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

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

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

OMB No 1545-0047 2009 Open to Public

Dep Inte	artment of the	Treasury Service	► The organ	benefit t ization may have to use a	rust or private for copy of this return		ate reportin	g requirem	ents	Open to Public Inspection
A			ear, or tax year begin	7//1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/		5/31/10		<u> </u>		<u> </u>
В	Check if applica		C Name of organization	Fraternal Orde		s		D	Employ	yer identification number
	Address change	use IRS		361 Aerie					, ,	
$\overline{\Box}$	Name change	label or print or	Doing Business As						35-	0320876
$\Box$	Initial return	type.	Number and street (or	P O box if mail is not delivered to s	treet address)		Room/suil	te E	Telepho	one number
		See Specific	301 N. Ha	rt, PO Box 301						
	Termination	Instruc-	1 -	or country, and ZIP + 4				G	Gross recei	pts\$ 253,890
	Amended return	tions.	Princeton	I	N 47670					
	Application pen	<sub>ding</sub> F Name	e and address of princi	oal officer				H(	a) Is this a	group return for
		1						H	affiliates  b) Are all a	
								'''	include	
				<del></del>					If "No,"	attach a list (see instructions)
31_	Tax-exempt		501(c) ( <b>8</b> )		a)(1) or   5:	27		<del> </del>		
آ <u>ل</u> _	Website:									exemption number
	Type of organiz			Association Other			_ Year of form	ation	1	M State of legal domicile
	Part I	Summa								
í Ž	1 Brief	ly describe i	the organization's m	ission or most significant	activities					
કે છુ	56	e scne	dule O			•	aS			
rar ,						· · ba.	"CHION			
 3oven	Ì	_	<del>1</del>		0	ieive all	ec.			
Governance	2 Chec	ck this box	► if the organiza	tion discontinued its opera	ations or disposed	of mole than	25% of its	net assets	1 1	
ું જ	3 Num	ber of voting	g members of the go	overning body (Part VI, line	e 1a) SBI	~ ~ J	50		3	
Activities	4 Num	ber of indep	endent voting mem	pers of the governing body	y (Part VI, line 1b)	EEB O.	rteg	•	4	
Ęį	5 Tota	l number of	employees (Part V,	line 2a)		0	st h. II	4	5	
Ą	6 Tota	l number of	volunteers (estimate	tion discontinued its operativerning body (Part VI, line pers of the governing body line 2a) are from Part VIII, column the from Form 990-T, line the 1h)		Midw	eville,		6	
	7a Tota	l gross unre	lated business revei	nue from Part VIII, column	i (C), line 12	EVSU	9		7a	
	b Net t	unrelated bu	isiness taxable incor	ne from Form 990-T, line	34	<u> </u>		Prior Vone	7b	Current Year
	8 Cont	ributions an	d grants (Part VIII I	ne 1h\				r iioi i cai		Current Tean
Revenue	9 Prog	ram service	revenue (Part VIII)	line 2n)			-	46.	255	35,743
Ş.	10 Inves	stment incor	me (Part VIII, colum	n (A), lines 3, 4, and 7d)			<del> </del> -			
8	11 Othe		•	, lines 5, 6d, 8c, 9c, 10c, a	and 11e)			46.	569	78,779
				11 (must equal Part VIII, o		)			824	114,522
	1			art IX, column (A), lines 1-			<del></del>			
	l l		• •	t IX, column (A), line 4)	•					
S	1 45 0.4			yee benefits (Part IX, col	umn (A), lines 5–1	0)		14,	403	7,519
Expenses	16a Profe		•	X, column (A), line 11e)		•				
ě	b Tota	l fundraising	expenses (Part IX,	column (D), line 25) ▶						
û	17 Othe	er expenses	(Part IX, column (A)	, lines 11a-11d, 11f-24f)				82,	288	87,995
	18 Tota	l expenses	Add lines 13-17 (m	ust equal Part IX, column	(A), line 25)			96,	691	95,514
		enue less ex	penses Subtract lir	e 18 from line 12					867	19,008
Net Assets or	Ses						Beginni	ng of Curren		End of Year
sset	20 Tota		irt X, line 16)					180,	340	199,348
E .	<b>21</b> Tota	•	Part X, line 26)					100		
~~~				ct line 21 from line 20				180,	340	199,348
	Part II		re Block		<u> </u>					
		Under pena	tus true correct and co	e that I have examined this ret	urn, including accomp	panying schedi	ules and state	ements, and	to the bes	st of my knowledge
۵.		unique circi, i	2/	Deciaration of prepar	er (outer than onicer)	is based on all	i illionnation (	or william prep	I	any knowledge
	gn	<u> </u>		100					<u> </u>	
HE	ere	. ~	ure of officer	0 (a):					Date	1.29-2011
			.,,	colmes trust	٠٠٠					
_		y Type o	r print name and title	7) /	<del></del>	<del></del>	<del></del>			Preparer's identifying number
Þя	aid (	Preparer's	I Solt	1. It all		Date	, , , , [	Check If self-		(see instructions)
	eparer's	signature	* Waller	UNITE COTO		01/	<u>/29/11</u>	employed	<u> </u>	P00817177
	se Only	Firm's name	e (or yours		PA P.C.				EIN >	35-1877407
-	····y	if self-emplo	• •	N First Ave		ож 7			Phone	040 000 445
-		address, an			47670				no 🕨	<u>812-385-4431</u>
-				rer shown above? (see in:						Yes No
Fo DA	r Privacy A A	ct and Pap	erwork Reduction	Act Notice, see the sepa	rate instructions.					Form 990 (2009)

Form **990** (2009)

orm 990 (2009)	Fraternal Order of	of Eagles 35-0	320876	Page <b>2</b>
Part III S	tatement of Program Serv	ice Accomplishments		-
	ribe the organization's mission			
See Sch	edule O			
2 Did the orga	anization undertake any significant i	program services during the year which were not	t listed on	
	rm 990 or 990-EZ?	program services during the year which were no	r listed on	Yes X No
•	scribe these new services on Scheo	tule O		163 22 110
		e significant changes in how it conducts, any pro	ogram	
services?	3.	, ,,		Yes X No
If "Yes," des	scribe these changes on Schedule	0		
4 Describe the	e exempt purpose achievements fo	r each of the organization's three largest program	m services by expenses	
