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Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Open to Public Inspection

		d the Treesur nue Service	y ► 1	The organization may have to use a copy of this return to satisfy state repo	orting requ	drements.	Inspection
A	For th	e 2009 c	alendar	year, or tax year beginning June 1, , 2009, and ending	Ma	y 31	, 20 10
(8)	ර්කයේ ඒ ව	eggo@cetbiec	Ptease	C Name of organization Fraternal Order of Eagles #1861, Inc.		D Employ	er identification number
	Address	change	use IRS label or	Doing Business As Same		63	0123325
	to entel	hznga	print or type.	Number and street (or P.O. box if mail is not delivered to street address) Room/suite		E Telapho	nathun en
	hilial rei		Seo Specific	144 North Street		(802)	447-3051
	Terminal		instruo-	City or town, state or country, and ZIP + 4	İ		
\square	Amende	od return	tions.	Bennington, VT 05201-1825		G Green	
U,	Page Cellin	n bengua	1	ne and address of principal officer: William Bruso, Secretary			to Carried Date William of
	T			orth, Street, Benninton, VT 05201-1825			refundad? Lives II No
_		empt status	s: [/] s	i01(c) (8) ◄ (insert no.)	ì	•	Est. (see instructions) ther > 0102
	Websi		. 171 com	oration ☐ Trust ☐ Association ☐ Other ▶ ☐ L. Year of formation:		examplion nun	legal domicile: VT
	art I	Summ		Datable Trest Classication Curier Care Continuation	1303	IN CHAIG OF	reger concess. W I
				the organization's mission or most significant activities: To prom	ote and	raise fund	ds for duly
		authoriz	escribe zed Era	the organization's mission or most significant activities: "************************************	haritable	causes l	oth local and
8				provideing services for Members of the Fraternal Order of Eagle		944000	
man.	-	1100001101	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	province of the control of the state of the control			
Activitics & Governance	ا ۾	Check this	how b	if the organization discontinued its operations or disposed of more than 25% of	स्था स्था	els.	
ĕ	1			ing members of the governing body (Part VI, line 1a)		3	5
8				pendent voting members of the governing body (Part VI, line 1b)		4	0
Ž				employees (Part V, line 2a)		5	15
7o€	3			volunteers (estimate if necessary)		6	20
-	1			elated business revenue from Part VIII, column (C), line 12		7a	0
_	b s 1	Net unre	lated b	usiness taxable income from Form 990-T, line 34	<u> </u>	. 7b	0
	ļ				Prior Ve	287	Chancart Acea
o	8 (Contribu	tions a	nd grants (Part VIII, line 1h)	·····	8,431	9,829
and a	9 1	Program	service	e revenue (Part VIII, line 2g)			
CINHOACH	•			me (Part VIII, column (A), lines 3, 4, and 7d)		33	1,823
L)ANSAL				Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		98,896	180,467
	1			dd lines 8 through 11 (must equal Part VIII, column (A), line 12)		107,360	192,119
	n .			ler amounts paid (Part IX, column (A), lines 1-3)		14,312	10,454
_4				or for members (Part IX, column (A), line 4)		12,919	14,335
R				empensation, employee benefits (Part IX, column (A), lines 5-10)	· · · · · · · · · · · · · · · · · · ·	27,576	89,2 16
- 8			1 1/31	draising fees (Part IX, column (A), line 11e)			1
J.		COLOMB	oraising	expenses (Part IX, column (D), line 25) >	 	14,426	55,210
				(Part IX, column (A), lines 11a-11d, 11f-24f)		69,233	169,215
$\overline{\sim}$	119 7	Reterbib	less ex	penses. Subtract line 18 from line 12		38,127	22,904
$\frac{Q_{i}}{q_{i}}$	PLAC	14754155	1000 0		during of C		End of Year
ete Engl	20	Total ass	eete (Pa	urt X, line 16)		300.032	322,618
Age	94 .		-	Part X, line 26)			
25				and balances. Subtract line 21 from line 20.		300,032	322,6 18
Pa	art II	Sign	ature	Block			-
		Under pe	enalties of	perjury, I declare that I have examined this return, including eccompanying schedulers, correct, and complate. Declaration of preparer (other than officer) is based on all it	s and states	news, and to	egostatoral ym to tead enti
		ENG OST	ei, it is uru	s, currect, and conquate Decement of preparer (other than officer) is cased on an	unonversur	_ / _	There was end warmaning
Si	m		QL_	illian Bruso			110
He	FF	Sign	nature of o		Dat	19	
		1	ببلند	am Bruso Worthy Secreta	<u>ry </u>		
		190	e or buur	name and title	. 25		
		Preparer signature		S35-	_	reparers a Sourcerd seas)	lentilying muniber ions)
Pai	o.	/	1/2	ant sprowbly 1/1/, empio	yed ▶ L_		199.9a 9eem
	parer's	Firm's na	ame (or ye	DUSA Frank A Teambles	EIN		22-28-2630
Use	Only	if self-en		Train Ac Trombies		o. > (202) 265-3736
QA2	w the			return with the preparer shown above? (see instructions)	I marca to		/ 203~5/30 Yes
					Cai No. 11	222V	Farm \$90 (2009)
U (US)	L 01847	or over all		······································		€ متنبطسه	

Par	Statement of Program Service Accor	nplishments		· · · · · · · · · · · · · · · · · · ·							
1	Briefly describe the organization's mission:										
	To promote and raise funds for duly authorized Fraternal Order of Eagles Charities and contribute to worthwhile										
	charitable causes both local and national, while	e provideing services for Members	of the Fraternal Ord	er of Eagles.							
2	Did the organization undertake any significant pr	rogram services during the year which	h were not listed on	· · · · · · · · · · · · · · · · · · ·							
_	the prior Form 990 or 990-EZ?			☐ Yes ☑ No							
	If "Yes," describe these new services on Schedu										
3	Did the organization cease conducting, or make services?	significant changes in how it condu	cts, any program	☐ Yes ☑ No							
	If "Yes," describe these changes on Schedule O			C 100 E 100							
4	Describe the exempt purpose achievements for Section 501(c)(3) and 501(c)(4) organizations and allocations to others, the total expenses, and re-	i section 4947(a)(1) trusts are require	d to report the amou								
4a	(Code:) (Expenses \$	including grants of \$) (Revenue \$)							
		SEE ATTACHMENTS									
•											
4b	(Code:) (Expenses \$	including grants of \$) (Revenue \$)							
		·									

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

				*							
4d	Other program services. (Describe in Schedule C	D.)									
	(Expenses \$ including grants of)								
4e	Total program service expenses ▶	169,215									

μa	TIV Checklist of Required Schedules			
			Yes	Ro
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1)		1
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		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
43	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	હ	N	10
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	R	la
3	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	Ğ		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
Ø	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	\$		1
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, IX, or X as applicable	11	4	
0	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.			
0	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.	·		
0	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.			
O	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.			
0	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		1
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			,
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		4
143	Did the organization maintain an office, employees, or agents outside of the United States?	148	'	4
Ď	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		1
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		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, the 9a? If "Yes," complete Schedule G, Part III.	19	1	
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	لــــا	4

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	✓	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		✓
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		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		1
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		1
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		-
	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	N	b
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	A	lp
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		1
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 filing thresholds, conditions, and exceptions):	1		
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
C	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29	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		✓
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		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		1
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	ß	1/4
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38		1

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	,		Yes	Кo
18	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	,	1	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			Ì
¢	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable garning (gambling) winnings to prize winners?	1c	1	
20	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	;		
Do	Statements, filed for the calendar year ending with or within the year covered by this return 2 17 If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	1	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
3 20	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	-, -	1
Ф	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	V	10
43-20	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
Ø	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.			
5 w	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		7
Ø	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	N	13
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	_/	1/10
© 3	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?	ва		4
Ø	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	ණ		1
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	N	1/2
Ø	if "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	K	B.
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	N	b
രി	If "Yes," indicate the number of Forms 8282 filed during the year			
8	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	N	4
в	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	1	14
©	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	W	as_
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7'n	R	la
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	W	2
©	Sponsoring organizations maintaining donor advised funds.	0-	all	-
&	Did the organization make any taxable distributions under section 4966?	9a 9b	IV	1
(d)	Did the organization make a distribution to a donor, donor advisor, or related person?	30	N	19
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII. line 12			į
₽/ ©	Initiation fees and capital contributions included on Part VIII, line 12	•		
(b) 11	Section 501(c)(12) organizations. Enter:			
88) ภูก	Gross income from membars or shareholders			į
	Gross income from other sources (Do not net amounts due or paid to other sources against	ļ		
	amounts due or received from them.)	12a	.a	Va
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b	160		

