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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 1545-0047

Open to Public

		the Treasury ue Service	•	The organization may have to use a copy of this return to satisfy state rep	porting requirements	Inspection
			lar year,	or tax year beginning 06-01 , 2009, and e		-31 ,20 10
B C	neck if a	pplicable	Please	C Name of organizationFRATERNAL ORDER OF EAGLES		D Employer identification no
	idress c	• •	use IRS	Doing Business As GRAND 0933	_ _	35-0321045
\equiv	ame cha	-	label or print or	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telephone number
=	tial retu	-	type. See	P. O. BOX 278 STATE RD 38 WEST	TOOMBOUNG	(765) 529-1013
邑	rminate		Specific	Crty or town, state or country, and ZIP + 4		G Gross receipts
\equiv	nended		Instruc- tions	NEW CASTLE, IN 47362		\$ 1,516,691
\equiv		n pending	F Name	and address of principal officer		
٠ ـــــ	•				H(a) Is this a group re affiliates?	eturn for Yes X No
I Ta		_	– –			
J W	ebsite:	▶ N/A			If "No," attach a H(c) Group exemptio	Included? Yes No list (see instrutions) n number
K Fo	orm of o	rganization	Corporatio	Trust Association X Other NOT FOR PROF L Year of formation	L908 M State of leg	al domicile IN
Par	tl	Summar				
	1	Briefly descr	ibe the or	ganization's mission or most significant activities CHARITABLE CO	NTRIBUTIONS	
G G					· · · · · · · · · · · · · · · · · · ·	
t o			· []	<u> </u>		
V е I г				f the organization discontinued its operations or disposed of more than 25%	,	-
t n	1		-	nbers of the governing body (Part VI, line 1a)	3	0
e n	l .			nt voting members of the governing body (Part VI, line 1b)		0
s c			•	oyees (Part V, line 2a)	5	21
&	1			teers (estimate if necessary) · · · · · · · · · · · · · · · · · · ·	6	
	1	-		business revenue from Part VIII, column (C), line 12 · · · · · · · · · · · · · · s taxable income from Form 990 -1, line 34 · · · · · · · · · · · · · · · · · ·	7a	0
		Net uniterate	u busines	DLOS		
R	8	Contribution	s and ora	nts (Part VIII, line 1h)	Prior Year 18,300	Current Year 19,454
e v	1			nue (Part VIII, line 2g)		0
e n	10	Investment i	ncome (P	art VIII, column (A), lines 3 4 and 76 7.1 8.2010 . 8	2,18	5 918
u e	1			III, column (A), lines 5, 6d 8c, 9c, 10c, and 11e) · · · · Ø · · · ·	259,940	
C	12	Total revenu	ie - add lii	nes 8 through 11 (must eq al Part (tt) count (A) (line 12)	280,425	
				ounts paid (Part IX, column (A), lines 1-3)	6,07	7,010
E	14	Benefits paid	d to or for	members (Part IX, column (A), line 4) · · · · · · · · · · · · · · · · · ·	8,64	6,392
×	15	Salaries, oth	er compe	nsation, employee benefits (Part IX, column (A), lines 5-10)	156,490	154,121
P e	16a	Professional	l fundraisi	ng fees (Part IX, column (A), line 11e)		0
n s	1		• .	enses (Part IX, column (D), line 25 130,809	4:4	,
e	1	•	-	IX, column (A), lines 11a-11d, 11f-24f)	126,020	
•				lines 13-17 (must equal Part IX, column (A), line 25)	297,224	
	19	Revenue les	s expens	es Subtract line 18 from line 12 · · · · · · · · · · · · · · · · · ·	(16,79	
Net Assets	-00	T-4-14-	(D-4 V)		Beginning of Current Year	End of Year
or Fund	20	Total liabilitie	•	·	485,32	
Bal-	_		•	ances Subtract line 21 from line 20 · · · · · · · · · · · · ·	479,170	
ances	1				4,5,11	457,200
Par	<u> </u>	Signatu Under penalt	les of periur	y, I declare that I have examined this return, including accompanying schedules and stateme	ents, and to the best of my k	nowledge
		and belief, it	is true, corre	ct, and complete Declaration of preparer (other man officer) is based on all information of w	hich preparer has any know	
Sigr	1	NW	NU	DAUM	(X	2)/0~12-10
Here		Signatu	re officer		Di	ate
	•	$(\mathbf{K}\mathbf{V})$	Wil	CE BLATTIN SELETAN		
		ype or	print name			
		Preparer's		Date Chec		dentifying number
Daid		signature	7 /	self-	oyed (see instruct	•
Paid Prepa	arer's		/	10 Jan 2000 10-06-2010	POD	267747
Use (Firm's name	or yours	EDWARDS & EDWARDS ACCTING	EIN •	_
- '	-	if self-employ address, and	yed),	915 INDIANA AVE		0627
		l		New Castle, IN 47362	Phone no ▶ 765-52	
May	the IRS	S discuss this	s return w	ith the preparer shown above? (see instructions) · · · · · · · · · · · · · · · · · · ·		· · · · X Yes No

