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# SCANNED SEP 2 2 2010

<sub>Form</sub> 990

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

1 2009

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

∠⊎U5 Open to Public

OMB No 1545-0047

▶ The organization may have to use a copy of this return to satisfy state reporting requirements Inspection Internal Revenue Service APRIL 30 For the 2009 calendar year, or tax year beginning MAY 01 , 2009, and ending 20 10 C Name of organization MANDARIN MOOSE LODGE #42 D Employer identification number Check if applicable Doing Business As MANDARIN MOOSE LODGE #42 1400997 59 Address change label or Telephone number print or Number and street (or P O box if mail is not delivered to street address) Room/suite Ε Name change 4450 LOSCO ROAD 904) 268-5614 Initial return Specific City or town, state or country, and ZIP + 4 Terminated JACKSONVILLE, FLORIDA 32257 608.205 G Gross receipts \$ Amended return Name and address of principal officer EDWARD HILLS Application pending H(a) Is this a group return for affiliates? Yes **V** No 12462 BLUE BERRY WOODS CIR. E. JACKSONVILLE, FL H(b) Are all affiliates included? Yes Tax-exempt status If "No," attach a list (see instructions) Website: ▶ H(c) Group exemption number 🕨 Form of organization ☐ Corporation ☐ Trust ☐ Association ☐ Other ▶ Year of formation M State of legal domicile Part I Summary TO PROVIDE FOR THE ELDERLY AND Briefly describe the organization's mission or most significant activities CHILDREN AT MOOSEHAVEN AND MOOSEHEART. ALSO, TO PROVIDE IN OUR COMMUNITY FOR VARIOUS CHARITIES AND THE NEEDY. 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) 684 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 5 5 Total number of employees (Part V, line 2a) 6 50 6 Total number of volunteers (estimate if necessary) 7a 7a Total gross unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, line 34 7b Current Year Prior Year 25,363 8 Contributions and grants (Part VIII, line 1h) . 524,911 582,842 9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 281 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) 608,486 524,911 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 107.098 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 13 **16a** Professional fundraising 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) Š 472,419 579,517 18 Total expenses. Add lines 13-17 (must equal Part IX, column lune\_25) 19 Revenue less expenses. Subtract line 18 from line 12 28,969 Beginning of Current Year End of Year 539.232 568,201 20 Total assets (Part X, line 16) . 0 Total liabilities (Part X, line 26) 22 Net assets or fund balances Subtract line 21 from line 20 539,232 568,201 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 Sign Here ADHINISTRATOR DWAR Type or print name and title Check if Date Preparer's identifying number Preparer's (see instructions) signature employed ▶ [ Paid Preparer's Firm's name (or yours Use Only if self-employed), address, and ZIP + 4 Phone no ▶ May the IRS discuss this return with the preparer shown above? (see instructions) Yes | No

Pai	Statement of Program Service Accomplishments	
1	Briefly describe the organization's mission.  TO PROVIDE FOR THE ELDERLY AND CHILDREN WITHIN OUR ORGANIZATION AT MOOSEHAVEN A  MOOSEHEART,	
	•••••••••••••••••••••••••••••••••••••••	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	☐ Yes ☑ No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	☐ Yes ☑ No
	If "Yes," describe these changes on Schedule O.	
4	Describe the exempt purpose achievements for each of the organization's three largest program services Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amou allocations to others, the total expenses, and revenue, if any, for each program service reported.	by expenses nt of grants and
4a	(Code: 501(C)3 ) (Expenses \$ 542,340 including grants of \$ ) (Revenue \$ TO PROVIDE TO CHARITIES WITHIN OUR COMMUNITY AND WITHIN OUR ORGANIZATION AT MOOS AND MOOSEHEART.	EHAVEN
4b	(Code) (Expenses \$including grants of \$) (Revenue \$	
4c	(Code) (Expenses \$including grants of \$) (Revenue \$	)
	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )  Total program service expenses > 542.340	

