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Form 990-EZ

Short Form Return of Organization Exempt From Income Tax

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

2009

OMB No 1545-1150

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form
 The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public Inspection

Department of the Treasury Internal Revenue Service

DAA

06/01/09 For the 2009 calendar year, or tax year beginning , and ending Employer identification number Please Name of organization Check if applicable use (RS Fraternal Order of the Eagles Address change label or 34-0233162 Aerie #811 Name change print or Telephone number Number and street (or P O box, if mail is not delivered to street address) Room/suite Initial return type. See 330-264-8818 Termination 231 Beall Ave. Specific Group Exemption Amended return City or town, state or country, and ZIP + 4 Instruc-OH 44691 Wooster 0102 Application pending Number tions $|\mathbf{X}|$ • Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach G Accounting method Cash a completed Schedule A (Form 990 or 990-EZ). Other (specify) X if the organization is not Website: ▶ Check > required to attach Schedule B (Form 990, 990-EZ, or 990-PF) 527 Tax-exempt status (check only one) — If the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000 A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return 351,838 Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.) Part I Contributions, gifts, grants, and similar amounts received 20 1 2 Program service revenue including government fees and contracts 5,928 See Statement 1 3 3 Membership dues and assessments ಣ 19,532 Investment income 4 5a 5a Gross amount from sale of assets other than inventory Less cost or other basis and sales Experises ED 5b b Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 5¢ Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here $|\mathbf{X}|$ Õ Gross revenue (not including \$UUT 1 8 2010 of contributions 223,318 reported on line 1) 6a 159,9726b Less direct expenses other than fundraising expenses 63,346 Net income or (loss) from special events and activities (Subtract line 6b from line 6a) C 103,040 7a Gross sales of inventory, less returns and allowances 7a 69<u>,</u>751 7b Less cost of goods sold 33,289 Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 7c C 8 Other revenue (describe 8 122,115 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 9 Stmt 3 14,337 Stmt 2 10 Grants and similar amounts paid (attach schedule) 10 11 6,300 11 Benefits paid to or for members 51,998 12 Salaries, other compensation, and employee benefits 12 28,239 13 13 Professional fees and other payments to independent contractors 13,122 14 Occupancy, rent, utilities, and maintenance 14 15 15 Printing, publications, postage, and shipping 77,411 Other expenses (describe See Statement 4 16 16 191,407 17 17 Total expenses. Add lines 10 through 16 -69,292 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 Net Assets Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with 744,117 end-of-year figure reported on prior year's return) 19 20 Other changes in net assets or fund balances (attach explanation) 20 674,825 Net assets or fund balances at end of year Combine lines 18 through 20 Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ (A) Beginning of year (B) End of year (See the instructions for Part II) 22 Cash, savings, and investments 121,440 22 523,553 632,372 144,928 23 Land and buildings 23 <u>11</u>,670 See Statement 5 384 24 Other assets (describe 24 754,196 680,151 Total assets 25 10,079 See Statement 6 5,326 26 Total liabilities (describe 26 744,117 674,825 Net assets or fund balances (line 27 of column (B) must agree with line 21) Form 990-EZ (2009) For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