Form	990 (2009) FRATERNAL ORDER OF EAGLES	35-0321045	Page 2
Pạ	rt III Statement of Program Service Accomplishments		
1	Briefly describe the organization's mission		
	CHARITABLE CONTRIBUTIONS		
2	Did the organization undertake any significant program services during the year which were not listed on		
2	the prior Form 990 or 990-EZ? · · · · · · · · · · · · · · · · · · ·	\ Ves	Y No
	If "Yes," describe these new services on Schedule O	· · · · · · · · · · · · · · · · · · ·	AINO
3	Did the organization cease conducting, or make significant changes in how it conducts, any program		
	services? · · · · · · · · · · · · · · · · · · ·	· · · · Yes	X No
	if "Yes," describe these changes on Schedule O		
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expense	s	
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grant	s and	
	allocations to others, the total expenses, and revenue, if any, for each program service reported		
4a	(Code) (Expenses \$92,267 including grants of \$) (Revenue	\$)
	CHARITABLE CONTRIBUTIONS, PARTICIPATING FEES, MEMBERSHIP FEES		
	WITH OUR FEES TO THE ORGANIZATION WE MAKE CONTRIBUTIONS TO		
	THE AMERICAN DIABETIC FOUNDATION, CHILD ABUSE, AND OTHER		
	CAUSES. WE ALSO MAKE CONTRIBUTIONS WITHIN THE	·	
	COMMUNITY.		
			-
4b	(Code) (Expenses \$ including grants of \$) (Revenue	\$)
		,	
			_
			 .
4c	(Code) (Expenses \$ including grants of \$) (Revenue	\$	
		<u> </u>	
			_
			_
			
4d	Other program services (Describe in Schedule O)	,	
	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses ▶ 92,267)	
4e	Total program service expenses ▶ 92,267		

Pai	rt 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,"			
	complete Schedule A · · · · · · · · · · · · · · · · · ·	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II · · · · · · · · · · · · · · · · · ·	4		Х
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)	<u> </u>		
_	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III · · · · · · · · · · · · · · · · ·	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have	<u> </u>		
•	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		v
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	- ٽ		_ X
•		7		.,
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II			X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	_		
^	complete Schedule D, Part III	8		Х
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		X
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		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	Х	ļ
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10° If "Yes," complete	,	2	
	Schedule D, Part VI			
•	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			*
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X	ļ		
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	<u> </u>	Х
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	1		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	****	Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	İ	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any		<u> </u>	
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
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		Х
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		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	<u> </u>		$+^{\Delta}$
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II · · · · · · · · · · · · · · · · · ·	18		v
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	۔،،	 	X
13	If "Yes," complete Schedule G, Part III • • • • • • • • • • • • • • • • •	19	v	
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	X	17
20	Dig the organization operate one or more hospitals in these, complete Schedule H	20	1	X

Part 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 X 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 Х 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 Χ 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 X Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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 25a X Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a b prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 25b Χ 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or 26 disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II Χ Did the organization provide a grant or other assistance to an officer, director, trustee, key employee. 27 substantial contributor, or a grant selection committee member, or to a person related to such an individual? 27 Χ 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a Χ а A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete 28b Χ 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 X Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . . 29 Χ 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 Χ Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. 31 31 Х Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 32 Х Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 33 Х Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, 34 34 Χ Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete 35 35 X Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 36 36 Х Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, 37 Х Did the organization complete Schedule O and provide explanations in Schedule O for Part VI. lines 11 and 38 19? Note. All Form 990 filers are required to complete Schedule O 38

Pai	rt V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns Enter -0- if not applicable • • • • • • • • • • • • • • • • • • •			ĺ
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable • • • • • • • • • 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners? • • • • • • • • • • • • • • • • • • •	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return • • • • • 2a 21			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? • • • • • • • • • • • • • • • • • • •	2b	Х	L
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see			
	instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			İ
	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 authority			l
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?····································	4a		X
b	If "Yes," enter the name of the foreign country			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank			
	and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? • • • • • • • • • • • • • • • • • • •	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? • • • • • • • • • • • • • • • • • • •	5b		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	_		
_	Prohibited Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
-	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	-	
_	If "Yes," did the organization notify the donor of the value of the goods or services provided? • • • • • • • • • • • • • • • • • • •	7b		Х
b	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7.5		
С	required to file Form 8282? • • • • • • • • • • • • • • • • • • •	7c		Х
ч	If "Yes," indicate the number of Forms 8282 filed during the year 7d	,,,		_^
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	 		
C	benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? • • • • • • • • • • • • • • • • • • •	7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? • • • • • • • • • • • • • • • • • • •	7g		$\overline{}$
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	- 5		
••	required? · · · · · · · · · · · · · · · · · · ·	7h		ĺ
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			1
	organization, have excess business holdings at any time during the year?	8	- 1	х
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966? • • • • • • • • • • • • • • • • • •	9a		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 · · · · · · · · · · · · · · · · · ·			1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities • • • • • • • • • • • • • • • • • • •			
11	Section 501(c)(12) organizations. Enter	1		1
а	Gross income from members or shareholders · · · · · · · · · · · · · · · · · · ·			1
b	Gross income from other sources (Do not net amounts due or paid to other sources against	1		1
	amounts due or received from them) · · · · · · · · · · · · · · · · · ·			1
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? • • • • • • • • • • • • • • • • • • •	12a		İ
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year • • • • • • 12b			

