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· Form

Department of the Treasury Internal Revenue Service

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.

03018 04/18/2011 2 47 PM OMB No 1545-0047 2009

Open to Public Inspection

 A	For the 2009	ealendar y	ear, or tax year beginning $06/01/09$, and ending $05/31/10$)		
В	Check if applicat		C Name of organization		D Employ	yer identification number
	Address change	use IRS label or	FRATERNAL ORD OF EAGLES AERIE #592			
\Box	Name change	print or	Doing Business As		47-	0166094
\equiv	Initial return	type.	Number and street (or P O box if mail is not delivered to street address)	Room/suite	•	one number
\equiv		See Specific	107 N. DENVER			-463-3053
\equiv	Termination	Instruc-	City or town, state or country, and ZIP + 4	ŀ	G Gross recei	pts \$ 314,259
\sqcup	Amended return		HASTINGS NE 68901		11/-> 1-1/-	
Ш	Application pend	mig 1	e and address of principal officer RYL RUESCH			group return for Yes X No
			7 N. DENVER		affiliate:	affiliates 7
			STINGS NE 68901		included	attach a list. (see instructions)
	Tax-exempt :		501(c) (10) (Insert no) 4947(a)(1) or 527		11 110,	attach a hat (see manacana)
<u></u>	Website: ▶		301(0) (2 0) 4(11001(110) 1011(4)(1) 5.		H(c) Group e	exemption number
	Type of organiz	(==)	poration Trust Association Other ▶ L Ye	ear of formation 1		M State of legal domicile NE
******	art I	Summa				
	1 Bnef		ne organization's mission or most significant activities:			
Ф	TO	SUPPO	RT ORGANIZATIONS THAT ASSIST ABUSED AND NEGLECTE	D CHILDRE	N.	
auc					-	
Ē	į		₩ ₩₩₩		O!	
8			if the organization discontinued its operations or disposed of more than 25%	of its net assets	gy Olal	10
9		_	members of the governing body (Part VI, line 1a)	2 S 2011	3 4	12
ties	i		endent voting members of the governing body (Part VI, line 1b)		医 4 5	20
Activities & Governance	l .		employees (Part V, line 2a) /olunteers (estimate if necessary)	en, ut	6	
ĕ			ated business revenue from Part VIII, column (C), line 12	- Commence of the second	7a	92,952
	1	=	siness taxable income from Form 990-T, line 34		7b	-39,158
	1 11011	ann onatou ou		Prior Yea	r	Current Year
Ф	8 Cont	ributions an	d grants (Part VIII, line 1h)			
nu Bu	1 "		revenue (Part VIII, line 2g)	2:		20,166
Revenue			ne (Part VIII, column (A), lines 3, 4, and 7d)	20.	435	134 133,618
_			Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		5,347	153,618
_			add lines 8 through 11 (must equal Part VIII, column (A), line 12) ar amounts paid (Part IX, column (A), lines 1–3)	30.	5,3= /	155,516
	1		or for members (Part IX, column (A), line 4)		4,500	1,000
	1	•	ompensation, employee benefits (Part IX, column (A), lines 5–10)		1,990	88,649
enses			draising fees (Part IX, column (A), line 11e)			
ped	ł		expenses (Part IX, column (D), line 25) ▶ 29,803			
Exp		_	(Part IX, column (A), lines 11a-11d, 11f-24f)		7,666	125,142
	18 Tota	l expenses	Add lines 13–17 (must equal Part IX, column (A), line 25)		4,156	214,791
	19 Reve	enue less ex	penses Subtract line 18 from line 12		1,191	-60,873
ts or	00 T-1-	l t- (D-	- V (40)	Beginning of Cur	0,687	End of Year 262,865
Asse	20 Tota	•	rt X, line 16)		3,046	1,723
Net Assets or	21 Tota	•	art X, line 26) Individual balances Subtract line 21 from line 20		7,641	261,142
	Part II		re Block		· / <u> </u>	
	<u> </u>	Under pena	ties of periury. I declare that I have examined this return, including accompanying schedules an	d statements, and	to the best of	f my knowledge
		and belief, i	true, correct, and complete, Declaration of preparer (other than officer) is based on all inform	ation of which pre	parer has any	knowledge
Si	gn		Taly Theyanchlit			(-18-1/
He	ere	_	ure of officer		Date	
			RY NEJEZCHLEB TRUSTI	EE		
		Type o	r print name and title	<u> </u>		Preparer's identifying number
p.	aid	Preparer's	Date	Check self-		(see instructions)
	eparer's	signature	RON WILLNERD, CPA 04/18 CONTRYMAN ASSOCIATES, P.C., CPA	3/11 employ	ed 🕨 📙	P00036213
	se Only	Firm's nam	<u> </u>	EIN ▶	47-0623143	
J.		if self-emple		Phone	102_162_6711	
_	41- 150	address, ar			l no	X Yes No
Ma			eturn with the preparer shown above? (see instructions)			X Yes No