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			
	i i	r	Yes	No
1a	Enter the number of voting members of the governing body		, ,	. 1
b	Enter the number of voting members that are independent	n.	ر دخت روی	, , ,
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			لبرسا
	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	L	✓
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		✓
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		✓
6	Does the organization have members or stockholders?	6	/	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a	1	
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:		: 3 ,	اغ " خ
а	The governing body?	8a	1	
	Each committee with authority to act on behalf of the governing body?	8b	▲	
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 Inte	emal		
Rev	enue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		V
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	·		1
_	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	N	A.
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.	20	10/2	- , 1
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	1	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b		1
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		1
14	Does the organization have a written document retention and destruction policy?	14		1
	Did the process for determining compensation of the following persons include a review and approval by		Ŕ	1
15	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		1.5	. 1
_	The organization's CEO, Executive Director, or top management official	15a		1
		15b		一
D	Other officers or key employees of the organization	بع. ا	. %	. "6
40.	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)	1	. 5	_ }
168	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?	100		.7
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate		- 4	,
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard	16b	1	<u></u>
<u> </u>	the organization's exempt status with respect to such arrangements?	100		/
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ VERMONT			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(or	:)(3)s	only)	
	available for public inspection. Indicate how you make these available. Check all that apply.			
	☐ Own website ☐ Another's website ☑ Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	of int	erest	
	policy, and financial statements available to the public. Copy Made Available in Social Ro	Om.		
20	State the name, physical address, and telephone number of the person who possesses the books and reco		f the	
	organization: ➤ William Bruso, 144 North Street, Bennington, VT 05201 802-447-3061			

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 employees."
- © 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 co		any o	um			cer, d	irec			
(A)	(≅)	l	(C) Position (check all that apply)					(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee or director	S Institutional trustee		Key employee	Highest compensated milemployes		Reportable compensation from the organization (W-2/1089-MSC)	Reportable compensation from related organizations (W-2/1059-MISC)	Estimated amount of other compansation from the organization and related organizations
Robbin K. Stratton Jr. Past Presidenty	2							9	0	0
		 	_	1	<u> </u>		-			
Charles Silver Oresident	2			1				0	0	0
Winfield Gates Chaplain	2			1				0	0	0
William Bruso Secretary	15			1				3,764	0	0
Milton Hattat Yreasurer	4			1				400	0	0
Bruce K. Travis Conductor	2			1				0	0	0
John Novotny Inside Guard	2			1				0	0	0
Charles Baker Trustee	B			1				400	0	0
Peter Sweat Trustee	4			1				400	0	0
Frank Stratton, Jr Yrustee	4			1				400	0	0
Robin K. Stratton Trustee	4			1				400	0	0
				-						

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
(A)	(B)			ŋ	C)		(D)		(E)	(F)
Name and title	Average			checi	k all	that ap	ply)	Reportable	Reportable	Estimated
	hours per week	Individual to	ä	3	<u>\$</u>	옥픑	7	compensation from	compensation from related	amount of other
	Wook	dividual t	nstitutional	Officer	8	홍불	Former	the	organizations	compensation
	•	3 2	큣	-	employee	y st	=	organization	(W-2/1099-MISC)	from the
	i	7 3		}	Š	Š	1	(W-2/1099-MISC)		organization
	1	trustee	trustee		8	Highest compensated employee	l			and related organizations
	1	•	8		l	1881	Ì			
	<u> </u>	<u> </u>			<u> </u>	8				
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	<u> </u>	L	<u> </u>	<u>L_</u>	L	<u> </u>	<u> </u>			
1b Total	. , .			<u> </u>			<u> </u>	5,764		
2 Total number of individuals (including but		to the	ose	liste	ed a	above) wi	no received mo	ore than \$100,0	100 in
reportable compensation from the organiz	ation ►	O								
										Yes No
3 Did the organization list any former office	er director	or to	ieta	ا م	(AV	emple	OVO	a or highest o	nmnensated	
employee on line 1a? If "Yes," complete S							Oye	o, or mgmost c	Omparsated	3 1
•							• •			
4 For any individual listed on line 1a, is the										
the organization and related organizations	greater tha	រោ ងាះ	oU,U	UU?	<i>II</i> -	Yes,"	COI	mpiete Scheau	ie J for such	4 1
individual		• •	•	•	٠.		• •			F 2 1 1
5 Did any person listed on line 1a receive services rendered to the organization? If "	or accrue	comi	con	satio	on 1	rom :	any	unrelated org	anization for	
	res, com	JIELE .	5011	CUU	76 0	101 3	au.	person	 	5 1
Section B. Independent Contractors	 -								· · · · · · · · · · · · · · · · · · ·	22.222.6
 Complete this table for your five highest compensation from the organization. 	ompensate	a ina	epe	nae	nt c	STITION	ICTO:	rs that receive	o more man \$1	UU,UUU OT
compensation from the organization.							,			
(A)	 .]	(B)		(C)
Name and business ad	oress							Description of s	ervices	Compensation
NONE							L			
							L			
							Ē			
			-	-						
2 Total number of independent contractors (including b	ut not	lim	ited	to t	those	jeta	ed above) who	received	
more than \$100,000 in compensation from	n the organ	izatio	n Þ	0				40010, 11110		

Pari	_			 1			1
1 _r ,		· ·		(A) Total revenue	(B) Rested or exempt function revenue	(C) Unrelated business revenue	(D) Revenus excluded from tax under sections 512, 513, or 514
Contributions, giffs, grants and other similar amounts	1a	Federated campaigns 1a					
2 B	1	Membership dues 1b	5,272				
Šξ. <u>e</u>	င	Fundraising events 1c				,	
	ď	Related organizations 1d		ţ			1
S E	9	Government grants (contributions). 10					1
語。	В	All other contributions, gifts, grants,		i i			1
준동		and similar amounts not included above 11	4,557	.			
E G		Roncash contributions included in lines 1a-1f: \$			•		
	l là	Total. Add lines 1a-1f		9,829			
M		<u>}</u> _	Buzinses Code				
E AG	220						
Ø.	Þ						
A C	C						
8	Ø						
5	0 0	All other program service revenue .					
Program Borvico Revonus	ا ا	Total. Add lines 2a-2f	<u></u> >>				} ,
	3	Investment income (including dividends, other similar amounts)	interest, and	1,823	1,823		
	4	Income from investment of tax-exempt bond p	proceeds 🔊				
	5	Royalties	(ii) Personal				1
		- ''	(ii) Personal	•			1
	1	Gross Rents					
		Less: rental expenses					
		Rental income or (loss)	D				
	l	0.0	(ii) Other			,	}
	78	Gross amount from sales of assets other than inventory	(ii) Outer				
	١.	·		•			į
	۵	Less: cost or other basis					•
		and sales expenses .		1			
	0	Gain cr (loss)	D	İ			1
OMM	8.9	Gross income from fundraising	• • • •				
		events (not including \$,
Œ		See Part IV, line 18					
Othor Move	l la	Less: direct expenses b					
8	c	Net income or (loss) from fundraising eve	ents 🔊	-	• -	•	
	i	Gross income from gaming activities.					
	F-97	See Part IV, line 19	843,913	1			,
	Ь	Less: direct expenses, b	725,103				<u> </u>
		Net income or (loss) from gaming activities	es ▶	118,810	118,810		
	10a	Gross sales of inventory, less					
		returns and allowances	185,118		1		1
		Less: cost of goods sold b	124,517				_
	C	Net income or (loss) from sales of inventor		60,601	60,601		
	<u> </u>	20: 01 1 5	Susinasa Codo				Ĝ.
	11120	Misc Club Revenus		1,056	1,056		
	Ø				·		
	C						
	ł	All other revenue		2.2.			<u> </u>
		Total Add lines 11a-11d	🏲	1,056	400	·	
	عارا	Total revenue. See instructions	▶	192,119	182,289		

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

7b, 1 2 3 4 5	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	(A) Total expenses 9,227 1,227	Program service expenses 9,227 1,227	(C) Management and general expenses	(D) Fundraising expenses
2 3 4 5	organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors,	1,227			
3 4 5	the U.S. See Part IV, line 22		1,227		,
4 5 6	organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members	14,335			
4 5 6	Benefits paid to or for members	14,335			
5 6	Compensation of current officers, directors,		14,335	- , 3 ,	, , ,
		5,764	5,764	0	0
	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	74,140	74,140		
	Other salaries and wages	14,140	74,140		
	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
	Other employee benefits	0.242	0.242		
	Payroli taxes	9,312	9,312		
	Fees for services (non-employees):	1			
	Management				
	Legal	2,676	2,676		· · ·
	Accounting	2,070	2,010		
	Lobbying		*		
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	Other				
	Advertising and promotion	3,886	3,886		······································
	Office expenses	0,000	0,000		
	Royalties	28,555	28,555		
17	Travel				
	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials			1	
	Conferences, conventions, and meetings	9,522	9,522		
	Interest				
	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	9,491	9,491		
	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	License Fees	1,080	1,080		
b					
c					
ď					
- e					
f 25	All other expenses	169,215	169,215		
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	0	o		

Part X Balance Sheet (23) End of year Beginning of year 28,844 37.992 1 Cash-non-interest-bearing 41,014 2 72,817 2 Savings and temporary cash investments 3 3 4 4 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 7 7 Notes and loans receivable, net 8,142 7**.9**83 8 Inventories for sale or use 9 Prepaid expenses and deferred charges . Land, buildings, and equipment: cost or 10a other basis. Complete Part VI of Schedule D 212,974 10c 212,974 b Less: accumulated depreciation . . . 10b 11 11 Investments—publicly traded securities 12 Investments-other securities. See Part IV, line 11 12 13 13 Investments - program-related. See Part IV, line 11 Intangible assets 14 14 15 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 360.032 16 322,618 17 17 Accounts payable and accrued expenses 18 18 19 1120 Deferred revenue 20 20 21 Lichenter Escrow or custodial account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 Secured mortgages and notes payable to unrelated third parties . . . 24 Unsecured notes and loans payable to unrelated third parties . . . 20 25 Total liabilities. Add lines 17 through 25 26 28 Organizations that follow SFAS 117, check here ▷ 🗆 and Balances complete lines 27 through 29, and lines 33 and 34. 291,705 27 314,069 Unrestricted net assets 27 8,327 28 28 Temporarily restricted net assets . . . Fund 29 Permanently restricted net assets . . . Organizations that do not follow SFAS 117, check have ▷ Ö and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds ASSET 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds Most / 300,032 33 322.618 33 Total liabilities and net assets/fund balances 300.032 34 322,618

Dana	1	2
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Pa	rt XI Financial Statements and Reporting			;
		-	Yes	No
1	Accounting method used to prepare the Form 990:		-4	-
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2 a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?		\	
b	Were the organization's financial statements audited by an independent accountant?	2b	1	
C	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		1
	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			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	N	PA
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			1
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b	N/	R
		Form	990	(2009)

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

▶ Attach to Form 990. ▶ See separate instructions.