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions

Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	•		
	any other officer, director, trustee, or key employee?	2		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		Х
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? • • • • •	4		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			
	of the governing body? • • • • • • • • • • • • • • • • • • •	7a	ļ	Х
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? • • • • • • • • • • • • • • • • • • •	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following			,
а	The governing body? • • • • • • • • • • • • • • • • • • •	8a -	х	
b	Each committee with authority to act on behalf of the governing body? • • • • • • • • • • • • • • • • • • •	8b	Х	
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 · · · · · · · · · · · · · · · · · ·	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal			- 21
	enue Code)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates? • • • • • • • • • • • • • • • • • • •	10a		X
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
	form?	11		Х
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990		•••	
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13 · · · · · · · · · · · · · · · · · ·	12a		X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b		
С	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		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	15a		Х
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		Х
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?	16b		
Sec	tion C. Disclosure	-		
000 17	List the states with which a copy of this Form 990 is required to be filed IN			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)			
	available for public inspection. Indicate how you make these available. Check all that apply			
	Own website			
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 ► MICHAEL D BRATTON (765) 529-1013			
	1227 S 22ND ST NEW CASTLE, IN 47362			

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

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

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

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

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

(A)	(B)			((-			(D)	(É)	(F)
Name and Title	Average hours per week	Positi dur i se cui et de ou rao I r	l t	٥,	all to K e y e m p l o y e e	hat apply e e fine to office office of the contract of the con	Fo	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
EDWIN C ROBINSON										
PRESIDENT	1.00			Х				0	0	
JUSTIN FERRELL										
V-PRESIDENT	1.00			Х				0	0	
MICHAEL D BRATTON										
SECRETARY	25.00			X				13,563	0	
PAUL HARDWICK										
TREASURER	10.00			Х				2,600	0	
					_	ļ	_			
								_		
								-		

Pa	rt VII	Section A. Officers, Directors, Trustees	, Trustees, Key Employees, and Highest Compensated Employees (continued)											
		(A)	(B)	1			C)			(D)	(E)		(F)	
	. Name and Title		Average hours per week	Posr I t d nri dur i s e v t c i e t d e o u r a o I r	I t nr su t s i t	Office	K	hat appl H c e m I g mp I e e n y e s t s e t e d	F	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	cor	stimate mount of other mpensat from the ganization d relate ganization	of tion e ion ed
												 		
												 		
														
			<u> </u>		-							 	-	
					_						<u>,,</u>	_		
										_	-			
			 											
											<u> </u>			
			<u> </u>									 		
1b	Total									16 163	. 0	_		
2		mber of individuals (including but not limited							•	16,163	U			0
		le compensation from the organization									0			,
3	Did the	organization list any former officer, director of	or trustee, ke	y emp	loye	e, oı	hıg	hest c	omp	ensated			Yes	No
		e on line 1a? If "Yes," complete Schedule J										· 3		X
4	-	individual listed on line 1a, is the sum of repo												
	-	nization and related organizations greater th					-			e J for Such		4		X
5		person listed on line 1a receive or accrue co								on for		—		
	services	rendered to the organization? If "Yes," comp	plete Schedu	le J fo	rsu	ch p	erso	n · ·		· · · · · · · · · · · · · · · · · · ·		5		X
Sec	tion B	Independent Contractors	· 											
1		e this table for your five highest compensate sation from the organization	d independe	nt con	tract	ors	that	receiv	ed n	nore than \$100,000	O of			
		(A) Name and business addre								(B)			(C)	_
		rvanie and business addre								Description of s	services	Comp	ensatio	<u>n</u>
							_			<u> </u>	_			
2		mber of independent contractors (including ban \$100,000 in compensation from the organ		i to the	se I	iste	d ab	ove) w	ho r	eceived				