Section 501	(c)(3) and 501(c)(4) organizations	and section 4947(a)(1) trusts are required to repe	ort the amount of grants and	
allocations t	to others, the total expenses, and re	evenue, if any, for each program service reported	d	
			<del>-</del>	
4a (Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
		agles is an internation		
		uniting fraterally in the		
or libe	erty, truth, justi	ce, and equality, to mail	ke numan	
		lessening its ills and	promoting	
peace,	prosperity, gladn	ess, and nope.		
4b (Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
4- (Codo	\	unalisation area of the	) (Bayanya 6	
4c (Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
4d Other progr	ram services (Describe in Scheduli	e O )		
(Expenses			Revenue \$	)
	ram service expenses	53 447		<del></del>

Form 990 (2009) Fraternal Order of Eagles
Part IV Checklist of Required Schedules

Pa	R IV Checklist of Required Schedules		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		res	NO
	complete Schedule A	1		<u> </u>
	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
	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		$\mathbf{x}_{-}$
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
•	Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
•	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	6		<u>X</u> _
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	1	'	
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7_		<u>X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	1		
	complete Schedule D, Part III	8		_ <u>X</u> _
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		<u>X</u>
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
	quasi-endowments? If "Yes," complete Schedule D, Part V	10	<u> </u>	X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	11	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI			
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			
•	Did the organization report an amount for other assets related 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	1		
	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			<del>                                     </del>
	Schedule D, Parts XI, XII, and XIII	12		X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?  Yes N  If "Yes " completing Schedule D. Parts XI, XII, and XIII is optional 12A X			
	1 100, 0011,0011,001		ŀ	v
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	148	+	<u> </u>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	141		x
4-	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	141	<del>' </del> -	<del>  ^</del>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	15		$\mathbf{x}$
40	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	18	+	<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	16		x
47	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	''	+	<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	17	.	x
40	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	1	+	A
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	18	. [	x
10	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	-"	+	+~
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	,	x
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
20	Did the organization operate one or more hospitals. If Tes, complete ocheane in		<u>′ 1</u>	

**Checklist of Required Schedules (continued)** Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations X in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 Did the organization report more than \$5,000 of grants and other assistance to individuals in the 22 X 22 United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the 23 organization's current and former officers, directors, trustees, key employees, and highest compensated X 23 employees? If "Yes," complete Schedule J 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 X 24b through 24d and complete Schedule K. If "No," go to line 25 24a 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c to defease any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction 25a with a disqualified person during the year? If "Yes," complete Schedule L, Part I 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 25b 990-EZ? If "Yes," complete Schedule L, Part I Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or X 26 disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 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? X 27 If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, 28 Part IV instructions for applicable filing thresholds, conditions, and exceptions) X A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete X 28b Schedule L, Part IV 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, 28c Part IV X Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 X conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes." complete Schedule N. 31 X 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete X 32 Schedule N, Part II 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations X 33 sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, 34 X 34 III. IV. and V. line 1 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete 35 X 35 Schedule R, Part V, line 2 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 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, X 37

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

Form 990 (2009)

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38

Fø	Try Statements Regarding Other IRS Filings and Tax Compliance	· · · · · · · · · · · · · · · · · · ·	Tvo	No.