2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization
Fraternal Order of Eagles 21861, Inc.

Employer Identification number

03 : 123325

Pa	Organizations Maintaining Do the organization answered "Yes	nor Advised Funds or Other Similar " to Form 990, Part IV, line 6.	Funds or Accounts. Complete if
		(a) Donor edvised funds	(2) Funds and other accounts
ข	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year) .		
4	Aggregate value at end of year		
5	Did the organization inform all donors and funds are the organization's property, subj		
6	Did the organization inform all grantees, dused only for charitable purposes and not purpose conferring impermissible private to	for the benefit of the donor or donor advi	sor, or for any other
Pa	t II Conservation Easements. Com	plete if the organization answered "Yes"	to Form 990, Part IV, line 7.
1 2	Purpose(s) of conservation easements held Preservation of land for public use (e.g Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organiz	., recreation or pleasure)	on of an historically important land area lon of a certified historic structure
	easement on the last day of the tax year.		
			Held at the End of the Tax Verr
බ	Total number of conservation easements .		
Ø	Total acreage restricted by conservation e		
C	Number of conservation easements on a c		
Ø	Number of conservation easements include		
3	Number of conservation easements modifies the tax year ▶	ed, transferred, released, extinguished, or	terminated by the organization during
4	Number of states where property subject t	o conservation easement is located ▶	
5	Does the organization have a written policy violations, and enforcement of the conserved		
8	Staff and volunteer hours devoted to moni	toring, inspecting, and enforcing conserva	ttion easements during the year
7	Amount of expenses incurred in monitoring ▶S	g, inspecting, and enforcing conservation	easements during the year
8	Does each conservation easement reporte 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .		
8	In Part XIV, describe how the organization balance sheet, and include, if applicable, t the organization's accounting for conserva	he text of the footnote to the organization tion easements.	's financial statements that describes
Pa	t III. Organizations Maintaining Colle Complete if the organization answ	ections of Art, Historical Treasures, overed "Yes" to Form 990, Part IV, line 8	r Other Similar Assets.
ใอ	If the organization elected, as permitted ur art, historical treasures, or other similar asso provide, in Part XIV, the text of the footnot	ets held for public exhibition, education, or	research in furtherance of public service,
b	If the organization elected, as permitted un historical treasures, or other similar assets provide the following amounts relating to t	held for public exhibition, education, or nese items:	esearch in furtherance of public service,
	(i) Revenues included in Form 990, Part V(ii) Assets included in Form 990, Part X		
2	If the organization received or hald works following amounts required to be reported		ar assets for financial gain, provide the
ລ	Revenues included in Form 990, Part VIII,	line 1	» \$
fb	Assets included in Form 990, Part X		⊳ S

Page	2
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Par	Organizations Maintaining	g Collections of Art, Hi	stori	cal Treasures	, or O	ther Similar	Assets (continued)
3	Using the organization's acquisition, a collection items (check all that apply):		rds, o	heck any of the	follow	ving that are a	significant use of its
а	Public exhibition	đ	Н	Loan or excha	nge p	rograms	
Þ	Scholarty research	e	L	Other			
C	Preservation for future generation						
4	Provide a description of the organizat Part XIV.	ion's collections and expl	lain h	ow they further	the o	rganization's e	exempt purpose in
5	During the year, did the organization so assets to be sold to raise funds rather to	licit or receive donations of han to be maintained as pa	fart, l art of	historical treasure the organization	es, or 's colle	other similar ection?	. Yes No
Par	Escrow and Custodial And IV, line 9, or reported an an				nswei	red "Yes" to I	Form 990, Part
	Is the organization an agent, trustee, included on Form 990, Part X?				ons or	other assets	not . Yes No
þ	If "Yes," explain the arrangement in P	art XIV and complete the	follo	wing table:			
					-	 	Amount
	Beginning balance				10		
d	Additions during the year				<u>1d</u>		
0	Distributions during the year				10		
f	Ending balance				11	<u> </u>	
b	Did the organization include an amount "Yes," explain the arrangement in P	Part XIV.			• •		. L Yes L No
Par	t V Endowment Funds. Com						
		(a) Current year (b) Pro	r year	(c) Two years	back	(d) Three years b	
1a	Beginning of year balance			0 4 4 5 7 E	121	250 acr 250	
b	Contributions			1 25		Configurate State	All Carlotte Comments
C	Net investment earnings, gains, and losses						
đ	Grants or scholarships			१ १९७५ मुद्देश		4.35.6	PRINCIPLE DEN
0	Other expenditures for facilities	1		12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1, 1,		
	and programs			72' 323		,	735 275 11
f 9	Administrative expenses End of year balance			A Company			
2	Provide the estimated percentage of	the year end balance held	d as:				
а	Board designated or quasi-endowme	nt ▶%					
b	Permanent endowment ▶						
C	Term endowment ▶ %						
3a	Are there endowment funds not in the	possession of the organization	ation	that are held an	d adm	inistered for th	19
	organization by:	,					Yes No
	(i) unrelated organizations						3a(i)
	(ii) related organizations						3a(ii)
þ	If "Yes" to 3a(ii), are the related organ						. 35
4	Describe in Part XIV the intended use						
Par	t VI Investments—Land, Buil	dings, and Equipment	L Sec	e Form 990, Pa	art X,	line 10.	,
	Description of investment	(a) Cost or other basis (investment)		Cost or other basis (other)		Accumulated epreciation	(d) Book value
1a	Land	85,000			<u> </u>	1.4 . 4	85,000
	Buildings	74,974					74,974
c	Leasehold improvements						
d	Equipment	53.000					53,000
	d. Add lines 1a through 1e. (Column (d) m	ust equal Form 990, Part X,	, colu	mn (B), line 10(c).) .	▶	212,974

Schedule D (Fo	m 990) 2009			Page &
Part VII	Investments—Other Securitie	s. See Form 990, Part X	, line 12.	
(e) D	escription of security or cetagory (including name of security)	(b) Book value	(c) listings of valu Cost or end-of-year m	agent rajua
Financial de	rivatives			······································
	equity interests			
*				
	**			·
				,
				-
		· [
Satul Mahama A)	 		
	must equal Form 990, Part X, col. (B) line 12.)	d Coo Form 000 Port V	<u> </u>	
Part VIII	Investments—Program Relate			
(a)	Description of investment type	(b) Book value	(c) Mathod of val. Cost or end-of-year m	
				
		 		
				
				
				
Total (Column (b	must equal Form 990, Part X, col. (B) lins 13.)			
Part IX	Other Assets. See Form 990, Pa	art X, line 15.		
		(a) Description		(p) Book Astro
				
Total Calum	m (h) munt agual Farra 000. Dest V. agl	/D) line 45)		
Part X	n (b) must equal Form 990, Part X, col. Other Liabilities. See Form 990,		<u> </u>	
1.	(a) Description of Gability	(b) Amount	- 	
Federal inco		(b) Amount	- [
		 		
	· · · · · · · · · · · · · · · · · · ·	<u> </u>		
			7	
			7	
			_	
Total. (Column (b	must equal Form 990, Part X, col. (B) (Ine 25.)			
2. FIN 48 Fo	otnote. In Part XIV, provide the text of	the footnote to the organiz	ation's financial statements that	reports the
organization	s liability for uncertain tax positions u	inder FIN 48.		-

<u> </u>	as D (t din sou) tota			<i>,</i>
Par	Reconciliation of Change in Net Assets from Form 990 to Audited Financial S	tater	nents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3		
4	Net unrealized gains (losses) on investments	4	<u> </u>	
5	Donated services and use of facilities	5		
6	Investment expenses	6		
7	Prior period adjustments ,	7		
8	Other (Describe in Part XIV.)	8		
9	Total adjustments (net). Add lines 4 through 8	9		
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	<u> </u>	
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue	e pe	r Return	
1	Total revenue, gains, and other support per audited financial statements	1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		. 1	
a	Net unrealized gains on investments		٠	
Ь	Donated services and use of facilities	1,2		
C	Recoveries of prior year grants		'	
đ	Other (Describe in Part XIV.)	_	-{	
e	Add lines 2a through 2d	2		
3	Subtract line 2e from line 1	3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		,\	
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a	1.5	ii a	
ь	Other (Describe in Part XIV.)	_#*c};	立	
C	Add lines 4a and 4b	40		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			
Par	t XIII Reconciliation of Expenses per Audited Financial Statements With Expen	ses p	er Return	
1	Total expenses and losses per audited financial statements	1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1		
a	Donated services and use of facilities	_10	S.	
b	Prior year adjustments		(4)	
C	Other losses	;:	`]	
đ	Other (Describe in Part XIV.)	_ :		
•	Add lines 2a through 2d	2		
3	Subtract line 2e from line 1	3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		2	
b	Other (Describe in Part XIV.)			
C	Add lines 4a and 4b	4		
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	<u> </u>	
Par	t XIV Supplemental Information			
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a	nd 4;	Part IV, lines 1b	
and	2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d a	nd 4b	. Also complete	
this	part to provide any additional information.			
-				
			,,	

SCHEDULE G Form 990 or 990-520

Supplemental Information Regarding Fundraising or Gaming Activities

© CATALLES | The organization answered "Yes" to Form 990, Part IV, lines 17, 18, 07 19, 07 17 12 organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ. ▶ See exparate instructions.