Part \	/III	 Statement of Revenue 						
•					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
	1a	Federated campaigns · · · · ·	• • • 1a		·-	-		
į	b	Membership dues	1b	19,454				
Contn- butions,	С	Fundraising events · · · · ·	1c		-			
gifts,	d	Related organizations · · · ·	1d					
grants	е	Government grants (contributions	s) · · 1e					
and other smilar	f	All other contributions, gifts, gran and similar amounts not included						
amounts	g	Noncash contributions included in	n lines 1a-1f \$					
	h	Total. Add lines 1a-1f · · · ·			19,454			
				Business Code				
	2a							
_	ь							
Program Service	С							
Revenue	d							
	e							
	f	All other program service revenue	• • • • • • •					
	g	Total. Add lines 2a-2f · · · ·		• • • • • • •				
	3	Investment income (including divident similar amounts)	•		918	918		
	4	Income from investment of tax-exe	empt bond pro	ceeds · · · ▶				
	5	Royalties · · · · · · · · · · · · · · · · · · ·		▶				
,	1		(ı) Real	(II) Personal				
	6a	Gross Rents · · · · · ·	8,495					
	ь	Less rental expenses · · · ·						
	1	Rental income or (loss)	8,495					
	d	Net rental income or (loss)			8,495	8,495		-
		Gross amount from sales of	(i) Securities	(II) Other				
	' "	assets other than inventory	. ,					
	Ь	Less cost or other basis	-					
0	}	and sales expenses · · · ·						
t		Gain or (loss)						
h	d	Net gain or (loss) · · · · · ·		• • • • • • •				
e r	8a	Gross income from fundraising						
_		events (not including \$						
R e		of contributions reported on line 1	c)					
v		See Part IV, line 18 · · · · · ·	• • • • a	8,394				
e	b	Less direct expenses · · · · ·	• • • • b					~ ~
n u	С	Net income or (loss) from fundrais	ing events .	• • • • • • •	8,394	8,394		
е	9a	Gross income from gaming activiti	es					
		See Part IV, line 19 · · · · · ·	• • • • a	1,144,875				
	ı	Less direct expenses · · · · ·		1,046,506				
	C	Net income or (loss) from gaming	activities • •	<u> • • • • • ▶ </u>	98,369	98,369		
	10a	Gross sales of inventory, less returns and allowances • • • •	a	302,083				
	b	Less cost of goods sold · · · ·	b	219,452				•
	c	Net income or (loss) from sales of	inventory · ·	• • • • • • •	82,631	82,631		
		Miscellaneous Revenue		Business Code		-		
	11a	FLOWERFUND, ATM			1,429	1,429		
	b	ADV, DOBBERS			6,256	6,256		
	c	CIGG, SALES TX ALLOW			24,787	24,787		
	d	All other revenue · · · · · ·	• • • • •					-
	е	Total. Add lines 11a-11d · · ·		• • • • • • •	32,472			
	12	Total revenue. See instructions		• • • • • • •	250,733	231,279		o c

Part IX

Statement of Functional Expenses

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

	All other organizations must complete colu		quired to complete c	olumns (B), (C), and (I	
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
1	Grants and other assistance to governments and		expenses	general expenses	expenses
•	organizations in the U.S. See Part IV, line 21 · · · ·				
2	Grants and other assistance to individuals in	- -			
-	the U.S. See Part IV, line 22 · · · · · · · · · · ·	7,010	7,010		
3	Grants and other assistance to governments,		7,010		
•	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16 · · · · · · · · ·				
4	Benefits paid to or for members · · · · · · · · ·	6,392	6,392		
5	Compensation of current officers, directors,		3,332		<u></u>
•	trustees, and key employees · · · · · · · · · ·	16,163	4,041	4,041	8,081
6	Compensation not included above, to disqualified	20,200		4,041	0,001
·	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B) · · · · · ·				
7	Other salaries and wages · · · · · · · · · · · ·	125,275	31,318	31,318	62,639
8	Pension plan contributions (include section 401(k)	123,213	31,310	31,310	02,033
Ü	and section 403(b) employer contributions) • • • • •				
9	Other employee benefits	 			
10	Payroll taxes · · · · · · · · · · · · · · · · · · ·	12,683	3,171	3,171	6,341
11	Fees for services (non-employees)	12,003	3,171	3,171	0,341
	Management · · · · · · · · · · · · · · · · · · ·				
a	Legal			-	
b	Accounting	4,320	1,080	1,080	2,160
d	Lobbying · · · · · · · · · · · · · · · · · · ·	1,520	1,000	1,000	2,100
e	Professional fundraising services See Part IV, line 17 •				
f	Investment management fees · · · · · · · · · · · ·				
g	Other · · · · · · · · · · · · · · · · · · ·				
12	Advertising and promotion	4,176	1,044	1,044	2,088
13	Office expenses · · · · · · · · · · · · · · · · · ·	10,276	2,569	2,569	5,138
14	Information technology · · · · · · · · · · · · · · · · · · ·	20,270	2,565		
15	Royalties			-	
16	Occupancy				
17	Travel · · · · · · · · · · · · · · · · · · ·			-	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials • • • • •				
19	Conferences, conventions, and meetings • • • • • •	495	124	124	247
20	Interest · · · · · · · · · · · · · · · · · · ·				
21	Payments to affiliates • • • • • • • • • • • • • • • • • • •				
22	Depreciation, depletion, and amortization · · · · · ·	13,461	13,461		
23	Insurance · · · · · · · · · · · · · · · · · · ·	10,891	2,723	2,723	5,445
24	Other expenses Itemize expenses not	,	-,2		
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed			ī,	
	5% of total expenses shown on line 25 below)	,			
а	TAX ON WAGERING	2,023	506	506	1,011
b	PEST, TRASH, FLOWERS, REPAIRS	11,288	2,822	2,822	5,644
c	LIC PERMITS, BANK, SECUR	16,432	4,108	4,108	8,216
d	BANDS AND ENTERTAINMENT	1,150	287	287	576
e	LAUND, UTIL, PRO TAX	46,445	11,611	11,611	23,223
f	All other expenses · · · · · · · · · · · · · · · · · ·	,			
25	Total functional expenses. Add lines 1 through 24f · ·	288,480	92,267	65,404	130,809
26	Joint Costs. Check here ▶ If following		,	32,100	
	SOP 98-2 Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and	1		Ì	
	fundraising solicitation · · · · · · · · · · · · · · · · · · ·			<u> </u>	Form 990 (2000)