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	ı	Ye	s No
10	U.S. Information Returns Enter -0- if not applicable	1a		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and rep	ortable		
•	gaming (gambling) winnings to prize winners?		1c	X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1		
	Statements, filed for the calendar year ending with or within the year covered by this return	2a		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?	2b	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see			
	instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	d by		
	this return?		3a	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	uthority		
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	ancial		
	account)?	<u></u>	4a 📗	X
b	If "Yes," enter the name of the foreign country: ▶	i		
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign I	Bank		
	and Financial Accounts			1
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	ļ-	5a	X X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction		5b	
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Rega	arding	_	
_	Prohibited Tax Shelter Transaction?	_ }	5c	
ба	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e	6a	x
<b>L</b>	organization solicit any contributions that were not tax deductible?	ne or	oa	+~
b	If "Yes," did the organization include with every solicitation an express statement that such contribution gifts were not tax deductible?	113 01	6b	
7	Organizations that may receive deductible contributions under section 170(c).	-	<u> </u>	
и а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for g	ionds		
a	and services provided to the payor?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	7a	Ì
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	s	**	+
	required to file Form 8282?		7c	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p	ersonal		
	benefit contract?	L	7e	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit control	act?	7f	
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		7g	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-0	Cas		
	required?	_	7h	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	İ		
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	}-	8	
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	<u> </u>	9a	-
b	Did the organization make a distribution to a donor, donor advisor, or related person?	-	9b	
10	Section 501(c)(7) organizations. Enter	140-1		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11	Section 501(c)(12) organizations. Enter  Gross income from members or shareholders	11a		
a		114		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )	11b		
12a			12a	1
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	126	, <u>.</u> a	_
_~	The state of the s	,~ <sub> </sub>	Form 9	90 (2009)

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.

	Schedule O. See instructions.			
<u>Sec</u>	tion A. Governing Body and Management			<del></del>
			Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2	+	X
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	-	X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		-	X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6	-	X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	_		7,
	of the governing body?	7a		X
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:		•	
a	The governing body?	8a		
b	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		x	
500	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	<u> </u>	Ь
	etion B. Policies (This Section B requests information about policies not required by the Interprenue Code.)	IIdi		
1167	reflue Code.)		Voc	No
10a	Does the organization have local chapters, branches, or affiliates?	10:	Yes	No X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	100	*	<u> </u>
Ü	affiliates, and branches to ensure their operations are consistent with those of the organization?	101		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	101	<del>'</del>	<del>                                     </del>
••	form?	11		x
11a		<del>  ''</del>	+	1
12a		12:		X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give	12.	-	<del></del>
-	rise to conflicts?	12	<u>.</u>	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	12	1	$\vdash$
_	describe in Schedule O how this is done	120	.	