| Form 990-EZ (2009) Fraternal Or | der of the Ea | igles 34 | -0233162 | | | Page 2 |
|--|-----------------------------|--------------------------------------|-----------------------------------|--------------|--|----------------------------|
| Part III Statement of Program Se | | | ons for Part III | .) | Ex | penses |
| What is the organization's primary exempt purpose | | | | | (Required | for section |
| See Statement 7 | | | | | 501(c)(3) a | and 501(c)(4) |
| Describe what was achieved in carrying out the org | janization's exempt purpos | ses In a clear and concise | | | organizatio | ons and section |
| manner, describe the services provided, the number | er of persons benefited, or | other relevant information for | • | | 4947(a)(1) | trusts, optional |
| each program title | | | | . | for others |) |
| 28 See Statement 8 | | | | | | |
| | | | | | | |
| | | | | | | |
| (Grants \$) If this | amount includes foreign gi | ants, check here | <u> </u> | <u> </u> | 28a | |
| 29 | | | | | | |
| | | | | | | |
| | | | | _ | | |
| (Grants \$) If this | amount includes foreign gi | ants, check here | <u> </u> | Щ | 29a | |
| 30 | | | | | | |
| | | | | | | |
| | | | | _ | | |
| (Grants \$) If this | amount includes foreign gi | ants, check here | <u> </u> | <u> </u> | 30a | |
| 31 Other program services (attach schedule) | | | | _ | | |
| (Grants \$) If this | amount includes foreign gi | rants, check here | <u> </u> | <u> </u> | 31a | |
| 32 Total program service expenses (add lines 2 | | | | > | 32 | |
| Part IV List of Officers, Directors, Trust | ees, and Key Employees | | | he ins | tructions for F | |
| (a) Name and add | Irece | (b) Title and average hours per week | (c) Compensation (If not paid, | | Contributions to ee benefit plans & | (e) Expense account and |
| (a) Name and add | | devoted to position | enter -0-) | deferre | ed compensation | other allowances |
| DEAN SPRANKLE | Wooster | PRESIDENT | | | | |
| 311 East South Street, Apt 302 | OH 44691 | 1.00 | 0 | | 0 | |
| THOMAS DAUGHERTY | Wooster | SECRETARY | | | | |
| 1684 Mechanicsburg Road, Lot 170 | OH 44691 | 2.00 | 2,784 | | 0 | |
| MARVIN HAUTER | Wooster | TREASURER | | | | |
| 221 College Avenue | OH 44691 | 1.00 | 0 | | 0 | C |
| EVOIR PARSELL | Wooster | TRUSTEE | | İ | | |
| 218 Clark Street | ОН 44691 | 1.00 | 0 | | 0 | |
| JAMES WOODWARD | Wooster | TRUSTEE | | | | |
| 856 East Hightland Avenue | ОН 44691 | 1.00 | 0 | | 0 | (|
| ROY E. ROOD | Wooster | VICE PRESIDEN | r | | | |
| 366 W South Street | ОН 44691 | 1.00 | 0 | | 0 | |
| ROYDEN PETER | Wooster | CHAPLIN | | | | |
| 200 South Market Street, Apt 611 | OH 44691 | 1.00 | 0 | | 0 | (|
| STEVE WEAVER | Wooster | TRUSTEE | | | | |
| 563 Winter Street | OH 44691 | 1.00 | . 0 | | 0 | (|
| NORMAN L. BALDWIN | Wooster | INSIDE GUARD | | | | |
| 4400 Melrose Drive, Lot 200 | OH 44691 | 1.00 | 0 | | 0 | (|
| JIM HERPEL | Wooster | CONDUCTOR | _ | 1 | | |
| P.O. Box 1873 | ОН 44691 | 1.00 | 0 | - | 0 | |
| KENNETH WOHLFORD | Wooster | OUTSIDE GUARI | | | _ | |
| 1121 Point of View #E | ОН 44691 | 1.00 | 0 | | 0 | |
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and enter the amount of tax-exempt interest received or accrued during the tax year

"Yes," Form 990 must be completed instead of Form 990-EZ

Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of

Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If

X X

Yes

No

Form 990-EZ (2009)