		_			ES AERIE		47-	016609	4			Page 2
Part				ervice Acc	<u>omplishme</u>	nts						
	nefly describe the											
то	SUPPORT	ORGANI	CZAŢIO	NS THAT	ASSIST	ABUSED	AND	NEGLE	CTED (CHILDRE	EN	
		•									•	•
									•		••	
2 D	old the organization	undertake a	any significal	nt program se	rvices dunna tr	ne vear which w	ere not l	isted on			 -	
	ne prior Form 990		arry digrimodi	in program oc	i vioco daring a	io your willow w	rete met i	15100 011			Yes	X No
	"Yes," describe th		vices on Sch	hedule O.	•			•	•	•		<u> </u>
	old the organization				t changes in ho	w it conducts,	any prog	ram				
S	ervices?										Yes	X No
lf	"Yes," describe th	ese change:	s on Schedu	le O.								
	escribe the exemp				-	-		-				
	ection 501(c)(3) a		_						of grants	and		
a	llocations to others	s, the total ex	kpenses, and	a revenue, if a	ny, for each pro	ogram service i	reported.					
4a (0	Code:)	(Expenses	¢	163.01	4 including	arants of \$			\ /Rev	enue \$		<u>\</u>
	SUPPORT						AND	NEGLE		cilue p		,
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4b (0	Code.)	(Expenses	\$	•	ıncluding	grants of \$) (Rev	enue \$)
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4c (0	Code _.)	(Expenses	\$.		including (grants of \$) (Rev	enue \$)
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						<u> </u>						•
4d C	Other program serv	rices. (Descr	ibe in Sched	lule O.)								
(Expenses \$			ıncluding gran				(Revenue \$)	
4e T	otal program ser	vice expens	ses 🕨	16:	3,014							
											Form \$	990 (2009)

Pa	art 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	ŀ	X
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		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		İ	
	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		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			 -
·	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	<u> </u>		
•	complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part	<u> </u>		
•	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		х
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,	- <u>`</u>		
••	VII. VIII IX or X as applicable	11	x	ŀ
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10° If "Yes," complete	<u> </u>		
•	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			
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
•	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII.	12		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		x
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		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		х
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		x
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>	† <u></u>
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		x
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	<u> </u>	X
	w	<u></u>		

_PE	The Checklist of Required Schedules (continued)	· · · · · · · · · · · · · · · · · · ·	,	
•		ļ	Yes	No
21	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	. <u>21</u>		
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			х
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			7.7
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	1		
	\$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		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
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	1		
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			ļ
	pnor year, and that the transaction has not been reported on any of the organization's pnor Forms 990 or		1	1
	990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?	ļ		ļ
	If "Yes," complete Schedule L, Part III	27	}	X
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	1	х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
-	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			
·	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			
	Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
30	conservation contributions? If "Yes," complete Schedule M	30	ļ	x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	"	1	
31	Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	, <u>, , , , , , , , , , , , , , , , , , </u>	 	
JZ	Schedule N, Part II	32	ŀ	x
33	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		x
24	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	33	<u> </u>	
34	III, IV, and V, line 1	34		x
25	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete		 	 -
35		35		x
20	Schedule R, Part V, line 2	33	+	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related	20		
. -	organization? If "Yes," complete Schedule R, Part V, line 2	36	+-	-
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			1
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			x
	Part VI	37	+	+^
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and		v	
	THE MAKE AN EARTH WHILTINGS OF CONTINED TO COMPLETE SCHOOLING (1	1 38		