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15	a	<u> </u>
b	Other officers or key employees of the organization	15		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
16a				
	with a taxable entity during the year?	16	a	x
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16	ь	1
Sec	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ None			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only	<i>(</i> )		
	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 interest			
	policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization >			

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if the organization	n did not compe	nsate	e any	cur/	rent	offic	er, d	rector, or trustee		
(A) Name and Title	(B) Average hours per		(C) sition (check all th					(D)  Reportable  compensation	(E) Reportable compensation	(F) Estimated
	nours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
					<u> </u>					
						_				
								<u> </u>		
DAA										Form 990 (2009)

	) Fraternal	Order	of	Ea	ıgl	es			35-032	0876		Pa	ige 8
Part VII	Section A. Officers	, Directors, Tru	ıstee	s, K	ey E	mpl	oyee	s, a	nd Highest Compensated	Employees (continued)			
Name	(A) e and Title	(B) Average hours per week	ndividual trustee or director			Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estima amoun othe compens from ti organiza and rela organiza	ted t of r sation he ation ated	
			-									<del>-</del>	
·				_	-								
											-		
	***************************************												
1b Total													
2 Total num					thos	se lis	sted a	<del></del>	/e) who received more than	1 \$100,000 in	<u></u>		
3 Did the oi	e compensation from	ormer officer, d	recto	or or	trust	ee, l	кеу е	mpl	oyee, or highest compensa	ited		Yes	
4 For any in	ization and related o	e 1a, is the sum	of re	eport	able	con	npen	satio	on and other compensation es," complete Schedule J fo		3		X
5 Did any p services i		nization? If "Yes							ny unrelated organization for such person	or	5_		х
	this table for your fi ation from the organ		pens	ated	ınde	pen	dent	cont	tractors that received more	than \$100,000 of			
		(A) d business address							Descri	(B) plion of services	a	(C) ompensa	ition
											_	<del></del>	
						-							
2 Total nun	pher of independent	contractors (ma	Judia	a hii	t not	lim	ad t	n the	ose listed above) who recei	wed			
	n \$100,000 in compe										O	n <b>990</b>	(200

Pa	rt V	III Stater	nent of Reve	nue						
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts	1a	Federated car	mpaigns	1a				revenue		312, 310, 01 314
ran	b	Membership o		1b				ļ		
s, g	c	Fundraising e		1c						
gift	ď	Related organ		1d						
is,	e	Government grants		1e						
Contributions, gifts, grants and other similar amounts	f	All other contribution		<del>  '`</del>	···					
the state	•		s not included above	1f						
T D	g	Noncash contribute	ons included in lines 1a							
Ωg	h	Total. Add line		• •		▶ أ	•			
Program Service Revenue						Busn. Code			· · · · · · · · · · · · · · · · · · ·	
ver	2a	Members	hip Dues				35,743	35,743		
Re	b		-							
vice	С						<del>-</del>			
Ser	d									
am.	е									
og.	f	All other progr	am service reve	nue						
<u>-</u>	g	Total. Add line	es 2a–2f			<b>•</b>	35,743			
	3		come (including	dividend	ds, intere	st, and				
		other similar a	mounts)			▶				
	4	Income from I	nvestment of tax	(-exemp	ot bond p	roceeds 🕨	· · · · · · · · · · · · · · · · · · ·			
	5	Royalties								
			(ı) Real		(II) P	ersonal				
	6a	Gross Rents	ļ							
	þ	Less rental exps	ļ							
	С	Rental inc or (loss)								
	d 7a	Net rental inco Gross amount from				<u> </u>				
		sales of assets	(i) Securities	s	(11)	Other				
		other than inventor								
	b	Less cost or other		ì						
	_	basis & sales exps								
	c d	Gain or (loss) Net gain or (lo	L		<del></del>					
	8a		om fundraising eve	ote [					_	
Other Revenue	Ua	(not including \$	-	:11.5						
ver			reported on line 1c	\						
8		See Part IV, line		′ a						
je.	ь	Less direct ex		ь						
ō			(loss) from fund		events					
			om gaming activitie		0.00					
		See Part IV, line		a						
!	b	Less direct e		ь						
			· · (loss) from gan	ning acti	ivities	<b>&gt;</b>				
