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990 Form

## **Return of Organization Exempt From Income Tax**

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

Open to Public

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 Inspection 2009, and ending , 20 10 For the 2009 calendar year, or tax year beginning April 1 March 31 D Employer identification number C Name of organization BPOE 287 Please B Check if applicable use IRS Doing Business As Walla Walla Elks Lodge No. 287 0142870 Address change Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number Name change type. (509) 525-2870 351 E Rose Street ☐ Initial return Specific City or town, state or country, and ZIP + 4 ☐ Terminated Walla Walla, WA 99362 416511.55 G Gross receipts \$ Amended return Name and address of principal officer Greg Heimgartner H(a) Is this a group return for affiliates? Yes Application pending **☑** No 351 E. Rose, Walla Walla, WA 99362 H(b) Are all affiliates included? Yes Vo No Tax-exempt status 501(c) ( 8 ) ◄ (insert no.) 4947(a)(1) or If "No," attach a list (see instructions) Website: ▶ 1156 H(c) Group exemption number ▶ Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ M State of legal domicile L Year of formation Part I Summary 1 Briefly describe the organization's mission or most significant activities. The Lodge supports a variety of activities and programs to meet community and member needs. Youth activities, scholarships, drug awareness and recognition of veterans are examples of lodge activities. 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a). . Activities & 5 4 Number of independent voting members of the governing body (Part VI, line 1b) 20 5 5 Total number of employees (Part V, line 2a) . . . . . 800 6 6 Total number of volunteers (estimate if necessary) 30210.51 7a Total gross unrelated business revenue from Part VIII, column (C), line 12. 7a b Net unrelated business taxable income from Form 990-T, line 34. Pnor Year Current Year 116969.39 97056.50 8 Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) 61644.25 8198.78 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 308402.94 214281.54 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 478016.58 319536.82 O 0 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 0 0 14 Benefits paid to or for members (Part IX, column (A), line 4) . 280806.03 175387.47 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional tuneraising fees (Part IX, column (A), line 11e)

b Total fundraising expenses (Part IX, column (D), line 25) ▶

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f) . . . . ٥ 266965.21 303416.65 Total expenses: Add line 3 3-17 (must equal Part IX, column (A), line 25). Revenue less expenses. Subtract line 18 from line 12 584222.68 442352.68 -106206.10 122815.86 e o End of Year Beginning of Current Year 1170345.56 1157320.47 Total adsets (Rart X, line 16) 20 178490.34 292663.75 Total liabilities (Part X, line 26) Net assets or fund balances. Subtract line 21 from line 20 991855.22 864656.72 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 6-15-10 Sign Here or print name and title Check if Preparer's identifying number Preparer's (see instructions) signature employed ► 🗸

Form **990** (2009)

535-34-3490

1720665

735-1014 🗸 Yes 🗌 No

Louis H. Beckman, CPA

7701 W 4th Ave, J 101, Kennewick, WA 99336

▶ 91

Phone no ► ( 509 )

Par	Statement of Program Service Accomplishments	
1	Briefly describe the organization's mission: The Lodge supports a variety of programs and activities designed to meet the community and member needs. Youth activities, scholarships, drug awareness programs and recognition of veterans are examples of Lodge activities	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	No
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 an allocations to others, the total expenses, and revenue, if any, for each program service reported.	ıd
4a	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ ) N/A	
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$) N/A	
40	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )	
70	N/A	
4d	Other program services. (Describe in Schedule O.) (Expenses \$ 0 including grants of \$ 0 ) (Revenue \$ 0 )	
4e	Total program service expenses ▶ 0	

Pal	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		✓
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		1
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_		✓
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		✓
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, VII, IX, or X as applicable	11		1
•	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		✓
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		·	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u>/</u>
14a	3	14a		✓
	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		✓
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		✓_
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		1
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		✓
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		✓_
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		✓_

Pa	t IV 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		1
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		1
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		_
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
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 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		<b>√</b>
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 A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		<b>√</b>
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		<b>\</b>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<b>\</b>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		✓
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		✓
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		✓
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,			,
38	Part VI	37		1
		_ 30		<b>V</b>