Form **990** (2009)

	rt V Statements Regarding Other IRS Filings and Tax Compliance		-			<u> </u>	uge •
F	rt V Statements Regarding Other IRS Filings and Tax Compliance					Yes	No
4.	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			E		162	NO
1a		1a	0	l			
_	U.S. Information Returns. Enter -0- if not applicable	1b	ō				
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			[
С	Did the organization comply with backup withholding rules for reportable payments to vendors and report	able		f	4.	1	x
0-	gaming (gambling) winnings to prize winners?	1 .		-	1c		-
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	30	20				
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	20		21.	X	f
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			[2b	A	\vdash
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see			[
2-	Instructions)						
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered b	y		F	2-	x	f
L	this return?		••	. }	3a 3b	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	oob.		ŀ	30	A	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authors for a signature or other authors for a signature or other forces.	_		1			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	заі		l	4		x
	account)?			ŀ	4a		_
D	If "Yes," enter the name of the foreign country	.l.					l
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bar	iK					l
. .	and Financial Accounts			ŀ	E 0		х
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			F	5a 5b		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction			-	30		<u> </u>
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regards Prohibited Tax Shelter Transaction?	ng		İ	5c		
6a	• • •			·	30		
va	organization solicit any contributions that were not tax deductible?				6a		x
ь		or		• • •	- Ou		<u> </u>
	gifts were not tax deductible?	٠.			6b		
7	Organizations that may receive deductible contributions under section 170(c).	•		I			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goo	ds					l
•	and services provided to the payor?			Ì	7a		[
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			ļ	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			Ī			
•	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 pers	onal					l
	benefit contract?			[7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	?	_	[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-C as	5					ŀ
	required? .			Į	7h		<u> </u>
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			į			I
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring						ŧ
	organization, have excess business holdings at any time during the year?			. ,	8		ļ
9	Sponsoring organizations maintaining donor advised funds.						ŧ
а	Did the organization make any taxable distributions under section 4966?				9a		Ь—
b	Did the organization make a distribution to a donor, donor advisor, or related person?			Į	9b	ļ <u>.</u>	<u> </u>
10	Section 501(c)(7) organizations. Enter	1	ı	Į			İ
а	Initiation fees and capital contributions included on Part VIII, line 12	10a					Ī
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<u>10</u> b	l				ŧ
11	Section 501(c)(12) organizations. Enter.	1	ı				1
а	Gross income from members or shareholders	11a		{			I
b	Gross income from other sources (Do not net amounts due or paid to other sources against		ŀ				1
	amounts due or received from them)	11b	L				1
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10		ı	1	12a	 	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				<u> </u>	ŧŧ

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

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

<u>Sec</u>	tion A. Governing Body and Management						
	Etallia de la companya della companya della companya de la companya de la companya della company	_ 1	12	F		Yes	No
1a		a L	12 12				
b		b					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with						v
_	any other officer, director, trustee, or key employee?		•	· }	2		<u> </u>
3	Did the organization delegate control over management duties customarily performed by or under the direct						v
_	supervision of officers, directors or trustees, or key employees to a management company or other person?		•	}	3		$\frac{\mathbf{x}}{\mathbf{x}}$
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?			1	4		$\frac{\mathbf{x}}{\mathbf{x}}$
5	Did the organization become aware during the year of a material diversion of the organization's assets?		•	·	5		$\frac{\mathbf{x}}{\mathbf{x}}$
6	Does the organization have members or stockholders?				6		<u> </u>
7a	Does the organization have members, stockholders, or other persons who may elect one or more members				_		v
	of the governing body?			F	7a		$\frac{\mathbf{x}}{\mathbf{x}}$
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			ŀ		.	
а	The governing body?				8a	X	
b	Each committee with authority to act on behalf of the governing body?				8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached				_		77
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	1		L	9		<u> </u>
	tion B. Policies (This Section B requests information about policies not required by the Inter-	ואי					
<u>Rev</u>	enue Code.)						
				ſ		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?			-	10a		<u> </u>
b	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?			ŀ	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the					٠,	
	form?			-	11	X	
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990						37
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13				12a		<u> </u>
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give						
	nse to conflicts?				12b		
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"						
	describe in Schedule O how this is done			}	12c		37
13	Does the organization have a written whistleblower policy?			}	13_		X
14	Does the organization have a written document retention and destruction policy?			ŀ	14		<u> </u>
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?			ŀ		7.7	
а	The organization's CEO, Executive Director, or top management official			.	15a	X	
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)			ŀ			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			ŀ			77
	with a taxable entity during the year?				16a		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			ŀ			
	the organization's exempt status with respect to such arrangements?			i	16b		
Sec	tion 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)						
	available for public inspection. Indicate how you make these available. Check all that apply						
	Own website Another's website X 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 ▶ DARYL RUESCH 107 N. DENVER			400			^F^
H	ASTINGS NE 68901			402			
DAA					For	n 990	(2009)