			f inventory, less							<del></del>
		returns and al	lowances	a		218,147				
	b	Less cost of	goods sold	ь[		139,368				
	С	Net income or	(loss) from sale	s of inv		<b>&gt;</b>	78,779			78,779
		Misc	ellaneous Revenue	9		Busn. Code				·
	11a									
	b									
	C									
	d	All other rever								
	е	Total. Add line				▶				
	12_	Total Revenu	e. See instruction	ons		<u> </u>	114,522	35,743	0	78,779

### Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	An other organizations must c		(B)	(C)	
	not include amounts reported on lines 6b,	(A) Total expenses	Program service	(C) Management and	(D) Fundraising
	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
	Grants and other assistance to governments and	Ì			
	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		-		
3	Grants and other assistance to governments,	ì	[		
	organizations, and individuals outside the				
	U S See Part IV, lines 15 and 16				***************************************
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	3,058		3,058	
	trustees, and key employees	3,038	<del></del>	3,030	· · · · · · · · · · · · · · · · · · ·
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
^	and section 403(b) employer contributions)			-	
9 10	Other employee benefits Payroll taxes	4,461	4,461		
10 11	Fees for services (non-employees)	-,-01	3,102	<del></del>	-
а	Management				
b	Legal				
	Accounting	140	140		
d					
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				<u> </u>
15	Royalties				
16	Occupancy	54,612	15,603	39,009	
17	Travel	86	86		
18	Payments of travel or entertainment expenses			l	
	for any federal, state, or local public officials			<del></del>	
19	Conferences, conventions, and meetings				<del>                                     </del>
20	Interest	<del></del>	<u> </u>		
21	Payments to affiliates			-	
22	Depreciation, depletion, and amortization				
23	Insurance			······································	
24	Other expenses Itemize expenses not				
4	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below	<b>\</b>			
а	0 1	14,432	14,432		
b		12,614			
c	Licenses & permits	2,804	2,804		
d		2,767	2,767		
е	m1 11 13 m. 11 13 m. 1	500			
f	All other expenses	40			
25		95,514	53,447	42,067	7
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		1		
	fundraising solicitation		<u> </u>	<u> </u>	

art	X Balance Sheet	(A)		(B)
		Beginning of year		End of year
1	Cash—non-interest bearing	11,237	1	30,245
2	Savings and temporary cash investments	44,000	2	44,000
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
5	Receivables from current and former officers, directors, trustees, key			
	employees, and highest compensated employees. Complete Part II of			
	Schedule L		5	
6	Receivables from other disqualified persons (as defined under section			
İ	4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete			
	Part II of Schedule L		6	
8 8			7	
8 8		5,000	8	5,000
( 9	Prepaid expenses and deferred charges		9	
10	a Land, buildings, and equipment cost or			
	other basis Complete Part VI of Schedule D 10a 120	0,103		
	b Less accumulated depreciation 10b	120,103	10c	120,103
11	Investments—publicly traded securities		11	·
12	Investments—other securities See Part IV, line 11	·	12	
13	Investmentsprogram-related See Part IV, line 11		13	
14			14	
15			15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	180,340	16	199,348
17			17	
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
g 21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	Payables to current and former officers, directors, trustees, key			
5	employees, highest compensated employees, and disqualified			
=	persons Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities Complete Part X of Schedule D		25	
26	Total liabilities. Add lines 17 through 25		26	
es	Organizations that follow SFAS 117, check here ▶ and			
Balances	complete lines 27 through 29, and lines 33 and 34.			
<u>명</u>   27	7 Unrestricted net assets		27	
Ď   28	B Temporarily restricted net assets		28	
일   29	· · · · · · · · · · · · · · · · · · ·		29	
	Organizations that do not follow SFAS 117, check here ▶X			
5	and complete lines 30 through 34.			