QYB Rh. 1545-0047

Dapartness of the Treasury Internet Revenue Service Inspection Name of the organization Employer identification number Frater4nai Order of Eagles (11861, Inc. 03 0123325 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. e L Mail solicitations Solicitation of non-government grants Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events In-person solicitations 2s Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? \square 🖾 \square b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (M) Gross receipts (ci) Amount paid to (or retained by) @ Name of individual (III) Did fundraiser have (v) Amount paid to (iii) Activity custody or control of contributions? from ectivity (or retained by) fundraiser listed in or entity (fundreiser) organization col. (f) Yes No MOME Town 3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

Pa	art l	Fundraising Events. Comore than \$15,000 on F					eported
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total (add col. (a	a) through
_	1		(event type)	(event type)	(total number)	col	(c)
Revenue		•					
9	1	Gross receipts			i	 	
Œ	2	Less: Charitable contributions	1				
	3	Gross income (line 1					
	<u> </u>	minus line 2)					
	4	Cash prizes					
	5	Noncash prizes			. 11 101 		
nses	6	Rent/facility costs				-	
Expe	7	Food and beverages					
Direct Expenses	8	Entertainment	 				
	9	Other direct expenses	L				. <u></u>
	10	Direct expense summary. Ac				()
	11 rt	Net income summary. Comb Garning. Complete if	oine line 3, column (d), a	nd line 10	000 Port IV line 10	or report	od more
F	1111	than \$15,000 on Form		vered res to roilli	990, Part IV, line 19,	, or report	eu more
-	Γ		(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total	gaming (add
au au				bingo/progressive bingo		col. (at) the	rough col. (c)
Revenue	1	Gross revenue		843,913			843,913
868	2	Cash prizes		680,629		ļ	680,629
rect Expenses	3	Noncash prizes					
Direct	4	Rent/facility costs					
	5	Other direct expenses .		44,474			44,474
	6	Volunteer labor	☐ Yes % ☐ No	☐ Yes% ☑ No	☐ Yes% ☐ No		
	7	Direct expense summary. A	dd lines 2 through 5 in c	olumn (d)	,	(725,103)
	8	Net gaming income summar	ry. Combine line 1, colur	nn d, and line 7	. <u></u> >	<u> </u>	118,810
							Yes No
9		nter the state(s) in which the o			MONT		
		the organization licensed to	operate gaming activitie	s in each of these state	es?	. 9	9 V
t) IT	"No," explain:					
10:		/ere any of the organization's	gaming licenses revoke	d, suspended or termin	ated during the tax ve	ar? 10	a 7
t		"Yes," explain:	3	_,	and any or any or	- · [
						; ³ , 7	
		the ownering and a second	ing againtale with -			1·	
11 12	D: ie	oes the organization operate to the organization a grantor, but the organization and the organization are the organization are the organization are the organization are the organization are the organization are the organization operated the organization operated the orga	gaming activities with neeneficiary or trustee of	a trust or a member of	a partnership or other		
		rmed to administer charitable		i i i i i i i i i i i i i i i i i i i		1	

Scha	ALC G (Form 990 or 990-EZ) 2009		P	& con
			Yes	No
13 a b	Indicate the percentage of gaming activity operated in: The organization's facility An outside facility 13a 100 % 13b 0 %			
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	,		i
	Name > William Bruso, Secretary			
	Address > 144 North Street, Bennington, VT 05201			
	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a		1
Ø	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$			
C	If "Yes," enter name and address of the third party:			
	Name ▶			
	Address ▷			:
18	Gaming manager information:			,
	Name ▶			
	Gaming manager compensation ▷ \$			i
	Description of services provided ▷			
	☐ Director/officer ☐ Employee ☐ Independent contractor	,		
ป ซ	Mandatory distributions:		,	
8	Is the organization required under state law to make charitable distributions from the gaming procesus to retain the state gaming license?	17a	4	
Ø	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$ NOT STATED			3

SCHEDULE (Form 890)

Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 980, Part IV, line 21 or 22.

► Attach to Form 990.

2003	Open to Public Inspection	
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2 ******************* (h) Purpose of grent or assistance Δ Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use **Employer identification number** 123325 Yea \square Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" Does the organization maintain records to substantlate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Δ (g) Desoription of non-cash assistence 89 . (f) Method of valuation (book, FMV, appraisal, other) . Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (o) Amount of non-cash . assistance (d) Amount of cash grant . Part IV and Schedule I-1 (Form 990) if additional space is needed Enter total number of section 501(c)(3) and government organizations (c) IRC section if applicable the selection criteria used to award the grants or assistance? General Information on Grants and Assistance Enter total number of other organizations Fraternal Order of Eaglos, 1861, Inc. (i) Name and address of organization or government Sec Altachment Nome of the organization Part I Part II

Sahodulo I (Form 696) 2929

Cat. No. 60066P

For Privacy Act and Paporwerk Reduction Act Notico, aco the instructions for Ferm 829.

Page 2

Schedule ! (Form 990) 2009

(f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Part IV and Schedule i-1 (Form 990) if additional space is needed. Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance (o) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance See Attachment Part IV Part III

1861 Profit & Loss Detail

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Type	Date	E Z	Name	Memo	Amount
income					
Expense					
Grants & Charities	Given To				
823 · CHARITY TO	O GROUPS				
Check	6/17/2009	22605	JIMMY DURANTE CHILDREN FUND	DONATION	100.00
Check	6/17/2009	22606	DIABETTES FUND	DONATION	100.00
Check	6/17/2009	22607	GOLDEN EAGLE FUND	CONVENTION - DO	100.00
Check	6/17/2009	22608	MAX BAER HEART FUND	CONVENTION - DO	100.00
Check	6/17/2009	22609	EAGLE VILLAGE	CONVENTION - DO	100.00
Check	6/17/2009	22610	ART EHRMEN CANCER FUND	CONVENTION - DO	100.00
Check	6/17/2009	22611	KIDNEY FUND	CONVENTION - DO	100.00
Check	6/17/2009	22612	CHARITY WELFARE FUND	CONVENTION - DO	100.00
Check	6/17/2009	22613	LEW REED SPINAL CORD INJURY FUND	CONVENTION - DO	400.00
Deposit	7/9/2009		UNCASHED CHECK	CHECK #21966	-673.76
Check	7/22/2009	22727	M.A.Y.A.A. FOOTBALL	DONATION	450.00
Check	8/4/2009	22769	VERMONT POLICE ASSOCIATION	INFORMER MAG AD.	20.00
Check	8/19/2009	22836	MAU FOOTBALL	DONATION	20.00
Check	8/19/2009	22837	BENNINGTON COALITION for the HOMELE	BED RACE DONATI	20.00
Check	8/19/2009	22838	MAU GIRLS SOCCER	DONATION	20.00
Check	8/19/2009	22839	BIG BROTHERS BIG SISTERS	DONATION	20.00
Check	9/24/2009	22966	BENNINGTON PROJECT INDEPENDENCE,	DONATION	100.00
Check	9/24/2009	22967	AIDS PROJECT OF SOUTHERN VERMONT	DONATION	25.00
Check	9/24/2009	22968	JEFF NICHOLS	DONATION GAS CA	100.00
Check	9/30/2009	22973	LEONE DUSABLON	PHONE CARDS FO	100.46
Check	10/14/2009	23028	MOUNT ANTHONY WRESTLING	WRESTLING PROG	100.00
Check	10/21/2009	23050	M.A.Y.A.A. BASKETBALL ASSOCIATION	MAYAA BASKETBALL	95.00
Check	11/4/2009	23106	BENNINGTON MUSEUM	FESTIVAL OF TREES	25.00
Check	11/4/2009	23107	MT. ANTHONY GIRL'S BASKETBALL	MT. ANTHONY GIRL	100.00
Check	11/4/2009	23108	MUSEUM of BLACK WWII HISTORY	MUSEUM OF BLAC	20.00
Check	11/4/2009	23109	MT. ANTHONY LACROSS ASSOCIATION	1/4 PAGE AD.	35.00
Check	11/4/2009	23111	MT. ANTHONY BOYS' BASKETBALL	DONATION	100.00
Check	11/4/2009	23112	DISABLED AMERICAN VETERANS	DONATION	100.00
Check	11/17/2009	23160	VERMONT TROOPERS FOUNDATION, INC.	2 LINE LISTING	22.00
Check	11/17/2009	23161	MT ANTHONY UNION HIGH YEARBOOK	YEARBOOK ADVER	25.00
					Page 1