Form 990 (2009)

Part	X	-Balance Sheet			
			(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing · · · · · · · · · · · · · · · · · · ·	189,126	1	174,363
	2	Savings and temporary cash investments		2	
1	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			
		4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete			
A s		Part II of Schedule L · · · · · · · · · · · · · · · · · ·		6	
s	7	Notes and loans receivable, net		7	
e	8	Inventories for sale or use	12,000	8	12,000
s	9	Prepaid expenses and deferred charges		9	
•	10a	1 1			
		other basis Complete Part VI of Schedule D · · · · · 10a 865,728		. :	
ļ	b	Less accumulated depreciation · · · · · · · · · · 10b 587,994	284,195	10c	277,734
ì	11	Investments - publicly traded securities · · · · · · · · · · · · · · · · · · ·		11	
	12	Investments - other securities See Part IV, line 11 · · · · · · · · · · · · · · · · · ·		12	
-	13	Investments - program-related See Part IV, line 11 · · · · · · · · · · · · · · · · · ·		13	
	14	Intangible assets · · · · · · · · · · · · · · · · · · ·		14	
	15	Other assets See Part IV, line 11 · · · · · · · · · · · · · · · · · ·		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34) · · · · · · · · · · ·	485,321	16	464,097
\rightarrow	17	Accounts payable and accrued expenses · · · · · · · · · · · · · · · · · ·	6,151	17	6,837
	18	Grants payable	0,131	18	0,03
,	19	Deferred revenue		19	
i	20	Tax-exempt bond liabilities · · · · · · · · · · · · · · · · · · ·		20	
a	21	Escrow or custodial account liability Complete Part IV of Schedule D · · · · · ·		21	
b	22	Payables to current and former officers, directors, trustees, key	* · ********* · * * * * * * * * * * * *	21	r - 1: Tools
i	22	·		7.7	
!		employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	· · · · · · · · · · · · · · · · · · ·
i	22			23	
e	23	Secured mortgages and notes payable to unrelated third parties		24	
S	24	Unsecured notes and loans payable to unrelated third parties Other liabilities Complete Part X of Schedule D	- · · - ·	25	
	25		C 151		C 027
\dashv	26	Total liabilities. Add lines 17 through 25	6,151	26	6,837
		Organizations that follow SFAS 117, check here▶ and	2000 11.00		•
l F	~	complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets	. *****	~_	~ ~
u n	27			27	
d	28	Temporarily restricted net assets		28	
В	29	Permanently restricted net assets		29	
a		Organizations that do not follow SFAS 117, check here ▶ ☒	V. 1433 14		
ı		and complete lines 30 through 34.			
a n	30	Capital stock or trust principal, or current funds		30	
C	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
e	32	Retained earnings, endowment, accumulated income, or other funds • • • • • • •	479,170	32	457,260
S	33	Total net assets or fund balances · · · · · · · · · · · · · · · · · · ·	479,170	33	457,260
- 1	34	Total liabilities and net assets/fund balances · · · · · · · · · · · · · · · · · · ·	485,321	34	464,097