	O Capital stock or trust principal, or current funds		30	
B   3∙	1 Paid-in or capital surplus, or land, building, or equipment fund		31	
S 3	Retained earnings, endowment, accumulated income, or other funds	180,340		199,34
Net Assets	3 Total net assets or fund balances	180,340		199,34
Z   3.	4 Total liabilities and net assets/fund balances	180,340	) 3 <u>4  </u>	199,34

Form **990** (2009)

orm	990 (2009) Fraternal Order of Eagles	35-0320876		Pag	ge <b>12</b>
Pa	rt XI Financial Statements and Reporting				
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Acc	rual Other			
	If the organization changed its method of accounting from a prior year or che	cked "Other," explain in			
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an inde	ependent accountant?	2a		X
b	Were the organization's financial statements audited by an independent acco	ountant?	2b		X
С	If "Yes" to line 2a or 2b, does the organization have a committee that assume	es responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of a	in independent accountant?	2c	L	
	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 s	tatements for the year were	Ì		
	issued on a consolidated basis, separate basis, or both				
	Separate basis Consolidated basis Both consolidated and s	eparate basis			
3a	As a result of a federal award, was the organization required to undergo an a	udit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?		3a	<u> </u>	<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization	nization did not undergo the			
	required audit or guidite, explain why in Schodule O and describe any stone to	skan ta undarga auah audita	26	l	I

Form 990 (2009)

## SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

### **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

Name of the organization Employer identification number Fraternal Order of Eagles 361 Aerie 35-0320876 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 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 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements, Complete if the organization answered "Yes" to Form 990, Part IV. Part II Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2a Total number of conservation easements 2b b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section Yes No 170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art. Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art. historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service. provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

Sche	dule D (Form 990) 2009 Fraternal	Order of Ea	agles	35-03	20876	Page <b>2</b>
Pa	rt III Organizations Maintaining	Collections of Ar	t, Historical Trea	asures, or Other	Similar Assets	(continued)
3	Using the organization's acquisition, accession collection items (check all that apply)	n, and other records, c	neck any of the follow	ing that are a significa	ant use of its	
а	Public exhibition	d Loa	n or exchange progra	ms		
b	Scholarly research	e Oth		····-		
С	Preservation for future generations					
4	Provide a description of the organization's coll Part XIV	ections and explain ho	w they further the orga	anızatıon's exempt pu	irpose in	
5	During the year, did the organization solicit or assets to be sold to raise funds rather than to	receive donations of ai	t, historical treasures,	or other similar		Yes No
Pa	rt IV Escrow and Custodial Arra IV, line 9, or reported an am	ingements. Comp	lete if the organi	zation answered	"Yes" to Form 9	
12	Is the organization an agent, trustee, custodial					
14	included on Form 990, Part X?	ir or other intermediary	ioi contributions of of	iner assets not		Yes No
b	If "Yes," explain the arrangement in Part XIV a	and complete the follow	ung table			
_	Troo, explain the arrangement in rate XIV a	ina complete the follow	ing table			Amount
С	Beginning balance				1c	
	Additions during the year				1d	
	Distributions during the year				1e	
f	Ending balance				1f	
2a	Did the organization include an amount on For	rm 990, Part X, line 21	7			Yes No
b	If "Yes," explain the arrangement in Part XIV					
Pa	rt V Endowment Funds. Comple	ete if organization	answered "Yes"	to Form 990, Pa	rt IV, line 10.	
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance					
b	Contributions					
С	Net investment earnings, gains,					
	and losses					
d	Grants or scholarships					
е	Other expenditures for facilities					
	and programs					
f	Administrative expenses					
g	End of year balance				<u> </u>	
2	Provide the estimated percentage of the year					
а	Board designated or quasi-endowment ▶	%				
	Permanent endowment  %					
	Term endowment ▶ %					
sa	Are there endowment funds not in the possess	sion of the organization	that are held and ad	ministered for the		V N-
	organization by (i) unrelated organizations					Yes No
	(ii) related organizations					3a(i)
h	If "Yes" to 3a(ii), are the related organizations	listed as required on S	chadula P2			3a(ii) 3b
4	Describe in Part XIV the intended uses of the					<u> </u>
Pa	ert VI Investments—Land, Buildi			90 Part X line 1	n	
	Description of investment	(a) Cost or other bas			cumulated	(d) Book value
	·	(investment)	basis (other	''	eciation	(4) 2001 1010
1a	Land					
	Buildings					
	Leasehold improvements					
	Equipment					
	Other	120,1	03			120,103
	. Add lines 1a through 1e (Column (d) must ed			))	•	120,103

chedule D (Form 990) 2009 Fraternal Order of Each	gles	35-0320876	Page
Part VII Investments—Other Securities. See Form 99	0, Part X, line 12.		