ୀ86ୀ Profit & Loss Detail June 2009 through May 2010

Туре	Date	Num	Name	Memo	Amount
Check	11/19/2009	23173	WOHRLE'S FOODS INC.	SUNDAY BREAKFAST	73.28
Check	11/19/2009	23173	WOHRLE'S FOODS INC.	THANKSGIVING DIN	2,068.68
Check	12/1/2009	23203	HERSAM ACORN	THANKSGIVING AD	75.00
Check	12/2/2009	23206	JENSEN'S RESTAURANT	THANKSGIVING DIN	70.29
Check	12/22/2009	23275	BENNINGTON BANDITS SOFTBALL TEAM	DONATION FROM T	450.00
Check	12/22/2009	23278	MOUNT ANTHONY WRESTLING	WRESTLING PROG	100.00
Check	12/22/2009	23280	SHAFTSBURY ELEMENTARY SCHOOL	SHAFTSBURY STRI	100.00
Check	12/22/2009	23281	MAKE-A-WISH FOUNDATION OF VERMONT	DONATION	20.00
Check	12/22/2009	23282	VERMONT ASSOCIATION FOR THE BLIND	DONATION	25.00
Deposit	1/8/2010			PO SUNDAY 12/27 B	10.76
Deposit	1/16/2010			SUNDAY MEMORIA	34.96
Deposit	1/17/2010			MEMORIAL SERVIC	12.72
Check	1/19/2010	23381	BIG BROTHERS BIG SISTERS	DONATION	20.00
Check	1/19/2010	23382	GMVEVAC	VETERANS ASSIST	100.00
Deposit	1/23/2010			SUNDAY BREAKFA	40.80
Check	2/2/2010	23425	VERMONT SHERIFFFS' ASSOCIATION	DONATION/MEMBE	35.00
Check	2/16/2010	23485	MONTPELIER STATE HOUSE TRIP	CAPITAL CITY FIEL	400.00
Check	2/16/2010	23486	MT. ANTHONY BASEBALL	DONATION	100.00
Check	2/16/2010	23487	VERMONT POLICE ASSOCIATION	INFORMER MAG AD	20.00
Check	3/3/2010	23553	BENNINGTON SELECTS	U14 GIRLS BASKET	20.00
Check	3/3/2010	23555	VERMONT AMERICAN LEGION	YEARBOOK	20.00
Check	3/16/2010	23606	VERMONT HOT SHOTS	DONATION VT HOT	100.00
Check	3/16/2010	23607	VERMONT STATE F.O.E. AUX.	EAGOLA RAFFLE	100.00
Check	3/17/2010	23610	DEPARTMENT OF VT. VFW	1/4 PAGE AD YEAR	40.00
Check	3/18/2010	23625	REINHART FOODSERVICE	BENEFIT DINNER O	505.84
Deposit	3/24/2010			SUNDAY BREAKFA	17.34
Check	4/1/2010	23667	REINHART FOODSERVICE	SUNDAY BREAKFA	49.69
Check	4/6/2010	23677	MAUHS SENIOR ALL NIGHT PARTY	DONATION MAUHS	00.00
Check	4/6/2010	23678	THE LEUKEMIA & LYMPHOMA SOCIETY	DONATION C/O ALI	20.00
Check	4/13/2010	23706	BENNINGTON BANDITS SOFTBALL TEAM	DONATION FROM E	544.00
Check	4/22/2010	23750	REINHART FOODSERVICE	SUNDAY BREAKFA	200.52
Check	4/22/2010	23751	BENNINGTON FIRE DEPARTMENT	BATTLE DAY PROG	150.00
Check	4/22/2010	23752	SOUTHERN VERMONT STORM	DONATION	75.00
Check	4/25/2010	23755	PSOC	PSOC (PARENTS S	370.00
				•	e

40 AM	7/08/10	ccrual Basis
	07/	

1861 Profit & Loss Detail June 2009 through May 2010

Deposit 4/25/2010 Check 5/4/2010 Check 5/4/2010 Check 5/4/2010 Check 5/18/2010 Check 5/18/2010 Check 5/18/2010 Check 5/19/2010 Check 5/19/2010 Check 6/19/2010	4/25/2010 5/4/2010 5/4/2010 5/4/2010	23792		SUNDAY BREAKEA	3C 4.8
Check Check Check Check Check Check Check Check Check 5/18 Check 5/18 Check 5/18 Check 5/16 Check 5/16 Check 5/16 Check 5/16 Check 6/12 Check 6/12	2010 2010 2010	23792			24:
Check Check Check Check Check Check Check 5/18 Check 5/18 Check 5/18 Check 5/16 Check 6/17 Cotal 823 · CHARITY TC 6/12 Check 6/17	2010 2010		BENN COUNTY BABE RUTH BASEBALL	TEAM SPONSOR	200.00
Check Check Check 5/18 Check 5/18 Check 5/18 Check 5/18 Total 823 · CHARITY TC 822 · CHARITY TO INDIV	2010	23793	BENNINGTON MUSEUM	DONATION STATE L	50.00
Check 5/18 Check 5/18 Check 5/18 Check 5/19 Total 823 · CHARITY TC 822 · CHARITY TO INDIY Check 6/12	72040	23796	BENNINGTON SEEDS, INC.	DONATION	75.00
Check Check 5/18 Check 5/18 Total 823 · CHARITY TC 822 · CHARITY TO INDIV		23843	HONOR-MARIE THOMPSON	1/4 PAGE AD - DON	150.00
Check 5/18 Check 5/19 Total 823 · CHARITY TC 822 · CHARITY TO INDIV	5/18/2010	23844	BENNINGTON POLICE ASSOCIATION	DONATION	20.00
Check 5/19 Total 823 · CHARITY TC 822 · CHARITY TO INDIY Check 6/12	5/18/2010	23845	VERMONT TROOPERS FOUNDATION, INC.	2 LINE LISTING	20.00
Total 823 · CHARITY TO 822 · CHARITY TO INDIY Check 6/12	5/19/2010	23847	PATRICIA D. DeCOFF	BENIFIT DINNER	185.00
822 · CHARITY TO INDIV Check 6/12	GROUPS				9,226.83
	/IDUALS				
	6/12/2009	22594	CDC	DONATION FOR CLI	50.00
Check 6/16	6/16/2009	22600	ANTSO	DONATION FOR AL	00.09
Check 6/25	6/25/2009	22644	DAVID BUSHEE	DUES REIMBURSM	25.00
Check 11/2	11/23/2009	23174	PRICE CHOPPER	THANKSGIVING DIN	83.62
General Journal 11/2	11/24/2009			THANKSGIVING DO	30.00
Check 11/2	11/24/2009	23175	GREEN RIVER FARM	THANKSGIVING	220.00
Deposit 11/2	11/25/2009		THANKSGIVING	THANKSGIVING PO	28.95
Check 12/1	12/17/2009	23265	REINHART FOODSERVICE	SUNDAY BREAKFAST	113.95
Check 1/21	1/21/2010	23398	REINHART FOODSERVICE	SUNDAY BREAKFA	286.53
Check 2/9/	2/9/2010	23454	DAVID DOORR	SPAGHETTI DINNE	50.00
Check 2/19	2/19/2010	23518	REINHART FOODSERVICE	SUNDAY 2/28 BREA	199.51
Deposit 3/8//	3/8/2010			PO SUNDAY BREAK	9.24
Check 4/8/	4/8/2010	23694	FLORENCE LOOMIS	DONATION NOTARY	20.00
Check 5/4/	5/4/2010	23794	LAURA RAFTER	DONATION MUSCU	20.00
Total 822 · CHARITY TO INDIVIDUALS	JOINDINI	ALS			1,226.80
Total Grants & Charities Given To	Given To				10,453.63
BENEFITS PAID TO/FOR MEMBERS	AEMBERS				
861 · AWAKUS Check 6/18	6/18/2009	22618	TOMASI'S SPORTS & AWARDS	P.W.P. PLAQUES	6.36
Total 861 · AWARDS					6.36

