	S/L	
h Residential rental property	/			2	7 5 yrs	MM	S/L	
	/			3	9 yrs	ММ	S/L	
Nonresidential real property	/					ММ	S/L	
Section C - Assets Pla	aced in Service	During 200	9 Tax Ye	ar Using t	he Alter	native Depre	ation Sys	tem
20a Class life						·	S/L	
b 12-year				1	2 yrs		S/L	
c 40-year	/			4	IO yrs	ММ	S/L	
Part IV Summary (See instructions)								
21 Listed property Enter amount from line 2	28		,	-			21	
22 Total. Add amounts from line 12, lines 14	4 through 17, lin	es 19 and 20	0 ın colun	nn (g), and	line 21			
Enter here and on the appropriate lines of	of your return Pa	artnerships a	and S cor	porations -	see inst	r	22	69,384.
23 For assets shown above and placed in s	ervice during the	e current yea	ar, enter t	he				
portion of the basis attributable to section	n 263A costs				23	 		
18251 11-04-09 LHA For Paperwork Reduction	Act Notice, see	separate in	struction	ns				Form 4562 (2009)

Form 4562 (2009)

EVERETT LODGE #479

91-0142755 Page 2

Section A - Deprecitation and Other Information (Coution: See the instructions for limits for passenger automobiles) 24a Do you have evidence to support the bissines/investment use claimed? 1 yes	Part V Listed Proper recreation, or a Note: For any through (c) of S	amusement) vehicle for wh	nich you are	using the	standard	d mileag	e rate oi			•						
(a) (b) (c) (d) (e) (f) (g) (poptry (glar wholes first))								ınstruc	tions for li	mits for	passeng	er auton	nobiles)			
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Form 4562 (2009)