| orm | 990-EZ (2009) Fraternal Order of the Eagles | 3 | <u>4-0233</u> 162 | | | ⊃age 4 |
|-------------|--|---------------------------------------|-------------------------|---|---------------------------|-----------------|
| | rt VI Section 501(c)(3) organizations and section 4947(a |)(1) nonexemp | t charitable tru | ists only. All se | ection | |
| | 501(c)(3) organizations and section 4947(a)(1) none: | xempt charitabl | e trusts must a | nswer question | ns 46-49b | |
| | and complete the tables for lines 50 and 51. | · | | | | |
| 6 | Did the organization engage in direct or indirect political campaign activities on | behalf of or in oppos | sition to | | Yes | No |
| • | candidates for public office? If "Yes," complete Schedule C, Part I | | | | 46 | Π |
| 7 | Did the organization engage in lobbying activities? If "Yes," complete Schedule | C. Part II | | | 47 | |
| 8 | Is the organization operating a school as described in section 170(b)(1)(A)(ii)? I | | chedule E | | 48 | |
| 9a | Did the organization make any transfers to an exempt non-charitable related organization | | | | 49a | |
| b | If "Yes," was the related organization a section 527 organization? | 9 | | | 49b | |
| 0 | Complete this table for the organization's five highest compensated employees | (other than officers. | directors, trustees | and kev | | |
| • | employees) who each received more than \$100,000 of compensation from the | | | | | |
| _ | (a) Name and address of each employee paid more | (b) Title and average | | (d) Contributions to | (e) Exper | |
| | than \$100,000 | hours per week devoted to position | | employee benefit plans & deferred compensation | account a other allowa | |
| | | | | | | |
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| | | | | | | |
| | Total number of other employees paid over \$100,000 | | <u> </u> | | <u> </u> | |
| f | Total fluiliber of other employees paid over \$100,000 | _ | | - | | |
| | \$100,000 of compensation from the organization. If there is none, enter "None" (a) Name and address of each independent contractor paid more than \$100,000. | |) Type of service | (c) (| Compensation | |
| | (-) | | , | | | |
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| | | 1 | | | | |
| d | Total number of other independent contractors each receiving over \$100,000 | • | | | | |
| _ | , , , , , , , , , , , , , , , , , , , | | | | | |
| | Under penalties of perjury, I declare that I have examined this return, including | accompanying schedul | es and statements, and | d to the best of my kno | wledge | |
| | and belief, it is true, correct, and complete Declaration of steparer (other than | officer) is based on all i | nformation of which pro | egarer has/any knowle | dge | |
| Sig | n I I hoster of my try | | 1 140 | 13/16 | | |
| ler | e Signature of officer | | Date | | _ | |
| | Thomas Daugherty | Sec | retary | | | |
| | Type or print name and title | | | | | |
| | Processed A = | Date | Check if | Preparer's Iden | itifying Number (S | See instr) |
| Paid | d Preparer's signature | CPA 10/1 | 3/10 self- employed | ▶□ P0001 | 4257 | |
| | Tanada Garage | Inc. | - / - or employed | | 4-1939 | 640 |
| | 0 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | | | | | |
| <i>-</i> 30 | | | | Phone no ▶ 330 | -262-7 | 7111 |
| 1400 | the IRS discuss this return with the preparer shown above? See instructions | | | | X Yes | No |
| vialy | the into discuss this return with the preparer shown above, see instructions | | | | orm 990-EZ | |
| | | | | F | UIII 3335-E2 | - (2009) |

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

See separate instructions.

OMB No 1545-0047

2009

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Fraternal Order of the Eagles Employer identification number Name of the organization 34-0233162 Aerie #811 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 Solicitation of non-government grants Mail solicitations Solicitation of government grants Internet and email solicitations Special fundraising events Phone solicitations In-person solicitations 2a 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? 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 (iii) Did fund-(v) Amount paid to (ii) Activity (IV) Gross receipts (vi) Amount paid to (I) Name of individual raiser have (or retained by) from activity (or retained by) or entity (fundraiser) custody or fundraiser listed in organization control of contributions' col (i) Yes No