1861 Profit & Loss Detail June 2009 through

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Туре	Date	NEW E	Name	Memo	Amount
878 · BENEFITS PAID FOR/TO MEMBERS	AID FOR/TO N	MEMBERS			
General Journal	6/1/2009			2 LIFE MEMBERS	20.00
General Journal	6/1/2009			30 GOLDEN EAGLE	750.00
General Journal	6/1/2009			10 MILITARY-BUSH	250.00
General Journal	6/1/2009			10 OFFICERS - STR	250.00
General Journal	6/1/2009			3 HOSPITAL - LUBE	75.00
Check	6/5/2009	22567	NEXT DOOR BEER & WINE, INC.	liquor	40.00
Deposit	6/2/2009			member snacks- fri	63.92
Deposit	6/5/2009			members snacks-fri	-85.00
Check	6/2/2009	22559	G. HOUSEN		30.00
Check	6/5/2009	22558	BAKER DIST		30.00
Check	6/2/2009	22562	BAKER DIST	INVOICE # 318142-7	30.00
Check	6/2/2009	22560	BAKER DIST	INVOICE #321738-7	30.00
Check	6/2/2009	22565	BAKER DIST	INVOICE #325444-8	30.00
Check	6/8/2009	22575	HANNAFORD SUPER STORE	thurs.dinner	89.68
Check	6/12/2009	22595	G HOUSEN		30.00
Check	6/18/2009	22629	G HOUSEN	INVOICE #834785	30.00
Check	6/18/2009	22630	NEXT DOOR BEER & WINE, INC.	LIQUOR	40.00
Check	6/22/2009	22632	NORTHLAND FOODS	INV # 122249	216.07
Check	6/24/2009	22633	PRICE CHOPPER	thurs.dinner	53.17
Check	6/25/2009	22646	NEXT DOOR BEER & WINE, INC.	LIQUOR JULY 3, '09	40.00
Deposit	6/25/2009			PO B. TRAVIS THUR	28.32
Deposit	6/29/2009			THURS DINNER F. S	37.70
Check	7/2/2009	22660	BAKER DIST	INVOICE #329211-7	30.00
Check	7/2/2009	22663	NEXT DOOR BEER & WINE, INC.	LIQUOR	40.00
Check	7/2/2009	22661	G HOUSEN	INVOICE #841025	30.00
Deposit	7/3/2009			PO LIQUOR DELIVE	2.00
Check	7/9/2009	22694	BAKER DIST	INVOICE #332852-3	30.00
Check	7/9/2009	22695	G HOUSEN	INVOICE #843911	30.00
Check	7/9/2009	22696	NEXT DOOR BEER & WINE, INC.	LIQUOR PURCHAS	40.00
Check	7/16/2009	22710	BAKER DIST	INVOICE # 336622-6	30.00
Check	7/16/2009	22711	G HOUSEN	INVOICE #846961 J	30.00
Check	7/16/2009	22714	NEXT DOOR BEER & WINE, INC.	LIQUOR	40.00
Check	7/23/2009	22731	NORTHLAND FOODS	INV#122553 SATUR	133.63
					Page 4

1861 Profit & Loss Detail June 2009 through May 2010

Type	Date	Run En	Name	Memo	Amount
Check	7/23/2009	22741	BAKER DIST	INVOICE # 340296-3	30.00
Check	7/23/2009	22742	G HOUSEN		30.00
Check	7/23/2009	22745	NEXT DOOR BEER & WINE, INC.	LIQUOR PURCHAS	40.00
Check	7/30/2009	22761	BAKER DIST	BENEFIT TO MEMB	30.00
Check	7/30/2009	22762	G HOUSEN	BENEFIT TO MEMB	30.00
Check	7/30/2009	22765	NEXT DOOR BEER & WINE, INC.	LIQUOR	40.00
Deposit	7/31/2009			ERROR PO	12.00
Check	8/6/2009	22789	BAKER DIST	INVOICE # 347831-0	30.00
Check	8/6/2009	22790	G HOUSEN	BENEFIT TO MEMB	30.00
Deposit	8/9/2009			PO F.STRATTON SR	25.00
Deposit	8/9/2009			PO JENN OVERCHA	2.00
Deposit	8/12/2009			PO B. WILKINS PIZZ	14.76
Check	8/13/2009	22806	BAKER DIST	BENEFIT TO MEMB	30.00
Check	8/13/2009	22807	G HOUSEN	BENEFIT TO MEMB	30.00
Check	8/13/2009	22808	NEXT DOOR BEER & WINE, INC.	LIQUOR	40.00
Deposit	8/14/2009			PO LIQUOR DELIVE	2.00
Check	8/16/2009	22817	FAMILY OF RALPH ROGERS JR	DEATH BENEFIT	150.00
Check	8/16/2009	22818	FAMILY OF GALE BURKE	DEATH BENEFIT	150.00
Check	8/16/2009	22819	FAMILY OF HARRY BISHOP	DEATH BENEFIT	200.00
Check	8/16/2009	22820	FAMILY OF DONALD GOODWIN	DEATH BENEFIT	200.00
Check	8/18/2009	22821	TRACTOR SUPPLY	GIFT CERT. FOR US	40.00
Check	8/19/2009	22828	WOHRLE'S FOODS INC.	DELIVERY CHARGE	5.00
Check	8/19/2009	22830	BAKER DIST	INVOICE #359178-1	30.00
Check	8/19/2009	22831	G HOUSEN	BENEFIT TO MEMB	30.00
Check	8/19/2009	22832	NEXT DOOR BEER & WINE, INC.	LIQUOR	40.00
Deposit	8/21/2009			LIQUOR DELIVERY	2.00
Check	8/27/2009	22869	BAKER DIST	INVOICE #362857-5	30.00
Check	8/27/2009	22870	G HOUSEN	BENEFIT TO MEMB	30.00
Check	8/27/2009	22871	NEXT DOOR BEER & WINE, INC.	LIQUOR	40.00
Deposit	8/28/2009			LIQUOR DELIVERY	2.00
Check	9/1/2009	22881	GIFT GARDEN	FLOWERS-DEATH B	116.00
Check	9/3/2009	22897	G HOUSEN	BENEFIT TO MEMB	30.00
Check	9/3/2009	22898	NEXT DOOR BEER & WINE, INC.	LIQUOR	40.00
Deposit	9/4/2009			LIQUOR DELIVERY	5.00

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ୀଞ୍ଜୀ Profit & Loss Detail June 2009 through May 2010

Туре	Date	Num	Name	Memo	Amount
General Journal	9/8/2009			2010-2011 DUES PA	75.00
Check	9/10/2009	22917	BAKER DIST	BENEFITS TO MEM	30.00
Check	9/10/2009	22918	G HOUSEN	BENEFITS TO MEM	30.00
Check	9/10/2009	22919	NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Deposit	9/11/2009			PO LIQUOR DELIVE	2.00
Deposit	9/15/2009			PO TO NASCAR PO	30.00
Check	9/17/2009	22941	BAKER DIST	INVOICE #370249-5	30.00
Check	9/17/2009	22942	G HOUSEN	INVOICE #875189	30.00
Check	9/17/2009	22943	NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Check	9/17/2009	22946	NINO'S EQUIPMENT, INC.	FUEL SURCHARGE	3.00
Deposit	9/18/2009			LIQUOR DELIVERY	5.00
Check	9/24/2009	22962	NINO'S EQUIPMENT, INC.	FUEL SURCHARGE	3.00
Check	9/24/2009	22963	BAKER DIST	INVOICE #373881-2	30.00
Check	9/24/2009	22964	G HOUSEN	BENEFITS TO MEM	30.00
Check	9/24/2009	22962	NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Deposit	9/25/2009			PO LIQUOR DELIVE	2.00
Deposit	9/28/2009			CHAIR RENTAL R S	-5.00
Check	9/29/2009	22971	SCOTT SWEET	REIMBURSEMENT F	270.00
Check	9/30/2009	22972	STEVE MARSDEN	COIN BOARD SHOR	20.00
Check	10/1/2009	22984	WOHRLE'S FOODS INC.	FUEL CHARGE	5.00
Check	10/1/2009	22987	BAKER DIST	INVOICE #377418-9	30.00
Check	10/1/2009	22988	G HOUSEN	BENEFITS TO MEM	30.00
Check	10/1/2009	22989	NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Check	10/8/2009	23012	NINO'S EQUIPMENT, INC.	FUEL SURCHARGE	3.00
Check	10/8/2009	23014	BAKER DIST	INVOICE #380926-6	30.00
Check	10/8/2009	23015	G HOUSEN	BENEFITS TO MEM	30.00
Check	10/8/2009	23016	NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Deposit	10/9/2009			PO LIQUOR DELIVE	2.00
Deposit	10/13/2009			POOL TABLE	-100.00
Check	10/16/2009	23040	G HOUSEN	BENEFITS TO MEM	30.00
Check	10/16/2009	23041	BAKER DIST	INVOICE #384588-0	30.00
Check	10/16/2009	23042	NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Deposit	10/16/2009			PO LIQUOR DELIVE	2.00
Check	10/17/2009	23045	G HOUSEN	BENEFITS TO MEM	30.00