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 (A)	(B)		(C) Position (check all that apply)					(D)	(E) Reportable	(F) Estimated
Name and Title	Average hours per week	8 Individual trustee or director		Officer			Ey Former	Reportable compensation from the organization (W-2/1099-MISC)	reportable compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
GARY NEJEZCHLEB										_
TRUSTEE	5.00	X						225	0	0
BILL (PETE) PETER		1								_
TRUSTEE	5.00	X				Ш		225	0	0
CALVIN WALLIN		l								
TRUSTEE	5.00	X				\sqcup		225	0	0
VIRGINIA CATHCART										
MANAGER	30.00			X	<u> </u>	\vdash		25,649	0	0
DARYL RUESCH		1		l				1		
SECRETARY	5.00	↓	<u> </u>	X	_	\vdash		3,750	0	0
RICHARD LYON								210		•
TREASURER	5.00	ļ	_	X	├	\vdash		210	0	0
BOB SONGSTER					ŀ	li				•
PRESIDENT	5.00	!	_	Х	<u> </u>			0	0	0
BILL PRIMROSE	0.00								0	0
PAST PRES	2.00	╁	-	X	ļ	 	_	0	<u> </u>	0
CARL REZABEK				3,5				o	0	•
CHAPLAIN	2.00	+	⊢	X		╂	_	U	<u> </u>	0
JOHN MARKLAND	2.00	1		x		1 1		o	o	0
CONDUCTOR CHUCK BURNHAM	2.00	+	├	^	╢	+		- 0		
INSIDE GUARD	2.00	1	ļ	x				o	0	o
BOB CLARK	2.00	+	-	^	-	+				0
OUTSIDE GD	2.00	1	ŀ	x				l ol	0	o
OOISIDE GD	2.00	1								
		+-				H				
		+	\vdash			$\left \cdot \right $				
		+	_	_	-					
		_	_	<u> </u>		\perp				

_	irt V	III Statement of Reve				<u></u>	47 0100034		Fage 3
10		m Statement of Neve				(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 ts	1a	Federated campaigns	1a						· · · · · · · · · · · · · · · · · · ·
Contributions, gifts, grants and other similar amounts	b	Membership dues	1b			<u> </u>			
g,E	С	Fundraising events	1c						
yift ar a	d	Related organizations	1d						
S.E	е	Government grants (contributions)	1e						
tion	f	All other contributions, gifts, grants,				#			
ğ		and similar amounts not included above	1f			I I			
gr	g	Noncash contributions included in lines 1a-	1f	\$		İ			
ة ن ت	h	Total. Add lines 1a-1f	·_		. ▶				
e					Busn. Code				
ven	2a	DUES INCOME - BENEFI	TT .		900099	19,365	19,365		
æ	b	DUES INCOME - GENERA	AL .		900099	801	801		
vice.	С								
Ser	d								
Ë	e								
Program Service Revenue	f	All other program service rever	nue						
<u>a</u>	g	Total. Add lines 2a-2f			<u> </u>	20,166	1		
	3	Investment income (including d	lividen	ds, interes	t, and				
		other sımılar amounts)			▶ _	134			134
	4	Income from investment of tax-	exemp	t bond pro	ceeds 🕨 📙				
	5	Royaltres			<u> </u>				·····
		(ı) Real		(II) F	Personal	i i			
	6a					Ī			
	b	Less rental exps							
	C	Rental inc or (loss)				!		1	
	d 7a	Net rental income or (loss) Gross amount from (i) Securities		1 (Other	<u> </u>		_	
		sales of assets (1) Securities	>	(11)	Other	1		1	
	<u> </u>	other than inventory		1		1	1		
	"	Less cost or other basis & sales exps				I		1	
	_	Gain or (loss)		 		1			
	l	Net gain or (loss)		I.	•	Ī	ĺ	†	
	1	Gross income from fundraising ever	nts						
J.		(not including \$	-			Ī		1	
<u>8</u>		of contributions reported on line 1c)				I		1	
ž		See Part IV, line 18	а			Į.			
Other Revenue	b	Less direct expenses	b			İ		I	
0	c	Net income or (loss) from fundi	raising	events	•				
	9a	Gross income from gaming activities	s						
		See Part IV, line 19	а			İ			
	ь	Less: direct expenses	b						·
	С .	Net income or (loss) from gami	ing act	vities	•				
	10a	Gross sales of inventory, less				1			
		returns and allowances	а		253,293	1			
		Less cost of goods sold	b		160,341				
	င	Net income or (loss) from sales		entory	D	92,952		92,952	
	<u> </u>	Miscellaneous Revenue	•		Busn. Code	40	10 570		
	11a				900099	19,572	19,572		
	b	HALL RENT			900099	12,248	12,248		
	C	LOTTERY INCOME			900099	6,855	6,855		
	1	All other revenue			900099	1,991 40,666	1,991		***************************************
			20		₹ -	153,918	60,832	92,952	134
_	12	Total Revenue. See instruction	IIS			133,318	60,632	92,932	5 990 (2000)