(a) Description of security or category	(b) Book value	(c) Method of	
(including name of security)		Cost or end-of-year	r market value
ancial derivatives			
osely-held equity interests			<u> </u>
ner			
			<del></del>
	<u> </u>		<del></del>
	<del></del>	-	<del></del>
		<del></del>	
tal. (Column (b) must equal Form 990, Part X, col. (B) line 12.)			· · · · · · · · · · · · · · · · · · ·
Part VIII Investments—Program Related. See Form 99	90, Part X, line 13.		
(a) Description of investment type	(b) Book value	(c) Method of	
		Cost or end-of-year	r market value
			_
······			
		<del></del> -	
	<del> </del>		
	<del> </del>	<del></del>	
		<del></del>	
<u></u>	<u>-</u>	-	
		<u> </u>	
	<del>-</del>		
otal. (Column (b) must equal Form 990, Part X, col (B) line 13 )			
otal: (Coldinii (b) must equal / om oss; i arrit, se. (2) mis is /			
real: (Coldinit (b) that equal t citit coo; t arex, co. (2) mis is			(b) Book value
Part IX Other Assets. See Form 990, Part X, line 15.			(b) Book value
Part IX Other Assets. See Form 990, Part X, line 15.			(b) Book value
Part IX Other Assets. See Form 990, Part X, line 15.			(b) Book value
Part IX Other Assets. See Form 990, Part X, line 15.			(b) Book value
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Part IX Other Assets. See Form 990, Part X, line 15.			(b) Book value
Part IX Other Assets. See Form 990, Part X, line 15.			(b) Book value
Part IX Other Assets. See Form 990, Part X, line 15.			(b) Book value
Part IX Other Assets. See Form 990, Part X, line 15.  (a) Description  (otal. (Column (b) must equal Form 990, Part X, col (B) line 15)			(b) Book value
Part IX Other Assets. See Form 990, Part X, line 15.  (a) Description	25.		(b) Book value
Part IX Other Assets. See Form 990, Part X, line 15.  (a) Description  otal. (Column (b) must equal Form 990, Part X, col (B) line 15)	25. (b) Amount		(b) Book value
Part IX Other Assets. See Form 990, Part X, line 15.  (a) Description  otal. (Column (b) must equal Form 990, Part X, col (B) line 15)  Part X Other Liabilities. See Form 990, Part X, line 2  (a) Description of liability			(b) Book value
Part IX Other Assets. See Form 990, Part X, line 15.  (a) Description  otal. (Column (b) must equal Form 990, Part X, col (B) line 15)  Part X Other Liabilities. See Form 990, Part X, line 2  (a) Description of liability			(b) Book value
Part IX Other Assets. See Form 990, Part X, line 15.  (a) Description  otal. (Column (b) must equal Form 990, Part X, col (B) line 15)  Part X Other Liabilities. See Form 990, Part X, line 2  (a) Description of liability		•	(b) Book value
Part IX Other Assets. See Form 990, Part X, line 15.  (a) Description  otal. (Column (b) must equal Form 990, Part X, col (B) line 15)  Part X Other Liabilities. See Form 990, Part X, line 2  (a) Description of liability		•	(b) Book value
Part IX Other Assets. See Form 990, Part X, line 15.  (a) Description  otal. (Column (b) must equal Form 990, Part X, col (B) line 15)  Part X Other Liabilities. See Form 990, Part X, line 2  (a) Description of liability		<b>&gt;</b>	(b) Book value
Part IX Other Assets. See Form 990, Part X, line 15.  (a) Description  otal. (Column (b) must equal Form 990, Part X, col (B) line 15)  Part X Other Liabilities. See Form 990, Part X, line 2  (a) Description of liability		<b>&gt;</b>	(b) Book value
Part IX Other Assets. See Form 990, Part X, line 15.  (a) Description  otal. (Column (b) must equal Form 990, Part X, col (B) line 15)  Part X Other Liabilities. See Form 990, Part X, line 2  (a) Description of liability		<b>&gt;</b>	(b) Book value
Other Assets. See Form 990, Part X, line 15.  (a) Description  otal. (Column (b) must equal Form 990, Part X, col (B) line 15)  Part X Other Liabilities. See Form 990, Part X, line 2  (a) Description of liability		<b>&gt;</b>	(b) Book value
Part IX Other Assets. See Form 990, Part X, line 15.  (a) Description  Otal. (Column (b) must equal Form 990, Part X, col (B) line 15)  Part X Other Liabilities. See Form 990, Part X, line			(b) Book value
Other Assets. See Form 990, Part X, line 15.  (a) Description  otal. (Column (b) must equal Form 990, Part X, col (B) line 15)  Part X Other Liabilities. See Form 990, Part X, line 2  (a) Description of liability			(b) Book value