Par	rt V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
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 20			
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	<b>✓</b>	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	1	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	1	
	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		1
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		✓
		5b		✓
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	_		,
_	Prohibited Tax Shelter Transaction?	5с 6а		· V
	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?	oa		<u> </u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		1
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	- <u>-</u>		
	and services provided to the payor?	7a		<b>√</b>
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<b>-</b>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		1
	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		<b>√</b>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		✓
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		<b>√</b>
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		<b>√</b>
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	1		
	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.			
	Did the organization make any taxable distributions under section 4966?	9a		<b>√</b>
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		✓
	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	cross recorpts, included on Form 550, Fact vin, line 12, for public doe of clob facilities			
	Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders			
	dross moorie nom members of shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
i2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
D	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.   12b	ı l		

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			
ь	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		✓
3	Did the organization delegate control over management duties customarily performed by or under the direct			
-	supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		1
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		<b>√</b>
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5	_	<b>~</b>
6	Does the organization have members or stockholders?	6	<b>√</b>	
7a				
	of the governing body?	7a	<b>✓</b>	1
h	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
Ū	the year by the following:			
9	The governing body?	8a	1	
	Each committee with authority to act on behalf of the governing body?	8b	1	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			
•	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a		1
Sec	tion B. Policies (This Section B requests information about policies not required by the Inter-			
	enue Code.)			
			Yes	No
102	Does the organization have local chapters, branches, or effiliates?	10a		1
	Does the organization have local chapters, branches, or affiliates?		-	
D	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	10b		/
44	affiliates, and branches to ensure their operations are consistent with those of the organization?	100		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11		1
444				
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	12a	1	<u>`</u>
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12.0	•	
U	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	1	
		120		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	12c		1
12	describe in Schedule O how this is done	13		<u> </u>
13	Does the organization have a written whistleblower policy?	14		<u>,</u>
14	Does the organization have a written document retention and destruction policy?	<del>'</del> -		
15	Did the process for determining compensation of the following persons include a review and approval by			
_	Independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official	15a		
		15b		<del>-</del>
D	Other officers or key employees of the organization	130		<u> </u>
16-	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			ļ
IOa	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	16a		1
	with a taxable entity during the year?	104		
D	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 the organization's exempt status with respect to such arrangements?	16b		<b>-</b>
Sec	tion C. Disclosure	100		<u> </u>
17 10	List the states with which a copy of this Form 990 is required to be filed None	·····		• • • • • •
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	ot inte	erest	
	policy, and financial statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and reco organization: ► Walla Walla Elks Lodge No. 287, 351 E Rose, Walla Walla, WA 99362	rds of	the	

# 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)				C)	-		tor, or trustee. (D)	(E)	(F)
Name and Title	Average hours per week						compensation from	Reportable compensation from related	Estimated amount of other	
		Individual trustee or director	Institutional trustee	cer	Key employee	Highest compensated employee	ner	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
Harold Lee Exalted Ruler	4			1				0	0	0
Greg Heimgartner Leading Knight	3			1				0	0	0
Barbara Noel Loyal Knight	2			<b>√</b>				0	0	0
Timothy Stewart  Lecturing Knight	2			1				0	o	0
Carolyn Walery Secretary	40			✓				36000.00	0	0
Paul Eagon Treasurer	2			1				150.00	0	0
Noelle Pemberton Tiler	2			1				0	0	0
Doug McMasters Esquire	3			1				0	o	0
Lauri Jackson Inner Guard	1			<b>√</b>				0	0	0
Russ Chandler Chaplain	1			<b>√</b>				0	0	0
Dan Seese Trustee	3	1		<b>\</b>				0	0	0
Ron Brookshire Trustee	3	1		<b>\</b>				0	0	0
David Stalberger, PER Trustee	3	<b>✓</b>		<b>&gt;</b>				0	o	0
Pete Dahlquist Trustee		1		<b>√</b>				0	0	0
Jim Oakley Trustee	3			<b>√</b>				0	0	0