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

Total

34-0233162

Schedule G (Form 990 or 990-EZ) 2009

Page 2

| P | art l | Fundraising E | vents. Complete if ,000 on Form 990- | the orga | inization ansv 6a. List even | wered "Yes" to | Form 990, Part eceipts greater t | IV, line than \$5, | 18, or repo ,000 | orted | 1 |
|-----------------|-------------|--|---|----------------------------|---------------------------------|-----------------------------|-------------------------------------|-----------------------|----------------------------------|--------|-----|
| | | | (a) Event #1 | | (b) E | vent #2 | (c) Other event | s | (d) Total e (add col (a) | throug | gh |
| Revenue | 1 2 3 | Gross receipts Less Charitable contributions Gross revenue (line 1 minus line 2) | (event type) | | (even | t type) | (total number) | | col (c | | |
| | 5 | Cash prizes Noncash prizes | | | | | | | | | |
| ses | 6 | Rent/facility costs | | | - | | | | | | |
| Direct Expenses | 7 | Food and beverages | | | | | | | | | |
| ۵ | 8 | Entertainment Other direct expenses | | | | | | | | | |
| | 10 | Direct expense summary | - | | | | | P (| | | |
| P | 11 art I | Net income summary Co | ombine line 3, column (d) plete if the organiza |), and line 1 ation ans | o wered "Yes" | to Form 990, F | Part IV, line 19, | or repor | ted more | | |
| | ī | | on Form 990-EZ, li | | | | | · · | | | |
| Revenue | | | (a) Bingo | | • • | abs/instant essive bingo | (c) Other gamin | 9 | (d) Total game col (a) throug | | |
| | 1 | Gross revenue | · · · · | | - | 223,318 | | | 22 | 23,3 | 318 |
| xbeuses | 2 | Cash prizes | | | <u> </u> | 142,925 | | | 14 | 12,9 | 925 |
| Exper | 3 | Noncash prizes | | | | | | | | | |
| Direct E | 4 | Rent/facility costs | | | | | - | | | | |
| _ | 5 | Other direct expenses Volunteer labor | Yes X No | % | Yes X No | 17,047 % | Yes X No | % | 1 | L7,(| 047 |
| | 7 | Direct expense summary | | n column (d | | | <u> </u> | • (| 15 | 59,9 | 972 |
| | 8 | Net gaming income sumr | nary Combine line 1, co | olumn d, and | d line 7 | | | <u> </u> | - ε | 53,3 | 346 |
| 9 a b | ls t | ter the state(s) in which the the organization licensed to No," Explain | | - | | : | | | 9a | Yes | No |
| 10a b | | ere any of the organization' Yes," Explain | s gaming licenses revok | ed, suspen | ded or terminate | d during the tax yea | ar? | | <u>10a</u> | | X |
| 11 12 | İs | es the organization operate the organization a grantor, med to administer charitab | beneficiary or trustee of | | | tnership or other e | ntity | | 11 | | x |

| Sche | dule G (Form 990 or 990-EZ) 2009 Fraternal Order of the Eagles 34-023316 | 52 | Р | age 3 |
|--------------|---|-----|-----|---|
| 13 a b | Indicate the percentage of gaming activity operated in The organization's facility An outside facility Provide the name and address of the person who prepares the organization's gaming/special events books | | Yes | No |
| | and records Name ► Amber Spencer 231 Beall Avenue Address ► Wooster OH 44691 | | | *************************************** |
| 15a | Does the organization have a contract with a third party from whom the organization receives gaming revenue? | 15a | | x |
| b | If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the | | | |
| С | amount of gaming revenue retained by the third party ▶ \$ If "Yes," enter name and address of the third party | | | |
| | Name ► | | | |
| | Address ► | | | |
| 16 | Gaming manager information | | | |
| | Name ▶ Amber Spencer | | | |
| | Gaming manager compensation ▶ \$ 8,546 | | | |
| | Description of services provided ▶ Recordkeeping, money counting, bank dep | | | |
| | Director/officer X Employee Independent contractor | | | |
| 17 | Mandatory distributions | | | |
| а | Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? | 17a | х | |
| b | Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$ 11,479 | | | |

Schedule G (Form 990 or 990-EZ) 2009

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

OMB No 1545-0172 2009

► See separate instructions.

► Attach to your tax return.