Pa	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	ļ	1
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_		1
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		1
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		1
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, 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.	, ,	,	, Ç.
•	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.	٠	,	
•	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 14a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		<b>√</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		✓
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		✓_
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		<b>✓</b>
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		<b>✓</b>
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		$\overline{}$

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		1
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		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<b>✓</b>
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		1
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		1
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_		<b>✓</b>
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		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filling 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>
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		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		1
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		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? <i>If "Yes," complete Schedule R, Part I</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		✓_
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		,
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	1	
			<u> </u>	

Pa	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			
ь	U.S. Information Returns. Enter -0- if not applicable	1		
	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			
b	Statements, filed for the calendar year ending with or within the year covered by this return 2a 7 If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	1	
_	<b>Note.</b> 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		
	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			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	<u> </u>	1
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<b>-</b>
C	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		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		<b>-</b>	
L	and services provided to the payor?	7a 7b		✓
C	If "Yes," did the organization notify the donor of the value of the goods or services provided?  Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	76		
	required to file Form 8282?	7c		1
	If "Yes," indicate the number of Forms 8282 filed during the year			
·	benefit contract?	7e		<b>✓</b>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<b>√</b>
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		<b>-</b>
n	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		1
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		1
9	Sponsoring organizations maintaining donor advised funds.			,-
a	Did the organization make any taxable distributions under section 4966?	9a		1
10	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		_
10 a	Section 501(c)(7) organizations. Enter: 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  10b			
11	Section 501(c)(12) organizations. Enter.			
а	Gross income from members or shareholders		,	1
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year.   12b	12a		-

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			
b	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		1
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		✓
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		1
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	1	
7a				
	of the governing body?	7a		✓
b	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			
	the year by the following:			
а	The governing body?	8a	1	
b	Each committee with authority to act on behalf of the governing body?	8b	<b>√</b>	
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		✓
Sec	tion B. Policies (This Section B requests information about policies not required by the Inte	ernal		
Rev	enue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		✓
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
	form?	11	✓	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			i
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		<b>\</b>
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b		
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		<b>√</b>
14	Does the organization have a written document retention and destruction policy?	14		<b>✓</b>
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?			اا
	The organization's CEO, Executive Director, or top management official	15a		<u> </u>
b	Other officers or key employees of the organization	15b		<b>✓</b>
	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			;
	with a taxable entity during the year?	16a		<b>/</b>
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	401		
Sec	the organization's exempt status with respect to such arrangements?	16b		
<u>3ec</u> 17				
	List the states with which a copy of this Form 990 is required to be filed ▶ N/A			
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			
10	Own website			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict or the conflict of the conflict organization makes its governing documents, conflict organization makes its governing documents.	of inte	erest	
20	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: ▶ EDWARD HILLS	rds of	the	
	4450 LOSCO ROAD, JACKSONVILLE, FLORIDA 32257 (904) 268-5614	•		
_	1			

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees. See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order individual trustees or directors; institutional trustees; officers, key employees, highest compensated employees; and former such persons.

☐ Check this box if the organization did not compensate any current officer, director, or trustee.										
(A)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average		ion (		k all	that ap		Reportable	Reportable	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
Edward Hills	40							24 525		
Administrator	40			1		1		34,535		
Steve Brown	0		İ		ĺ	]		o		
Governor			<u> </u>	1				0		
J.D. Horton	0							o		
Junior Past Governor		L	<u> </u>	1						····
Ralph Page	0			l				o		
Junior Governor				✓			<u> </u>			
William Schmitz	0			١.				0		
Treasurer	ļ			✓	<u> </u>	ļ	<u> </u>			
Howard Hudgins	0		ļ	١.				o		
3 Year Trustee		<u> </u>	ļ	✓		<u> </u>	ļ			
Tory Carter	0		1					o		
2 Year Trustee	ļ			✓	<u> </u>		<u> </u>		-	
John Hester	0							O		
1 Year Trustee Open				<b>✓</b>	-		ļ			
Prelate	0			,				0		
Freiate			<del> </del>	<b>V</b>	-					
					_					
			İ							
			-		$\vdash$		-			