Pa	Section A. Officers, Directors, Trustees, Ke			/ Employees, and High					t Compensate	s (continued)			
	(A)	(B)			(6	C)			(D)	(E)	(F)		
	Name and title	Average hours per week	Individual or directo	nstitutional trustee	Officer	a Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportab compensate from relate organizatio (W-2/1099-M	amount of other compensation from the organization		
			trustee	trustee		8	pensated				and related organizations		
									<u> </u>				
<u>1b</u>	Total		•				•	<b>•</b>	36150.00				
2	Total number of individuals (including but reportable compensation from the organization)	not limited ation ►	to the	ose	liste	ed a	bove	) wh	no received mo	ore than \$1	00,000 in		
											Yes No		
3	Did the organization list any <b>former</b> office employee on line 1a? <i>If "Yes," complete S</i>							oyee	e, or highest c	ompensate	ed 3 🗸		
4	For any individual listed on line 1a, is the sthe organization and related organizations individual.												
5	Did any person listed on line 1a receive services rendered to the organization? If "	or accrue Yes," comp	comp lete	ens Sch	satio edu	on f le J	rom a	any uch	unrelated org		or		
_Se	tion B. Independent Contractors												
1	Complete this table for your five highest compensation from the organization.	ompensate	d ind	epe	nde	nt c	ontra	cto	rs that received	d more thai	n \$100,000 of		
	(A) Name and business add	iress							(B) Description of s	ervices	(C) Compensation		
N/A													
_					_								
	Total number of independent contractors (i	ncluding b	ıt not	lımi	ited	to t	hose	liste	ed above) who	received			
_	more than \$100,000 in compensation from												

Par	t VII	Statement of Re	venue						
						(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					
gra		Membership dues		1b	97056.50				
t, ar	С	Fundraising events .		1c					
ig i	d	Related organizations		1d					
Sir	е	Government grants (contri	butions).	1e					
ig is	f	All other contributions, gifts, g							
इ		and similar amounts not inclu		1f	L				
Contributions, gifts, grants and other similar amounts		Noncash contributions include Total. Add lines 1a–1f			<b>.</b>	97056.50			
	<u>''</u>	Total: Add lines 1a-11			Business Code	37030.30			
eur	2a								
Re	b								
<u>ë</u>	c	***************************************							
Ser	d								_
Ë	е								
Program Service Revenue	f	All other program service					<del>,,,,,,,,,</del>		
	<u>g</u>	Total. Add lines 2a-2f	· · · ·	<u> </u>	▶				
	3	Investment income (inc	-		_	8,198.78			
		other similar amounts)			🟲 }	0,150.76			
	5	Income from investment of Royalties							
		rioyamos, , , , , ,	(ı) Real	<u> </u>	(II) Personal				
	6a	Gross Rents	6649	4.40					
	1	Less: rental expenses		0					
		Rental income or (loss)		4.40					
	d	Net rental income or (lo	oss)	· ·	>	66494.40			
	7a	Gross amount from sales of	(i) Securition	es	(II) Other				
		assets other than inventory							
	b	Less. cost or other basis							
		and sales expenses .							
	d	Gain or (loss)			▶	·		·····	
ø		-							
Revenue	oa	Gross income from events (not including \$	fundraisii		:				
ě		of contributions reported	d on line 1	c).		*			
_		See Part IV, line 18		. a					İ
Other		Less: direct expenses							
0	C	Net income or (loss) fro	m fundrais	sing e	vents . ▶				
	9a	Gross income from gam	ing activitie	es.	47470 25				
	_	See Part IV, line 19 Less: direct expenses.		. a . b	47478.25 14564.64			·	
		Net income or (loss) fro				32913.61			
	i	Gross sales of inve			·				
		returns and allowances			177708.86				
	b	Less: cost of goods sol	ld	b	82410.09				
	С	Net income or (loss) fron		rvento		95298.77			
		Miscellaneous Reve			Business Code		<del></del>		
	b						<del></del>		<u> </u>
	C	All athor was and				19574.76			
		All other revenue Total. Add lines 11a-11				19574.76			
		Total revenue. See ins				319536.82			

Part IX Statement of Functional Expenses

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

	All other organizations must complete col	umn (A) but are no	required to com	plete 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	36000.00	<u></u>		
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	127101.06			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions).				
9	Other employee benefits	12286.41			
10	Payroll taxes	36577.31			
11	Fees for services (non-employees):				
	Management			· · · · · · · · · · · · · · · · · · ·	
	Legal	3500.00			
_	Accounting	3300.00			
d	Lobbying				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
9 12	Other	·			
13	Office expenses	6306.79			
14	Information technology				
15	Royalties				
16	Occupancy	46711.77			
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization.	24332.47			
23	Insurance	9348.00			
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			
а	on or total expenses on our or mile 20 doesn,				
b			-		
c					
d					
e					
f	All other expenses	140188.87			
25_	Total functional expenses. Add lines 1 through 24f	442352.68			
26	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				