EEA

Part XI Financial Statements and Reporting						
			Yes	No		
1	Accounting method used to prepare the Form 990 X Cash Cash Other					
	If the organization changed its methods of accounting from a prior year or checked "Other," explain in					
	Schedule O					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	x			
b	Were the organization's financial statements audited by an independent accountant?	2b	Х			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of					
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		Х		
	If the organization changed either its oversight process or selection process during the tax year, explain in					
	Schedule O			ĺ		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			1		
	issued on a consolidated basis, separate basis, or both					
	Separate basis Consolidated basis Both consolidated and separate basis			1		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		Ĭ .			
	the Single Audit Act and OMB Circular A-133?	3a		x		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the					
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b				
	EEA	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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

FR <i>I</i>	ATERNAL ORDER OF EAGLES	35-0321045
Pa	Organizations Maintaining Donor Advised Funds or Other Similar Funds or the organization answered "Yes" to Form 990, Part IV, line 6	
	(a) Donor advised funds	(b) Funds and other accounts
1	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 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?	· · · · · · · · · · · Yes No
6	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?	· · · · · · · · · · · · · Yes No
Pa	rt II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part I	V, line 7
1	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 a certified his	toric structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a co	onservation
	easement on the last day of the tax year	
		Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
С	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 · · · · · · · · · · · · · · · · · · ·	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organ	nization during
	the tax year 🕨	•
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it holds?	· · · · · · · · · · · · · · Yes · · No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the	ne year
	•	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year.	ar
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section	
	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	· · · · · · · · · · · · Yes No
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense state	ement, and
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements th	at describes
	the organization's accounting for conservation easements	
Pa	organizations Maintaining Collections of Art, Historical Treasures, or Othe Complete if the organization answered "Yes" to Form 990, Part IV, line 8	r Similar Assets.
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	e 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 she	eet works of art,
	historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of	·
	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	
	following amounts required to be reported under SFAS 116 relating to these items	, ,
а	Revenues included in Form 990, Part VIII, line 1 · · · · · · · · · · · · · · · · · ·	· · · · · > \$
b		
-	•	· ·

b if tes to sa(ii), are the related organizations listed	as required on Schedule	К,		. 30
4 Describe in Part XIV the intended uses of the organ	zation's endowment fund	s		
Part VI Investments - Land, Buildings,	and Equipment. S	ee Form 990, Part X,	line 10	······································
Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land · · · · · · · · · · · · · · · · · · ·	23,000		. */	23,000
b Buildings · · · · · · · · · · · · · · · · · · ·	682,940		428,206	254,734
c Leasehold improvements		,		·
d Equipment	159,788		159,788	
e Other · · · · · · · · · · · · · · · · · · ·	,			
Total. Add lines 1a through 1e (Column (d) must equal F	form 990, Part X, column	(B), line 10(c)) • •	<u> ▶ </u>	277,734

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

Department of the Treasury
Internal Revenue Service

Name of the organization

Complete in the organization aniswered Test to Form 990, Para organization entered more than \$15,000 on Form 990 or Form 990-EZ.

Inspection Employer identification number

FRATERNAL ORDER OF I	EAGLES				35-0	321045
Part I Fundraising Activi	ities. Complete if th	e organizatio	n answered	d "Yes" to Form 990, I	Part IV, line 17	
1 Indicate whether the organization						
a Mail solicitations	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			of non-government	· · ·	
b Internet and email solicitation	S			of government grant	*	
c Phone solicitations		=		ndraising events		
d In-person solicitations				-		
2a Did the organization have a writt	en or oral agreemen	t with any inc	dividual (inc	luding officers, directe	ors, trustees	
or key employees listed in Form	990, Part VII) or ent	ity in connect	tion with pr	ofessional fundraising	services?	es 🗌 No
b If "Yes," list the ten highest paid	individuals or entitie	s (fundraiser:	s) pursuant	to agreements under	which the fundraiser is	
to be compensated at least \$5,0	00 by the organizati	on				
		ı		T .	T	Ī
(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fund custody or contribu	control of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in	(vi) Amount paid to (or retained by) organization
		Yes	No		col (i)	
				1		
					-	
					•	
			ĺ			
			 		· · · · · · · · · · · · · · · · · · ·	
···						
		<u> </u>				
Total · · · · · · · · · · · · · · · · · · ·				L		<u> </u>
3 List all states in which the organia	zation is registered o	or licensed to	solicit fund	s or has been notified	It is exempt from	
registration or licensing						
						
				 		
	··					1700.
			_			
						
				 		