ୀଞ୍ଜୀ Profit & Loss Detail June 2009 through May 2010

Туре	Date	Num Sum	Name	Memo	Amount
Check	10/22/2009	23054	BAKER DIST	INVOICE #388017-6	30.00
Check	10/22/2009	23055	G HOUSEN	BENEFITS TO MEM	30.00
Check	10/22/2009	23056	NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Deposit	10/23/2009			PO LIQUOR DELIVE	2.00
Deposit	10/24/2009			HALLOWEEN PART	24.18
Deposit	10/24/2009			HALLOWEEN PART	3.25
Check	10/29/2009	23087	BAKER DIST	BENEFITS TO MEM	30.00
Check	10/29/2009	23088	G HOUSEN	BENEFITS TO MEM	30.00
Check	10/29/2009	23089	NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Check	10/29/2009	23093	NINO'S EQUIPMENT, INC.	FUEL SURCHARGE	3.00
Deposit	10/29/2009			HALLOWEEN PART	23.75
Deposit	10/30/2009			PO HALLOWEEN P	24.22
Deposit	10/30/2009			PO LIQUOR DELIVE	5.00
Deposit	10/31/2009			PO R STRATTON H	24.60
Deposit	10/31/2009			HALLOWEEN COST	225.00
Check	11/4/2009	23100	NINO'S EQUIPMENT, INC.	FUEL SURCHARGE	
Check	11/4/2009	23105	DEBBIE TIFFT	DEATH BENEFIT FA	200.00
Check	11/5/2009	23113	BAKER DIST	INVOICE #394822-1	30.00
Check	11/5/2009	23114	G HOUSEN	BENEFITS TO MEM	30.00
Check	11/5/2009	23115	NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Deposit	11/6/2009			PO LIQUOR DELIVE	5.00
Deposit	11/7/2009			PO HALLOWEEN PI	24.99
Deposit	11/7/2009			PO L TRAVIS HALL	2.10
Check	11/8/2009	23132	WOHRLE'S FOODS INC.	TAMPON & PAD MA	348.93
Check	11/10/2009	23133	NINO'S EQUIPMENT, INC.	FUEL SURCHARGE	
Check	11/12/2009	23146	BAKER DIST	BENEFITS TO MEM	30.00
Check	11/12/2009	23147	G HOUSEN	BENEFITS TO MEM	30.00
Check	11/12/2009	23148	NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Check	11/12/2009	23151	WOHRLE'S FOODS INC.	DELIVERY CHARGE	5.00
Deposit	11/13/2009			PO TO MEMBER GA	5.00
Deposit	11/13/2009			PO LIQUOR DELIVE	5.00
Check	11/17/2009	23156	NINO'S EQUIPMENT, INC.	FUEL SURCHARGE	3.00
Check	11/19/2009	23169	BAKER DIST	INVOICE #401450-2	30.00
Check	11/19/2009	23170	G HOUSEN	BENEFITS TO MEM	30.00

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Туре	Date	Num English	Name	Memo	Amount
Check	11/19/2009	23171	NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Check	11/19/2009	23173	WOHRLE'S FOODS INC.	DELIVERY CHARGE	
Deposit	11/20/2009			PO LIQUOR DELIVE	5.00
Check	11/25/2009	23196	WOHRLE'S FOODS INC.	INVOICE #454775-00	
Check	11/25/2009	23197	BAKER DIST	INVOICE #404822-9	30.00
Check	11/25/2009	23198	G HOUSEN	BENEFITS TO MEM	30.00
Check	11/25/2009	23199	NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Deposit	11/27/2009			PO LIQUOR DELIVE	5.00
Check	12/3/2009	23214	BAKER DIST	INVOICE #408217-8	30.00
Check	12/3/2009	23215	G HOUSEN	BENEFITS TO MEM	30.00
Check	12/3/2009	23216	NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Check	12/3/2009	23221	WOHRLE'S FOODS INC.	DELIVERY CHARGE	5.00
Deposit	12/4/2009			PO LIQUOR DELIVE	5.00
Check	12/6/2009	23225	GRAND AERIE MEMBERSHIP DEPT., F.O.E.	MEMBERSHIP SUP	438.50
Check	12/8/2009	23228	NINO'S EQUIPMENT, INC.	FUEL SURCHARGE	3.00
Check	12/10/2009	23243	BAKER DIST	INVOICE #411674-5	30.00
Check	12/10/2009	23244	G HOUSEN	BENEFITS TO MEM	30.00
Check	12/10/2009	23245	NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Check	12/10/2009	23246	WOHRLE'S FOODS INC.	DELIVERY CHARGE	9.00 9.00
Deposit	12/11/2009			PO TO BILL ERRIN	2.00
Deposit	12/11/2009			PO LIQUOR DELIVE	5.00
Check	12/14/2009	23251	WAL-MART	CHILDREN'S XMAS	653.65
Check	12/17/2009	ELEC	BENNINGTON BANNER	GIFT CARDS FOR T	70.00
Check	12/17/2009	23265	REINHART FOODSERVICE	FUEL CHARGE	3.50
Check	12/17/2009	23266	NINO'S EQUIPMENT, INC.	FUEL SURCHARGE	3.00
Check	12/17/2009	23268	BAKER DIST	INVOICE #415216-1	30.00
Check	12/17/2009	23269	G HOUSEN	BENEFITS TO MEM	30.00
Check	12/17/2009	23270	NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Deposit	12/18/2009			PO R STRATTON KI	17.76
Deposit	12/18/2009			PO KIDS XMAS PAR	48.25
Deposit	12/18/2009			PO LIQUOR DELIVE	2.00
Deposit	12/19/2009			PO TO JUKEBOX F	2.00
Check	12/20/2009	23274	NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Deposit	12/20/2009			PO TO COIN BOAR	1,000.00

1861 Profit & Loss Detail June 2009 through May 2010

Туре	Date	Ne S	Name	Memo	Amount
Check	12/22/2009	23292	BAKER DIST	INVOICE #418630-0	30.00
Check	12/22/2009	23293	G HOUSEN	BENEFITS TO MEM	30.00
Deposit	12/23/2009			PO LIQUOR DELIVE	5.00
Deposit	12/24/2009			REMAINING BALAN	6.12
Check	12/27/2009	23304	NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Deposit	12/27/2009			ROLAIDS	-0.50
Deposit	12/28/2009			INCOME FROM PO	-90.00
Deposit	12/28/2009			REIMBURSMENT F	-62.60
Deposit	12/28/2009			PO FOR SNOW SHO	24.37
Check	12/30/2009	23318	BAKER DIST	BEER PURCHASE I	30.00
Check	12/30/2009	23319	G HOUSEN	BENEFITS TO MEM	30.00
Check	12/30/2009	23320	REINHART FOODSERVICE	FUEL CHARGE	3.50
Check	12/30/2009	23321	NINO'S EQUIPMENT, INC.	FUEL CHARGE	3.00
Deposit	12/30/2009			PO LIQUOR DELIVE	5.00
Check	1/5/2010	23324	BENNINGTON BANNER	DEC. ADS	436.96
Check	1/7/2010	23335	BAKER DIST	BEER PURCHASE I	30.00
Check	1/7/2010	23336	G HOUSEN	BENEFITS TO MEM	30.00
Check	1/7/2010	23337	NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Deposit	1/8/2010			PO LIQUOR DELIVE	5.00
Check	1/12/2010	23354	NINO'S EQUIPMENT, INC.	FUEL CHARGE	3.00
Check	1/12/2010	23355	CASH	POOL TABLE EQUI	413.77
Check	1/14/2010	23364	REINHART FOODSERVICE	FUEL CHARGE	3.50
Check	1/14/2010	23373	BAKER DIST	BEER PURCHASE I	30.00
Check	1/14/2010	23374	G HOUSEN	BENEFITS TO MEM	30.00
Check	1/14/2010	23375	NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Deposit	1/15/2010			PO LIQUOR DELIVE	2.00
Deposit	1/20/2010			PO FOR POOL TAB	3.61
Check	1/21/2010	23392	BAKER DIST	BEER PURCHASE I	30.00
Check	1/21/2010	23393	G HOUSEN	BENEFITS TO MEM	30.00
Check	1/21/2010	23394	NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Check	1/21/2010	23395	NINO'S EQUIPMENT, INC.	FUEL CHARGE	
Check	1/21/2010	23398	REINHART FOODSERVICE	FUEL CHARGE	3.50
Deposit	1/22/2010			PO LIQUOR DELIVE	2.00
Check	1/28/2010	23413	BAKER DIST	BEER PURCHASE I	30.00