Form 990 (2009) 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).

	All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).								
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses				
1	Grants and other assistance to governments and		UNDOTICOS	gonordi expensos					
•	organizations in the U.S. See Part IV, line 21			Ī					
2	Grants and other assistance to individuals in		···						
2	the U.S See Part IV, line 22								
2	· • • • • • • • • • • • • • • • • • • •				······································				
3	Grants and other assistance to governments,								
	organizations, and individuals outside the								
	U.S. See Part IV, lines 15 and 16	1,000	1,000						
4	Benefits paid to or for members	1,000	1,000						
5	Compensation of current officers, directors,	6 275		6 275					
_	trustees, and key employees	6,375		6,375					
6	Compensation not included above, to disqualified								
	persons (as defined under section 4958(f)(1)) and								
	persons described in section 4958(c)(3)(B)		65 554		0.605				
7	Other salaries and wages	75,359	65,754		9,605				
8	Pension plan contributions (include section 401(k)								
	and section 403(b) employer contributions)								
9	Other employee benefits .								
10	Payroll taxes .	6,915	6,915						
11	Fees for services (non-employees)								
а	Management .								
b	Legal								
С	Accounting	11,812		11,812					
d	Lobbying								
е	Professional fundraising services See Part IV, line 17								
f	Investment management fees								
g	Other								
12	Advertising and promotion								
13	Office expenses								
14	Information technology								
15	Royalties								
16	Occupancy	46,003	46,003						
17	Travel								
18	Payments of travel or entertainment expenses				_				
	for any federal, state, or local public officials								
19	Conferences, conventions, and meetings	3,380	3,380		· · · · · · · · · · · · · · · · · · ·				
20	Interest		*						
21	Payments to affiliates								
22	Depreciation, depletion, and amortization	6,707	6,707						
23	Insurance								
	,								
24	Other expenses Itemize expenses not	1		‡					
	covered above (Expenses grouped together	#	1	‡					
	and labeled miscellaneous may not exceed		l	1					
	5% of total expenses shown on line 25 below)	#		1					
а	TAXES/LICENSES/PERMITS	8,653			8,653				
b	PAYMENTS TO NATIONAL	5,848	5,848						
C	CONTRIBUTIONS/DONATIONS	5,477	5,477						
ď	STATE POOL TOURNAMENT	4,030	5,3,7,		4,030				
	SUPPLIES	3,833			3,833				
e		29,399	21,930	3,787	3,682				
f 25	All other expenses	214,791	163,014	21,974	29,803				
25	Total functional expenses. Add lines 1 through 24f	214,131	103,014	21,314	29,603				
26	Joint costs. Check here ► If following SOP 98-2 Complete this line only if the		}						
	organization reported in column (B) joint costs		1						
	from a combined educational campaign and								
DAA	fundraising solicitation				Form 990 (2009)				