Part IX Other Assets. See Form 990, Part X, line 15.  (a) Description  otal. (Column (b) must equal Form 990, Part X, col (B) line 15)  Part X Other Liabilities. See Form 990, Part X, line 2  (a) Description of liability			(b) Book value
Other Assets. See Form 990, Part X, line 15.  (a) Description  otal. (Column (b) must equal Form 990, Part X, col (B) line 15)  Part X Other Liabilities. See Form 990, Part X, line 2  (a) Description of liability			(b) Book value
Other Assets. See Form 990, Part X, line 15.  (a) Description  otal. (Column (b) must equal Form 990, Part X, col (B) line 15)  Part X Other Liabilities. See Form 990, Part X, line 2  (a) Description of liability	(b) Amount		(b) Book value

Sche	dule D (Form 990) 2009 Fraternal Order of Eagles		35-032087	6	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to	Aud	ited Financial Stater	nents	<b>S</b>
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	
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	<b></b>		10	
Pa	rt XII Reconciliation of Revenue per Audited Financial Stateme	ents V	Vith Revenue per Re	eturn	
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				
а	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d		]	
е	Add lines 2a through 2d			2e	
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			
b	Other (Describe in Part XIV)	4b			
С	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	
Pa	rt XIII Reconciliation of Expenses per Audited Financial Staten	nents	With Expenses per	Retu	rn
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	ı		
	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Owner research	2c			
d		<u>2</u> d			
е	Add lines 2a through 2d			2e	<u>.</u>
3	Subtract line 2e from line 1	ſ	1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
	,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,	4a			
	Other (Describe in Part XIV )	4b	<u> </u>	┨ .	1
_	Add lines 4a and 4b			4c	<del> </del>
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		<u> </u>	5	<del></del>
	art XIV Supplemental Information	1000 10	and 4. Dort IV. June 1h		
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 3, 5, and 9, Part III, lines 3, 5, and 9, Part III, lines 3, 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1, and 1				
	2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, li	illes Zu	and 40 Also complete		
uno t	Part to provide any additional information				
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Schedule D (Fo	orm 990) 2009	Fraternal	Order of	Eagles	<u> 35-0320876                                    </u>	Page <b>5</b>
Part XIV	Suppleme	Fraternal ental Information	(continued)		<del></del>	
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#### **SCHEDULE O**

(Form 990)

Department of the Treasury Internal Revenue Service

### Supplemental Information to Form 990

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

• Attach to Form 990.

2009 Open to Public Inspection

OMB No 1545-0047

Name of the organization

Fraternal Order of Eagles 361 Aerie

Employer identification number

35-0320876

Form 990 - Organization's Mission or Most Significant Activities
The Fraternal Order of Eagles is an international
non-profit organization uniting fraternally in the spirit
of liberty, truth, justice, and equality, to make human
life more desirable by lessoning its ills and promoting
peace, prosperity, gladness and hope.

Form 990, Part III, Line 4d - All Other Achievements

The Fraternal Order of Eagles is an international

non-profit organization uniting fraternally in spirit of

liberty, truth, jsutice, and equality, to make human life

more desireable by lessening its ills and promoting

peace, prosperity, gladness and hope.

Form 990, Part VI, Line 9 - Officers Who Cannot Be Reached

James Ryan-President

Princeton, IN 47670

Brian Bell- Secretary
Princeton, IN 47670

James Bond- Treasurer Princeton, IN 47670

Form 990, Part VI, Line 11a - Organization's Process to Review Form 990

Schedule O (Form 990) 2009	Page		
Name of the organization	Employer identification number		
Fraternal Order of Eagles	35-0320876		

No review was or will be conducted.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public