Pa	t VII Section A. Officers, Directors, Tru	ıstees, Key	/ Emp	loy	ees,	an	d Hig	hes	Compensate	d Employees	(continued)
	(A)	(B) (C)							(D)	(E)	(F)
	Name and title	Average hours per week		_	,	Τ.	that ap 율등	<del></del>	Reportable Reportable compensation compensation from from relations		
		WOOK	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS	compensation
					-						
		_							- 1		
1b	Total	•						<b>•</b>	34,535		
2	Total number of individuals (including but reportable compensation from the organization)		to the	ose	liste	ed a	above	) wł	no received mo	ore than \$100	),000 in
										·	Yes No
3	Did the organization list any <b>former</b> office employee on line 1a? <i>If "Yes," complete S</i>							oye	e, or highest o	ompensated	3
4	For any individual listed on line 1a, is the sthe organization and related organizations individual.										4
5	Did any person listed on line 1a receive services rendered to the organization? If "	or accrue Yes," comp	comp lete s	oens S <i>ch</i>	satıc edu	on f le J	from a	any uch	unrelated org	anızation for	5 🗸
Se	ction B. Independent Contractors	V-1-1-1									
1	Complete this table for your five highest compensation from the organization.	ompensate	d indi	epe	nde	nt o	contra	ictoi	s that receive	d more than	\$100,000 of
	(A) Name and business add	Iress							(B) Description of s	ervices	(C) Compensation
N/A				_							•
								-	·		•
									<del></del>		
2	Total number of independent contractors (in more than \$100,000 in compensation from	ncluding bunter the high the h	ut not lizatio	lim n ►	ited 0	to	those	liste	ed above) who	received	

Par	VII	Statement of Reven						T Tage
		Statement of Neven	<u>ue</u>		(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	1a	Federated campaigns	1	la				
gra		Membership dues	[1	b 20,519				
s, c		Fundraising events		c				
gi Ta		Related organizations .	· ·   4	ld				
š, <u>Ē</u>		Government grants (contribution	ns) 1	le				
tor sr s		All other contributions, gifts, grants	-					
혈	1	and similar amounts not included a		lf 4,844				
<u>a</u> <u>a</u>	g	Noncash contributions included in li		\$				1
<u>5 F</u>		Total. Add lines 1a-1f		. •	25,363			
- Je				Business Code				
Program Service Revenue	2a	Revenues			582,842			
æ	ь							
/ce	C							
Ser	d							
Ē	e	*****						
ogra	f	All other program service re	evenue					
<u> </u>	g	Total. Add lines 2a-2f .		. •	582,842			
	3	Investment income (includir other similar amounts) .		🕨	281			
	4	Income from investment of tax	-exempt b	ond proceeds				
	5	Royalties	·					
		<del></del>	Real	(ii) Personal	* , *	· 31 ()	· 3·	
	1	Gross Rents .						
		Less rental expenses			* * * * * * * * * * * * * * * * * * *	NO A P		
		Rental income or (loss)  Net rental income or (loss)			÷	*** *** **	F 40 700 - 1 0 0 0	
		` [		· · · · · · · · · · · · · · · · · · ·	<del></del> ,		, , , ,	
	7a	Cross amount nom sales or	Securities	(II) Other		~	,	
	١.	assets other than inventory						
	p	Less cost or other basis						
	_	and sales expenses .	<del></del>		*			***************************************
	4	Gain or (loss)  Net gain or (loss)			·		n n nn e mane e emandend	
evenue	l	Gross income from fur	· · · ndraising					
ĕ		·						
Œ		of contributions reported on See Part IV, line 18	line 1c).					
ē	<b>L</b>		•	a b				
Other	C	Less: direct expenses  Net income or (loss) from fu	Indraisin					
_								
	9a	Gross income from gaming a	activities.					
	h	See Part IV, line 19 Less. direct expenses		а b				
	c	Net income or (loss) from g	 amina ad	ctivities .				
	100	Gross sales of inventor returns and allowances	y, iess	a	İ		:	
	ь	Less: cost of goods sold		b				
		Net income or (loss) from sal						
		Miscellaneous Revenue		Business Code				
	11a				-			
	ь			-				
	6							
	4	All other revenue		-				
		Total. Add lines 11a-11d		•				
			ions	▶	608,486			