Form 990 (2009) FRATERNAL ORD OF EAGLES'AERIE #592 47-0166094

Page 11

P	art X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing			8,418	1	3,240
	2	Savings and temporary cash investments		L	231,935	2	142,743
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	
	5	Receivables from current and former officers, directors, tro	ustees, key	·			
		employees, and highest compensated employees. Comple	ete Part II of				
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined un	nder section				
		4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete				
		Part II of Schedule L				6	
Assets	7	Notes and loans receivable, net		· [7	
SS	8	Inventories for sale or use		. [66,184	8	65,083
Ä	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment. cost or					
		other basis Complete Part VI of Schedule D	10a	291,597			
	Ь	Less accumulated depreciation	10b	246,014	43,351	10c	45,583
	11	Investments—publicly traded securities			799	11	6,216
	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			<u>.</u>	15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)		ŀ	350,687	16	262,865
_	17	Accounts payable and accrued expenses			3,041	17	1,723
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities	•			20	
S	21	Escrow or custodial account liability Complete Part IV of S	Schedule D	-		21	
Liabilities	22	Payables to current and former officers, directors, trustees		<u> </u>			
≣		employees, highest compensated employees, and disqual	-				
<u>ia</u>		persons Complete Part II of Schedule L		ţ		22	
_	23	Secured mortgages and notes payable to unrelated third p	arties	F	5	23	
	24	Unsecured notes and loans payable to unrelated third part		F		24	
	25	Other liabilities Complete Part X of Schedule D		F		25	
	26	Total liabilities. Add lines 17 through 25		.	3,046		1,723
S		Organizations that follow SFAS 117, check here ▶	and		- /		
Balances		complete lines 27 through 29, and lines 33 and 34.	_				
an	27	Unrestricted net assets		İ		27	
Ba	28	Temporanly restricted net assets		F		28	· · · · · · · · · · · · · · · · · · ·
ᅙ	29	Permanently restricted net assets		F		29	
Fund		Organizations that do not follow SFAS 117, check here	e 🕨 🗓	ŀ			
Ī		and complete lines 30 through 34.	ت ۰	Į.			
0	30	Capital stock or trust principal, or current funds	Ì		30		
ět	31	Paid-in or capital surplus, or land, building, or equipment fi	und	ľ		31	
188	32	Retained earnings, endowment, accumulated income, or of		T	347,641	32	261,142
Net Assets or	33	Total net assets or fund balances		··· }	347,641	33	261,142
Ž	34	Total liabilities and net assets/fund balances		ř	350,687		262,865

Form **990** (2009)

orm	n 990 (2009) FRATERNAL ORD OF EAGLES AERIE #592 47-0166094		Pag	ge 12
Pa	art XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other	_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in	_		
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b		X
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		
		Form	990	(2009)

SCHEDULE 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.

OMB No 1545-0047

2009

Open to Public Inspection

Name	of the organization	Employer identification number				
FI	RATERNAL ORD OF EAGLES AERIE #592		47-0166094			
Pa	rt I Organizations Maintaining Donor Advised Fun the organization answered "Yes" to Form 990, P	ds or Other Similar Funds or According to the second secon	counts. Complete if			
	,	(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 (dunng year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in writing that the	ne assets held in donor advised				
	funds are the organization's property, subject to the organization's exclusi		Yes No			
6	Did the organization inform all grantees, donors, and donor advisors in wr	nting that grant funds can be				
	used only for charitable purposes and not for the benefit of the donor or d	onor advisor, or for any other				
	purpose conferring impermissible private benefit?		Yes No			
Pa	rt II Conservation Easements. Complete if the orga	nization answered "Yes" to Form !	990, Part IV, line 7.			
1	Purpose(s) of conservation easements held by the organization (check al	l that apply).				
	Preservation of land for public use (e.g., recreation or pleasure)	Preservation of an historically impor	tant land area			
	Protection of natural habitat	Preservation of certified historic stru	ucture			
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qualified conserva	ition contribution in the form of a conservation	on			
	easement on the last day of the tax year.					
			Held at the End of the Tax Year			
а	Total number of conservation easements .					
b	Total acreage restricted by conservation easements		2b			
C	Number of conservation easements on a certified historic structure include	ed 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, extin	guished, or terminated by the organization d	lunng			
	the taxable year ▶					
4	Number of states where property subject to conservation easement is loc					
5	Does the organization have a written policy regarding the periodic monito	ring, inspection, handling of	п п			
	violations, and enforcement of the conservation easements it holds?		∐ Yes ∐ No			
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing	g conservation easements during the year				
	-					
7	Amount of expenses incurred in monitoring, inspecting, and enforcing cor	nservation easements during the year				
_						
8	Does each conservation easement reported on line 2(d) above satisfy the	e requirements of section	Yes No			
_	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?					
9	In Part XIV, describe how the organization reports conservation easemer balance sheet, and include, if applicable, the text of the footnote to the organization.					
	the organization's accounting for conservation easements	ganization's infancial statements that descrit	Jes .			
P:	art III Organizations Maintaining Collections of Art,	Historical Treasures, or Other Si	milar 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		orks of			
-	art, historical treasures, or other similar assets held for public exhibition, of					
	provide, in Part XIV, the text of the footnote to its financial statements tha		•			
b	If the organization elected, as permitted under SFAS 116, to report in its		of art,			
_	historical treasures, or other similar assets held for public exhibition, educ					
	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 of	ther similar assets for financial dain, provide	the			
~	following amounts required to be reported under SFAS 116 relating to the					
а	Revenues included in Form 990, Part VIII, line 1		▶ \$			
a b			s			
J	AGGGG MGGGG MT GITH GGG, FAICA		· ·			