Pa	art II	Fundraising Events. Cor more than \$15,000 on Form 99				rted		
	•		(a) Event #1	(b) Event #2	(c) Other Events	, , ,	tal Events	
R e		,	(event type)	(event type)	(total number)	1	(a) throug ol (c))	h
v e	1	Gross receipts · · · · ·						
n U	2	Less Charitable contributions · · · · · · · ·						
е	3	Gross revenue (line 1			<u> </u>			
	<u> </u>	minus line 2) · · · · · · · · ·						
	4	Cash prizes · · · · · · · · · ·						
D	5	Non-cash prizes · · · · · ·						
r e	"	·						
c t	6	Rent/facility costs • • • • • • •	-					
E	7	Food and beverages · · · · ·				-		
p e	8	Entertainment • • • • • • • •						
n s e s	9	Other direct expenses • • • • •						
3	10	Direct expense summary Add lines	s 4 through 9 in column (d)	,		()
	11	Net income summary Combine line						
<u>P</u> a	art II	Gaming. Complete if the or than \$15,000 on Form 990-EZ		" to Form 990, Part IV, line	e 19, or reported more			
R			(a) Bingo	(b) Pull tabs/Instant	(c) Other gaming	(d) Total g		
Revenue			(a) bingo	bingo/progressive bingo	(c) Other garming	col (a) thr	ough col	(c))
	1	Gross revenue · · · · · · ·	334,695	810,180		1,1	L44,87	5
D r e c t	2	Cash prizes	330,043	655,273		2	985,31	.6
	3	Non-cash prizes · · · · · ·			,			
Expenses	4	Rent/facility costs · · · · · ·						
e s	5	Other direct expenses • • • • •	61,190	<u> </u>			61,19	90
	6	Volunteer labor • • • • • • • •	X Yes 100.00 % No	X Yes 100.00 % No	Yes %			
	7	Direct expense summary Add line	s 2 through 5 in column (d)	• • • • • • • • •	(1,0	046,50	6)
	8	Net gaming income summary Con	nbine line 1, column (d), ar	nd line 7			98,36	59
9	Ent	ter the state(s) in which the organiza	ation operates gaming activ	vities IN,			Yes	No
		he organization licensed to operate			• • • • • • • • • • • • • • • • • • • •	· · · · 9a	x X	
١	olf"	No," Explain						
		<u> </u>					ĺ	
		ere any of the organization's gaming	licenses revoked, suspend	ded or terminated during th	ne tax year? • • • • •	· · · · 10a	1	-
	" آا د 	Yes," Explain						
11	<u> </u>	es the organization operate gaming	activites with nonmembers	:?			-	
12	ls t	he organization a grantor, beneficia	ry or trustee of a trust or a	member of a partnership of	or other entity			
	for	med to administer charitable gaming	12	<u> </u>	• • • • • • • • • • • •	12	2]	

Sche	dule G (Form 990 or 990-EZ) 2009 FRATERNAL ORDER OF EAGLES 35-032	1045	P	age 3
			Yes	No
13	Indicate the percentage of gaming activity operated in			
а	*The organization's facility • • • • • • • • • • • • • • • • • • •	%]	
b	An outside facility · · · · · · · · · · · · · · · · · · ·	%		
14	Provide the name and address of the person who prepares the organization's gaming/special events books			
	and records			
	Name ▶	_		1
	Address ►	_		,
15a		 	-	-
_	revenue? · · · · · · · · · · · · · · · · · · ·	· · 15a	\sqcup	
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the			
	amount of gaming revenue retained by the third party ▶ \$			
С	If "Yes," enter name and address			
	Name ▶	_		
	Address ►			
16	Gaming manager information	_		;
	Name ▶	_		1
	Gaming manager compensation ▶ \$			
	Description of services provided	_		
	Director/officer 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		~
þ	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 > \$		1 l	

SCHEDULEI		Gra	Grants and Other Assistance to Organizations,	Assistance to	Organization	S,	1	OMB No 1545-0047
(Form 990)		Gover	Governments, and Individuals in the United States	ndividuals in	the United Sta	ıtes	-	5003
		Complete	Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.	swered "Yes," to Fo	rm 990, Part IV, line 2	1 or 22.		Open to Public
Department of the Treasury Internal Revenue Service			•	► Attach to Form 990.				Inspection
Name of the organization							Employer identification number	number
FRATERNAL ORDER OF EAGLES	F EAGLES						35-0321045	
Part I General Information on Grants and Assistance	iformation on Gr	ants and Assista	nce		7 - 7			
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	ion maintain records to	substantiate the amo	unt of the grants or ass	sistance, the grantees	eligibility for the grant	s or assistance, and		
the selection criteria 2 Describe in Part IV	the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitorir	ants or assistance? cedures for monitoring	the selection criteria used to award the grants or assistance?	in the United States	for any funds in the United States		•	
<u>≟</u>	Grants and Other Assistance to Governments and	ice to Governme	nts and Organizat	tions in the Unite	d States. Comple	Organizations in the United States. Complete of the organization answered "Yes" to	wered "Yes" to	
Form 990, Pz	Form 990, Part IV, line 21, for any recipient that received more tha	recipient that received		eck this box if no one	recipient received mor	:	•	▲
Part IV and	Schedule I-1 (Form 99)	J) if additional space is		the Amount of the	dec and of mount of			h) Purpose of or
 (a) Name and address of organization or government 	s of organization nent	Nii (g)	(c) INC section if applicable	(u) Announ or cash	assistance	(book, FMV, appraisal, other)	non-cash assistance	or assistance
								:
2 Enter total number	Enter total number of section 501(c)(3) and government organizations	nd government organi	zations		:		:	
3 Enter total number of other organizations	of other organizations	Act Notice, see the Ir	structions for Form 9	.060	EEA			Schedule I (Form 990) 2009