_	rt X	Balance Sheet		<del>.</del>		Page II
	_			(A) Beginning of year		(8) End of year
	1	Cash-non-interest-bearing		16299.13	1	9637.11
	2	Savings and temporary cash investments		45887.26	2	78970.36
	3	Pledges and grants receivable, net		0	3	0
	4	Accounts receivable, net		5503.22	4	165.64
	5	Receivables from current and former officers, of	lirectors, trustees, key			
		employees, and highest compensated employee Schedule L	· ·	0	5	0
	6	Receivables from other disqualified persons (as 4958(f)(1)) and persons described in section 4 Part II of Schedule L	958(c)(3)(B). Complete		6	0
S	7	Notes and loans receivable, net	<b>⊢</b>	0	7	0
Assets	8	Inventories for sale or use		23041.08	<del></del>	14183.55
As	9			2709.12	-	7243.17
	10a	Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	1475506.04			
	ь	Less: accumulated depreciation	о <b>ь</b> 1034901.69	464936.82	10c	440604.35
	11	· · · · · · · · · · · · · · · · · · ·			11	0
	12	Investments—other securities. See Part IV, line		611968.93	12	606516.29
	13	Investments—program-related. See Part IV, line		0	13	0
	14	Intangible assets		0	$\overline{}$	0
	15			0		0
	16	Total assets. Add lines 1 through 15 (must equ		1170345.56		1157320.47
	17	Accounts payable and accrued expenses	i de la companya de	37253.80		22571.00
	18	Grants payable		0	18	0
	19	Deferred revenue		51238.75	19	52057.00
	20	Tax-exempt bond liabilities		0	20	0
S	21	Escrow or custodial account liability. Complete		0	21	0
Liabilities	22	Payables to current and former officers, dir employees, highest compensated employee	ectors, trustees, key			-
=		persons. Complete Part II of Schedule L		0	22	0
	23	Secured mortgages and notes payable to unrel	ated third parties .	0	23	0
	24	Unsecured notes and loans payable to unrelate		0	24	0
	25	Other liabilities. Complete Part X of Schedule D		89997.79	25	218035.75
	26	Total liabilities. Add lines 17 through 25		178490.34	26	292663.75
ces		Organizations that follow SFAS 117, ch complete lines 27 through 29, and lines 33 are	nd 34.			
<u>a</u>	27	Unrestricted net assets		0	27	0
ä	28	Temporarily restricted net assets		0	28	0
밑	29	Permanently restricted net assets		911968.93	29	607516.29
Net Assets or Fund Balan		Organizations that do not follow SFAS 117 and complete lines 30 through 34.	7, check here ▶ 🗌			*
ş	30	Capital stock or trust principal, or current funds	;	0	30	0
SSe	31	Paid-in or capital surplus, or land, building, or e		0	31	0
Ä	32	Retained earnings, endowment, accumulated in		379886.29	32	257140.43
Net	33	Total net assets or fund balances		991855.22	33	864656.72
_	34	Total liabilities and net assets/fund balances		1170345.56		1157320.47

Pa	rt XI Financial Statements and Reporting				
			Yes	No	
1	Accounting method used to prepare the Form 990: 🗹 Cash 🗌 Accrual 🔲 Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a_	<b>√</b>		
	b Were the organization's financial statements audited by an independent accountant?				
	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	<b>✓</b>		
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O.				
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were				
	issued on a consolidated basis, separate basis, or both:				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?	3a		✓	
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		✓	

Form **990** (2009)

# WALLA WALLA ELKS LODGE No. 287 SCHEDULE OF OTHER REVENUE FYE 3/31/10 91-0142870

Donations	536.50
Investment Gains	14.68
Youth from Trust	4,300.00
Bar Miscellaneous	983.00
Cover Charges	530.00
Catering	2,162.03
Miscellaneous	<u>11,048.55</u>

Total 19,574.76

# WALLA WALLA ELKS LODGE NO. 287 SCHEDULE OF OTHER DEDUCTIONS FYE 3/31/10 91-0142870

140,118.87

Bulletin	9,631.84
Conventions	1,139.60
Janitorial	23,601.89
Supplies	4,342.88
Per Capita	26,884.00
Repairs & Maint	18,349.39
Other Taxes	13,952.77
Telephone	1,830.85
Software Support	10,968.79
Licenses	6,980.00
Reading Room Exp	1,068.56
Tax Penalties	5,446.25
Music & Entertainment	2,575.00
Laundry	410.75
Scholarships	3,500.00
<b>Credit Card Discounts</b>	2,003.24
Advertising	448.00
Youth Activities	1,490.36
Postage	2,137.31
Badges & Pins	502.22
Miscellaneous	2,855.17

Total