Part II Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)	Sche	dule D (Form 990) 2009 FRATERNAL						66094			Page 2
collection ferms (check all that apply) Powlet a destination d Chan or exchange programs	Pa	ort III Organizations Maintaining (Collections	of Art, Hi	storical Tr	easures,	or Other S	<u>Similar Ass</u>	ets (conti	nued)	
b	3		and other reco	ords, check a	ny of the follow	ving that are	a significant i	use of its			
b	а	Public exhibition	ď	Loan or	exchange prod	orams					
to Preservation for Nuture generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XV. 5 During the year, did the organization solicit or receive donations of art, Nistorical treasures, or other similar assets to be solid to raise funds rather than to be maintained as part of the organization's collection?		$ \exists $	-	_		3					
A Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Parx XV. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" to Form 990, Part IV. If the Secrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV. If June 9, or reported an amount on Form 990, Part X, line 21. Is is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Is is the organization and the second of the organization and the following table to the second of the organization and the following table to the second of the organization and the second of the organization and the second of the organization answered "Yes" to Form 990, Part IV, line 10. If Ending balance In the organization include an amount on Form 990, Part X, line 21? In the organization include an amount on Form 990, Part X, line 21? In the organization include an amount on Form 990, Part X, line 21? In the organization include an amount on Form 990, Part X, line 21? In the organization include an amount on Form 990, Part X, line 10. In the organization include an amount on Form 990, Part X, line 10. In the organization include an amount on Form 990, Part X, line 10. In the organization include an amount on Form 990, Part X, line 10. In the organization include an amount on Form 990, Part X, line 10. In the organization include an amount on Form 990, Part X, line 10. In the organization include an amount on Form 990, Part X, line 10. In the organization include an amount on Form 990, Part X, line 10. In the organization include an amount on Form 990, Part X, line 10. In the organization include an amount on Form 990, Part X, line 10. In the organization include an amount on Form 990, Part X, line 10. In the or									_		
During the year, did the organization solicit or receive donations of art, historical treasures, or other similar sizests to be sold to raise funds rather than to be maintained as part of the organization as collection? Part IV Scrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part X, line 21. Iv, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Ives No If "Yes," explain the arrangement in Part XIV and complete the following table Amount Ite Amount Ite Amount Ite Amount Ite Amount Ite It	4	Provide a description of the organization's collect	ctions and exp	lain how they	further the org	ganization's e	xempt purpo	se in			
Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? It is the organization and segret, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? It is if Yes, explain the arrangement in Part XIV and complete the following table It is important or included on Form 990, Part XIV and complete the following table It is important or include an amount on Form 990, Part X, line 21? It is important or include an amount on Form 990, Part X, line 21? It is important or include an amount on Form 990, Part X, line 21? It is important or include an amount on Form 990, Part X, line 21? It is important or include an amount on Form 990, Part X, line 21? It is important or include an amount on Form 990, Part X, line 21? It is important or include an amount on Form 990, Part X, line 21? It is important or include an amount on Form 990, Part X, line 10. It is important or include an amount on Form 990, Part IV, line 10. It is important or include an amount on Form 990, Part IV, line 10. It is important or include an amount on Form 990, Part IV, line 10. It is important or include an amount on Form 990, Part IV, line 10. It is important or include an amount on Form 990, Part IV, line 10. It is important or include an amount on Form 990, Part IV, line 10. It is important or include an amount on Form 990, Part X, line 10. It is important or include an amount on Form 990, Part X, line 10. It is important or include an amount on Form 990, Part X, line 10. It is important or include an amount on Form 990, Part X, line 10. It is important or include an amount on Form 990, Part X, line 10. It is important or include an amount on Form 990, Part X, line 10. It is important or include an amoun	5	During the year, did the organization solicit or re					nılar			v [٦ ٧.
IV, line 9, or reported an amount on Form 990, Part X, line 21: Is the organization an agent, fursitee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X; No	D:						newered "	Ves" to For			NO
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1a Land b Buildings 261,015 217,760 43,255 c Leasehold improvements d Equipment 30,582 28,254 2,328 e Other		Description of investment	(a) Cost or	other basis	(b) Cost	or other	(c) Acc	cumulated	(d) Bo	ok value	
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d Equipment 30,582 28,254 2,328 e Other	c	- · ·									
e Other	d					30,582	1	28,254		2.	328
			al Form 990. F	Part X, column	n (B), line 10(c	:))	•		1	45.	583