Part IX Statement of Functional Expenses

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

	Section 501(c)(3) and 501 All other organizations must complete colu				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				<del></del>
4	Benefits paid to or for members .				
5	Compensation of current officers, directors, trustees, and key employees	34,535	0	34,535	0
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	63,013	63,013	0	0
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits .				
10	Payroll taxes	9,550	6,908	2,642	0
11	Fees for services (non-employees)	į			
	Management				
	Legal	075	075		0
	Accounting	875	875	0	
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees	24.050	24.050		
	Other	34,958	34,958	0	0
12	Advertising and promotion	9,892	367 9,892	0	0
13	Office expenses	5,092	9,092		
14	Information technology				
15	Royalties	125,133	125,133	0	0
16 17	Occupancy	120,100	120,100		<u>_</u>
	· · · · · · · · · · · · · · · · · · ·				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	2,720	2,720	0	0
20	Interest		, , ,		
21	Payments to affiliates				<del></del>
22	Depreciation, depletion, and amortization				<del>_</del>
23	Insurance	10,489	10,489	0	0
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.)				
а	Bank Charges	1,544	1,544	0	0
b	Contributions	13,996	13,996	0	0
С	Licenses, Permits	2,470	2,470	0	0
ď	Special Projects	6,223	6,223	0	0
е	Supplies	233,212	233,212	0	0
	All other expenses Taxes-Sales Tax	30,540	30,540	0	0
25_	Total functional expenses. Add lines 1 through 24f	579,517	542,340	37,177	0
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				

Part X **Balance Sheet** Beginning of year End of year 39,859 56,641 Cash-non-interest-bearing . . 42,030 2 2 42,311 Savings and temporary cash investments Pledges and grants receivable, net . 3 3 Accounts receivable, net 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of . . . . 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 . . . . . . Notes and loans receivable, net . . . 7 16,588 8 15.888 Inventories for sale or use . 9 Prepaid expenses and deferred charges . 9 Land, buildings, and equipment: cost or 10a other basis. Complete Part VI of Schedule D b Less. accumulated depreciation . . . 10b 440,755 10c 453,361 Investments—publicly traded securities . . 11 11 12 12 Investments-other securities. See Part IV, line 11 13 13 Investments-program-related. See Part IV, line 11 Intangible assets . . . . 14 14 15 Other assets See Part IV, line 11 15 Total assets. Add lines 1 through 15 (must equal line 34) 16 539.232 16 568,201 17 17 Accounts payable and accrued expenses . . . 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities . . . . 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 Secured mortgages and notes payable to unrelated third parties . 23 23 Unsecured notes and loans payable to unrelated third parties . . . 24 24 Other liabilities Complete Part X of Schedule D . . . 25 26 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117, check here ▶ □ and Fund Balances complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets . . . . 539,232 568,201 27 28 Temporarily restricted net assets 28 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. ō Assets 30 30 Capital stock or trust principal, or current funds . 31 31 Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds 32 32 Š Total net assets or fund balances 33 Total liabilities and net assets/fund balances . 568,201 539.232 34

Page	1	2

Pai	t XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990   Cash   Accrual   Other  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?	2b		✓
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		
	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)

### SCHEDULE O (Form 990)

# Supplemental Information to Form 990

OMB № 1545-0047

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

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990.

MANDARIN MOOSE LODGE #42	59	!	1400997							
6. THE ORGANIZATION HAS MEMBERS.										
7b THE ORGANIZATION HAS ITS MEMBERS VOTE ON ALL DECISIONS APPROVED BY THE BOARD OF OFFICERS.										
11a. THE ORGANIZATION REVIEWS THE REPORTS WITH ITS GOVERNING BODY IN ORDER FOR THE 990 TO BE										
COMPLETED.										
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Ocheanie O (Form 990) 2009		age Z
Name of the organization	Employer identification number	
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