Form. **4562**

Depreciation and Amortization (Including Information on Listed Property)

OMB No 1545-0172

2009

Department of the Treasury

Attachment

	al Revenue Service (99)	► See separate	e instructions.	<u> </u>	Attach	to yo	our tax retur	n		Sequence No 67
Name	r(s) shown on return			Business o	r activity to	which	this form relate	s		Identifying number
FRA	ATERNAL ORDER OF E	EAGLES		FOR	M 99	0 -	· <u>1</u>			35-0321045
Pa	rt I	se Certain Pro	perty Unde	er Secti	on 179					
	Note: If you have any lis									
1	Maximum amount. See the instru	uctions for a highe	r limit for certai	n busines	sses · ·	• • •			1	
2	Total cost of section 179 property	y placed in service	e (see instruction	ons) · ·	• • • •		• • • • • •	• • •	2	
3	Threshold cost of section 179 pro	operty before redu	iction in limitation	on (see in	struction	s) ·	• • • • • •		3	
4	Reduction in limitation Subtract		- ·		• • •		• • • • • •	• • •	4	
5	Dollar limitation for tax year Sub			•		narrie	ed filing			
	separately, see instructions • •	• • • • • • • •	• • • • • •	• • • • •	• • • •	• • •		• • •	5	
	(a) Description of	f property		(b) Cost (bi	usiness use	only)	(c) Ele	cted cost		
6										
_										ļ
7	Listed property Enter the amoun				••••[7	<u> </u>			
8	Total elected cost of section 179			• • •					8	
9	Tentative deduction Enter the si								9	
10	Carryover of disallowed deductio	•							10	
11	Business income limitation. Ente						•	•	11	
12	Section 179 expense deduction		•					• • • •	12	<u> </u>
13	Carryover of disallowed deductio					13				
	Do not use Part II or Part III belo		<u> </u>			<u>/Da</u>	mot in alicela li	-4) (Ct
<u>Pai</u> 14	rt II Special Depreciation Special depreciation allowance for							stea pro	репу) (See instructions)
1	during the tax year (see instruction		····		•		Service		14	
15	Property subject to section 168(f								15	
16	Other depreciation (including AC								16	0 165
			clude listed proj						-10	9,165
rai	rt III MACRS Depreciat	.1011 (201101)	:	ction A	- Instruc	J. 1011	,			
17	MACRS deductions for assets pl	aced in service in			ore 2009				17	3,946
18	If you are electing to group any a		•	•		or n	nore general		V 3 .	2,340
		• • • • • • • •	-	-			-	. []		
	<u>`</u>	ets Placed in Serv	vice During 20	09 Tax Y	ear Usin	g the	General De	preciati	on Sy	<u> </u>
		(b) Month and	(c) Basis for dep	reciation	(d) Recov					
	(a) Classification of property	year placed in service	(business/investronly-see instru-		period	ery (e) Convention	(f) Met	hod	(g)Depreciation deduction
19a	3-year property	20 June	,							
b	5-year property					\neg				
С	7-year property									· · ·
d	10-year property STATEMEN	T#50								350
e	15-year property	T#50								
f	20-year property									
g	25-year property				25 yrs			S/L		
h	Residential rental				27 5 yr	s	MM	S/L		
	property				27 5 yr	s	MM	S/L		
i	Nonresidential real				39 yrs	;	MM	S/L		
	property						MM	S/L		
	Section C - Asset	s Placed in Servi	ice During 200	9 Tax Ye	ar Using	the	Alternative I	Deprecia	ation	System
20a	Class life	2000]		S/L		
b	12-year	**			12 yrs			S/L		
С	40-year				40 yrs		MM	S/L		
Pa	rt IV Summary (see instr									
21	Listed property Enter amount from			· · · · ·	• • • •	• • •		• • •	21	
22	Total. Add amounts from line 12				_					
	and on the appropriate lines of yo	our return Partner	ships and S co	rporation	s - see ın	struc	tions · · ·		22	13,461
23	For assets shown above and pla-		-	-						
	portion of the basis attributable to		a ta			23				l