Schedule D (Form 990) 2009

Schedule D (Form 990) 2009 FRATERNAL ORD OF EAGL		47-0166094	Page 3
Part VII Investments—Other Securities. See Form 99			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of Cost or end-of-year	
Financial derivatives		<u></u>	
Closely-held equity interests			
Other			
	•	 	
	•		
	•		
	•	 	
	·	 	
	-		
T. (A.1 (A.1			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		<u> </u>	
Part VIII Investments—Program Related. See Form 99			·
(a) Description of investment type	(b) Book value	(c) Method of v Cost or end-of-year	
			
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, line 15.			
(a) Description			(b) Book value
			=
			
.			
		-	
	•	+	
 · · · · · · · · · · · · · · · · · ·			
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)		•	
Part X Other Liabilities. See Form 990, Part X, line 2	?5.		-· · · ·
1 (a) Description of liability	(b) Amount		
Federal income taxes	/als month	ł L	
. 525.6. moonio maoo	+	1	
		1	
	+	1	
	+	1	
	+	1	
	+	1	
	-	{	
	- 	.	
	-	{	
		{	
		!	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)			
2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organ	ization's financial statements	that reports the	
organization's liability for uncertain tax positions under FIN 48			

	dule D (Form 990) 2009 FRATERNAL ORD OF EAGLES AERIE				Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to	Audit	ed Financial Statem	ents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			$\perp 1$	
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			10	
Pa	rt XII Reconciliation of Revenue per Audited Financial Statemer	nts W	ith Revenue per Ret	urn	
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	, , , , , , , , , , , , , , , , , , , ,	J	
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		1 1	
c	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 Stateme	ents V	Vith Expenses per R	leturr	1
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				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b]	
C	Other losses	2c]]	
d	Other (Describe in Part XIV)	2d		1	
e	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1		•	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1			-
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
	Other (Describe in Part XIV.)	4b		1	
	Add lines 4a and 4b			4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	•		5	
	rt XIV Supplemental Information				
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines	1a and	d 4; Part IV, lines 1b		
	b, Part V, line 4, Part X, line 2, Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines				
	art to provide any additional information		·		
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SCHEDULE O (Form 990)

Supplemental Information to Form 990

onses to specific questions on

2009
Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

FRATERNAL ORD OF EAGLES AERIE #592 Employer identification number 47-0166094

FORM 990, PART VI, LINE 11A - ORGANIZATION'S PROCESS TO REVIEW FORM 990

A COPY OF THE RETURN WAS PROVIDED TO THE TRUSTEES FOR THEIR REVIEW BEFORE
FILING.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

THE COMPENSATION FOR THE MANAGER IS REVIEWED AND VOTED UPON BY THE BOARD OF

DIRECTORS AND THE TRUSTEES ANNUALLY.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION GOVERNING DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST.

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Forms	Mor	tgages and Otl	ner Notes Pay	vable		
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FORM 990, PAR	T X, LINE 23 -	ADDITIONAL	INFORMATI	ON		
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Totals