Attachment Sequence No

Fraternal Order of the Eagles Identifying number Name(s) shown on return 34-0233162 Aerie #811 Business or activity to which this form relates Indirect Depreciation Election To Expense Certain Property Under Section 179 Part I Note: If you have any listed property, complete Part V before you complete Part I. 250,000 1 Maximum amount. See the instructions for a higher limit for certain businesses. 2 Total cost of section 179 property placed in service (see instructions) 2 800,000 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-4 4 Pollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions (b) Cost (business use only) (c) Elected cost (a) Description of property 6 7 7 Listed property Enter the amount from line 29 8 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 Tentative deduction Enter the smaller of line 5 or line 8 9 9 10 10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 11 12 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See Instr.) Special depreciation allowance for qualified property (other than listed property) placed in service 14 14 during the tax year (see instructions) 15 Property subject to section 168(f)(1) election 15 4,426 16 Other depreciation (including ACRS) 16 MACRS Depreciation (Do not include listed property) (See instructions) Part III Section A 8,047 17 MACRS deductions for assets placed in service in tax years beginning before 2009 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2009 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and year (d) Recovery placed in (business/investment use (e) Convention (f) Method (g) Depreciation deduction (a) Classification of property period service only-see instructions) 19a 3-year property b 5-year property 1,551 7.0 HY 200DB 221 7-year property d 10-year property 8,549 15.0 150DB 428 HY e 15-year property 20-year property 25 yrs S/L 25-year property S/L 27 5 yrs MM h Residential rental property ММ S/L 27 5 yrs MM S/L Nonresidential real 39 vrs property MM S/L Section C—Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System 20a Class life 12 <u>yrs</u> S/L 12-year MM S/L 40-year 40 yrs Summary (See instructions.) Part IV Listed property Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here 13,122 and on the appropriate lines of your return. Partnerships and S corporations—see instructions For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

Form **4562**

Department of the Treasury

Depreciation and Amortization

(Including Information on Listed Property)

OMB No 1545-0172 2009

Internal Revenue Service

9) See separate instructions.

Attach to your tax return.

2009 Attachment Sequence No 6

Fraternal Order of the Eagles Identifying number Name(s) shown on return Aerie #811 34-0233162 Business or activity to which this form relates Hall rental Election To Expense Certain Property Under Section 179 Part I Note: If you have any listed property, complete Part V before you complete Part I. 1 250,000 Maximum amount. See the instructions for a higher limit for certain businesses. 2 2 Total cost of section 179 property placed in service (see instructions) 800,000 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-4 4 5 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions (b) Cost (business use only) (c) Elected cost (a) Description of property 7 7 Listed property Enter the amount from line 29 8 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 Tentative deduction Enter the smaller of line 5 or line 8 9 a 10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instr.) Special depreciation allowance for qualified property (other than listed property) placed in service 14 during the tax year (see instructions) 14 Property subject to section 168(f)(1) election 15 15 2,763 16 Other depreciation (including ACRS) 16 MACRS Depreciation (Do not include listed property) (See instructions.) Part III Section A 8,206 17 17 MACRS deductions for assets placed in service in tax years beginning before 2009 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2009 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and year (d) Recovery placed in (e) Convention (f) Method (g) Depreciation deduction (a) Classification of property (business/investment use service only-see instructions) 19a 3-year property 5-year property b 7-year property d 10-year property 596 150DB 30 15.0 HY e 15-year property 20-year property 25 yrs S/L 25-year property S/L 27 5 yrs MM h Residential rental property MM S/L 27 5 yrs MM S/L Nonresidential real 39 yrs property MM S/L Section C—Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System 20a Class life 12 yrs S/I 12-year 40-year MM S/L 40 yrs Summary (See instructions.) Part IV Listed property Enter amount from line 28 21 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here 10,999 and on the appropriate lines of your return. Partnerships and S corporations—see instructions 22 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

FRAT3402 Fraternal Order of the Eagles

34-0233162 Federal Statements 10/13/2010 2:30 PM

FYE: 5/31/2010

Statement 1 - Form 990-EZ, Part I, Line 3 - Membership Dues and Assessments

| <u>Description</u> | | Amount |
|--------------------|--------------|-------------|
| Dues | from Members | \$ 5,928 |
| | Total | \$ 5,928 |

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FRAT3402 Fraternal Order of the Eagles 34-0233162

Federal Statements

FYE: 5/31/2010

| Affiliates |
|--------------------|
| \$ |
| Payments |
| 4 |
| 9 |
| Line 10 |
| Part I, L |
| t 2 - Form 990-EZ, |
| N |
| Statement |

| Amount of Payment | 2,858 | 2,858 | |
|---------------------|-------------------|-------|--|
| Name and Address | Due to Affiliates | Total | |

Statement 3 - Form 990-EZ, Part I, Line 10 - Grants and Similar Amounts Paid to Organizations

| | FMV Explanation | |
|----------------------|----------------------------|---------------------------------|
| | Book Value Explanation | |
| | Book Value | |
| | Noncash Contribution | |
| Class of Activity | Cash Contribution | |
| | Description of Property | ırist |
| Name and Address | Date of Gift | Trinity United Church of Christ |
| | | Trinity 1 |