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Туре	Date	Nem	Name	Memo	Amount
Check	1/28/2010	23414	G HOUSEN	BENEFITS TO MEM	30.00
Check	1/28/2010	23415	NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Check	1/28/2010	23418	REINHART FOODSERVICE	FUEL CHARGE	3.50
Deposit	1/29/2010			LIQUOR DELIVERY	9.00
Check	2/2/2010	23426	NINO'S EQUIPMENT, INC.	FUEL CHARGE/SPE	10.24
Check	2/4/2010	23432	BAKER DIST	BEER PURCHASE I	30.00
Check	2/4/2010	23433	G HOUSEN	BENEFITS TO MEM	30.00
Check	2/4/2010	23434	NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Check	2/4/2010	23446	REINHART FOODSERVICE	FUEL CHARGE	3.50
Check	2/4/2010	23450	GRAND AERIE F.O.E.	CONSTITUTION BO	162.50
Deposit	2/4/2010			PO FELT TIP PENS	2.12
Deposit	2/5/2010			PO LIQUOR DELIVE	5.00
Deposit	2/6/2010			PO BATTERIES FOR	3.70
Deposit	2/7/2010			PO TO FOOTBALL	2.00
Check	2/8/2010	23453	CHARLES BAKER	BAR TV	536.43
Check	2/11/2010	23463	BAKER DIST	BEER PURCHASE I	30.00
Check	2/11/2010	23464	G HOUSEN	BENEFITS TO MEM	30.00
Check	2/11/2010	23465	NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Check	2/11/2010	23469	REINHART FOODSERVICE	FUEL CHARGE	8.02
Deposit	2/12/2010			PO LIQUOR DELIVE	2.00
Check	2/18/2010	23511	BAKER DIST	BEER PURCHASE 1	30.00
Check	2/18/2010	23512	G HOUSEN	BENEFITS TO MEM	30.00
Check	2/18/2010	23513	NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Check	2/18/2010	23515	NINO'S EQUIPMENT, INC.	FUEL CHARGE/SPE	3.00
Check	2/18/2010	23517	GRAND AERIE MEMBERSHIP DEPT., F.O.E.	INITIATION MEMBE	70.00
Check	2/19/2010	23518	REINHART FOODSERVICE	FUEL CHARGE	3.50
Deposit	2/19/2010			PO LIQUOR DELIVE	2.00
Check	2/25/2010	23536	NINO'S EQUIPMENT, INC.	FUEL CHARGE/SPE	3.00
Check	2/25/2010	23538	BAKER DIST	BEER PURCHASE I	30.00
Check	2/25/2010	23539	G HOUSEN	BENEFITS TO MEM	30.00
Check	2/25/2010	23540	NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Deposit	2/26/2010			PO LIQUOR DELIVE	2.00
Check	3/3/2010	23554	G HOUSEN	BENEFITS TO MEM	30.00
Check	3/3/2010	ELEC	GIFT GARDEN	FLOWERS-DEATH B	61.48
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Туре	Date	E n	Name	Memo	Amount
Check	3/3/2010	23557	BENNINGTON BANNER	JAN '10 ADS	93.63
Check	3/4/2010	23570	BAKER DIST	BEER PURCHASE I	30.00
Check	3/4/2010	23571	G HOUSEN	BENEFITS TO MEM	30.00
Check	3/4/2010	23572	NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Deposit	3/5/2010			PO LIQUOR DELIVE	2.00
Check	3/7/2010	23579	BERTHA POTTER	DEATH BENEFIT	150.00
Check	3/11/2010	23582	G HOUSEN	BENEFITS TO MEM	30.00
Check	3/11/2010	23583	NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Check	3/11/2010	23593	CHARLES BAKER	TV MOUNT	105.96
Check	3/11/2010	23596	REINHART FOODSERVICE	FUEL SURCHARGE	3.50
Check	3/11/2010	23596	REINHART FOODSERVICE	TAX	0.13
Deposit	3/11/2010			PO FOR HARD COV	18.97
Deposit	3/12/2010			PO LIQUOR DELIVE	2.00
Check	3/17/2010	23609	BAKER DIST	BEER PURCHASE I	30.00
Check	3/18/2010	23621	BAKER DIST	BEER PURCHASE I	30.00
Check	3/18/2010	23622	G HOUSEN	BENEFITS TO MEM	30.00
Check	3/18/2010	23623	NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Check	3/18/2010	23625	REINHART FOODSERVICE	FUEL SURCHARGE	4.92
Check	3/18/2010	23626	NINO'S EQUIPMENT, INC.	FUEL SURCHARGE	3.00
Deposit	3/19/2010			PO LIQUOR DELIVE	2.00
Deposit	3/21/2010			PO B BRUSO FRAM	7.95
Check	3/25/2010	23636	BAKER DIST	BEER PURCHASE I	30.00
Check	3/25/2010	23637	G HOUSEN	BENEFITS TO MEM	30.00
Check	3/25/2010	23638	NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Check	3/25/2010	23640	GRAND AERIE MEMBERSHIP DEPT., F.O.E.	INITIATION MEMBE	20.00
Check	3/25/2010	23645	NINO'S EQUIPMENT, INC.	FUEL SURCHARGE	3.00
Deposit	3/26/2010			PO LIQUOR DELIVE	5.00
Deposit	3/26/2010			PO FRIDAY SNACKS	4.74
Deposit	3/27/2010			PO BILL BRUSO KE	4.92
Check	3/30/2010	23649	SHIRLEY CLARK	DEATH BENEFIT CH	450.00
Check	4/1/2010	23661	BAKER DIST	BEER PURCHASE I	30.00
Check	4/1/2010	23662	G HOUSEN	BENEFITS TO MEM	30.00
Check	4/1/2010	23663	NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Check	4/1/2010	23666	NINO'S EQUIPMENT, INC.	FUEL SURCHARGE	3.00

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Type	Date	Num	Name	Memo	Amount
Check	4/1/2010	23667	REINHART FOODSERVICE	FUEL SURCHARGE	4.29
Check	4/1/2010	23668	REINHART FOODSERVICE	FUEL SURCHARGE	3.50
Deposit	4/2/2010			PO LIQUOR DELIVE	2.00
Check	4/8/2010	23687	BAKER DIST	BEER PURCHASE I	30.00
Check	4/8/2010	23688	G HOUSEN	BENEFITS TO MEM	30.00
Check	4/8/2010	23689	NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Check	4/8/2010	23692	REINHART FOODSERVICE	FUEL SURCHARGE	5.57
Deposit	4/9/2010			PO LIQUOR DELIVE	2.00
Check	4/10/2010	23700	GRAND AERIE MEMBERSHIP DEPT., F.O.E.	INITIATION MEMBE	20.00
General Journal	4/12/2010			2010-2011 DUES -O	300.00
Check	4/14/2010	23712	NINO'S EQUIPMENT, INC.	FUEL SURCHARGE	3.00
Check	4/15/2010	23715	BAKER DIST	BEER PURCHASE 1	30.00
Check	4/15/2010	23716	G HOUSEN	BENEFITS TO MEM	30.00
Check	4/15/2010	23717	NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Check	4/15/2010	23721	REINHART FOODSERVICE	FUEL SURCHARGE	4.90
General Journal	4/16/2010			2010-2011 DUES MI	325.00
Deposit	4/16/2010			PO LIQUOR DELIVE	2.00
Check	4/21/2010	23737	G HOUSEN	BENEFITS TO MEM	30.00
Check	4/22/2010	23746	BAKER DIST	BEER PURCHASE I	30.00
Check	4/22/2010	23747	G HOUSEN	BENEFITS TO MEM	30.00
Check	4/22/2010	23748	NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Check	4/22/2010	23750	REINHART FOODSERVICE	FUEL SURCHARGE	3.50
Deposit	4/23/2010			PO LIQUOR DELIVE	9.00
Check	4/25/2010	23754	BAKER DIST	BEER PURCHASE I	30.00
Check	4/27/2010	23759	NINO'S EQUIPMENT, INC.	FUEL SURCHARGE	3.00
Check	4/29/2010	23771	BAKER DIST	BEER PURCHASE I	30.00
Check	4/29/2010	23772	G HOUSEN	BENEFITS TO MEM	30.00
Check	4/29/2010	23773	NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Check	4/29/2010	23776	REINHART FOODSERVICE	FUEL SURCHARGE	3.50
Check	4/29/2010	23777	GRAND AERIE F.O.E.	INVOICE #0000049356	116.00
Deposit	4/30/2010			PO LIQUOR DELIVE	2.00
Check	5/4/2010	23780	GRAND AERIE F.O.E.	MEMBERSHIP BATCH	80.00
Check	5/4/2010	23781	BENNINGTON BANNER	REF #101410907-04	44.20
Check	5/4/2010	23782	NINO'S EQUIPMENT, INC.	FUEL SURCHARGE	3.00

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14,335.45

Total BENEFITS PAID TO/FOR MEMBERS

Total Expense

Net Income

24,789.08

-24,789.08

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8:40 AM 07/08/10 Accrual Basis

June 2009 through May 2010

Check Deposit Check					
Deposit Check	5/4/2010	23787	GIFT GARDEN	FLOWERS-DEATH B	58.00
Check	5/4/2010			PO RECEIPT BOOK	11.12
	5/6/2010	23808	BAKER DIST	BEER PURCHASE I	30.00
Check	5/6/2010	23809	G HOUSEN	BENEFITS TO MEM	30.00
Check	5/6/2010	23810	NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Check	5/6/2010	23814	REINHART FOODSERVICE	FUEL SURCHARGE	3.50
Deposit	5/7/2010			PO LIQUOR DELIVE	5.00
Deposit	5/8/2010			PO R STRATTON M	25.38
Check	5/11/2010		NINO'S EQUIPMENT, INC.	FUEL SURCHARGE	3.00
Check	5/13/2010	23835	REINHART FOODSERVICE	FUEL SURCHARGE	3.50
Check	5/13/2010		BAKER DIST	BEER PURCHASE I	30.00
Check	5/13/2010		G HOUSEN	BENEFITS TO MEM	30.00
Check	5/13/2010		NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Deposit	5/14/2010			PO LIQUOR DELIVE	5.00
Check	5/20/2010	23857	BAKER DIST	BEER PURCHASE I	30.00
Check	5/20/2010	23858	G HOUSEN	BENEFITS TO MEM	30.00
Check	5/20/2010	23859	NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Deposit	5/21/2010			PO LIQUOR DELIVE	5.00
Check	5/25/2010	23865	NINO'S EQUIPMENT, INC.	FUEL SURCHARGE	3.00
Check	5/27/2010	23883	BAKER DIST	BEER PURCHASE 1	30.00
Check	5/27/2010	23884	G HOUSEN	BENEFITS TO MEM	30.00
Check	5/27/2010	23885	NEXT DOOR BEER & WINE, INC.	BENEFITS TO MEM	40.00
Check	5/27/2010	23889	REINHART FOODSERVICE	FUEL SURCHARGE	3.50
Deposit	5/28/2010			PO LIQUOR DELIVE	5.00
Check	5/31/2010	23890	F.O.E. 1861 AUXILIARY	ERROR - AUX DUES	17.00
Total 878 · BENEFITS PAID FOR/TO MEMBERS	FITS PAID FOR	VTO MEM	3ERS	ï	14,329.09