9,205

150 E. North Street

Wooster, OH 44691

Total

9,205

FRAT3402 Fraternal Order of the Eagles 34-0233162 Federal Statements

FYE: 5/31/2010

Statement 4 - Form 990-EZ, Part I, Line 16 - Other Expenses

| Description | Amount |
|---------------------------|-----------|
| Hall rental | \$ |
| Investment Depreciation | 10,999 |
| Expenses | |
| Kitchen Supplies | 3,794 |
| Miscellaneous Supplies | 633 |
| Office Supplies | 315 |
| Telephone | 1,914 |
| Postage | 220 |
| Printing | 264 |
| Bar - Laundry | 4,007 |
| Subscriptions | 136 |
| Insurance - General | 4,494 |
| Licenses | 2,543 |
| Repairs and Maintenance | 7,445 |
| Security Expense | 852 |
| Real Estate Taxes | 8,371 |
| Bank Charges | 135 |
| Utilities | 21,386 |
| Miscellaneous | 267 |
| Bands/Music/Entertainment | 3,300 |
| Interest Expense | 665 |
| Groundskeeping | 3,571 |
| Advertising | 2,100 |
| Total | \$ 77,411 |

Statement 5 - Form 990-EZ, Part II, Line 24 - Other Assets

| Description | ginning FYear | | End of Year |
|---|------------------|----|--------------------------------|
| Other Loans Receivable Inventories for Sale or Use Machinery and Equipment Less Accumulated Depreciation | \$ 384 | \$ | 350 384 78,783 67,847 |
| | 384 | _ | 11,670 |

Statement 6 - Form 990-EZ, Part II, Line 26 - Total Liabilities

| Description | Beginning of Year | _ | End of Year |
|----------------------|----------------------|----------|----------------|
| Accruals - 941 Taxes | \$ 588 | • | 713 |
| Accruals - State W/H | 69 |) | 87 |
| Accruals - City W/H | 59 |) | 78 |
| Accruals - Sales Tax | 508 | } | 407 |
| Credit card balance | 8,855 | <u> </u> | 4,041 |
| | 10,079 | _ | 5,326 |

FRAT3402 Fraternal Order of the Eagles
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FYE: 5/31/2010

Statement 7 - Form 990-EZ, Part III - Organization's Primary Exempt Purpose

Description

Fraternal Association where portion of funds collected is donated to other charitable exempt organizations to better the community.

Statement 8 - Form 990-EZ, Part III, Line 28 - Statement of Program Service Accomplishments

Description

Operation of a fraternal lodge whereby providing social and recreational activities for the members of the fraternal lodge. There are approximately 300 members. A portion of funds earned is donated to local charities to better the community.

Year Ended: May 31, 2010 34-0233162

Fraternal Order of the Eagles Aerie #811 231 Beall Ave. Wooster, OH 44691

Electing out of the 50% Bonus Depreciation Allowance for All Eligible Depreciable Property

The taxpayer elects out of the 50% first-year bonus depreciation allowance under IRC Section 168(k) for all eligible asset classes of depreciable property acquired after December 31, 2007. This election applies to all eligible depreciable property placed in service during the tax year.

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Form 990-EZ, Part I, Line 11 - Benefits Paid To or For Members

| Description | | Amount | |
|-----------------|----|--------|--|
| Member Benefits | \$ | 6,300 | |
| Total | \$ | 6,300 | |

| | T. | 7 |
|--|---|---|
| 10/13/2010 2:30 PM | Accumulated Depreciation \$ | |
| | End of Year \$ 32,592 115,785 66,206 \$ 214,583 | |
| ements | Part II, Line 23 - Land and Buildings eginning 632,372 632,372 \$ 632,372 \$ | |
| Federal Statements | Form 990-EZ, Part II, Line 23 Beginning of Year \$ 632,372 | |
| FRAT3402 Fraternal Order of the Eagles 34-0233162 FYE: 5/31/2010 | Description Land Buildings and Improvements Land Improvements Total | |