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Form **990-EZ**

Short Form

Return of Organization Exempt From Income Tax

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

OMB No 1545-1150

2009Department of the Treasury
Internal Revenue Service

▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.

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

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning 6/01, 2009, and ending 5/31, 2010

B Check if applicable:
☐ Address change
☐ Name change
☐ Initial return
☐ Termination
☐ Amended return
☐ Application pending

C Please use IRS label or print or type. See Specific Instructions.
MOUNT OREAD AERIE NO 309 FRATERNAL
ORDER OF EAGLES OF LAWRENCE, KS, INC.
1803 WEST 6TH STREET
LAWRENCE, KS 66044

D Employer identification number 48-0514053

E Telephone number (785) 843-9690

F Group Exemption Number 0102

G Accounting method: ☐ Cash ☒ Accrual
 Other (specify) ▶

H Check ☒ if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

I Website: ▶ N/A

J Tax-exempt status (check only one) — ☒ 501(c) (7) (insert no) ☐ 4947(a)(1) or ☐ 527

K Check ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally **not** more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ 246,849.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

1	Contributions, gifts, grants, and similar amounts received	1	72,443.
2	Program service revenue including government fees and contracts	2	51,155.
3	Membership dues and assessments	3	12,703.
4	Investment income	4	
5a	Gross amount from sale of assets other than inventory.	5a	
5b	Less: cost or other basis and sales expenses	5b	
5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here <input type="checkbox"/>		
6a	Gross revenue including \$ of contributions reported on line 1	6a	
6b	Less: direct expenses other than fundraising expenses	6b	
6c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	
7a	Gross sales of inventory, less returns and allowances	7a	110,548.
7b	Less: cost of goods sold	7b	96,739.
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	13,809.
8	Other revenue (describe ▶)	8	
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	150,110.
10	Grants and similar amounts paid (attach schedule)	10	See Statement 1... 3,240.
11	Benefits paid to or for members	11	1,500.
12	Salaries, other compensation, and employee benefits	12	2,469.
13	Professional fees and other payments to independent contractors	13	275.
14	Occupancy, rent, utilities, and maintenance	14	17,957.
15	Printing, publications, postage, and shipping	15	256.
16	Other expenses (describe ▶ See Statement 2)	16	83,565.
17	Total expenses. Add lines 10 through 16	17	109,262.
18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	40,848.
19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	19,728.
20	Other changes in net assets or fund balances (attach explanation)	20	
21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	60,576.

Part II Balance Sheets. If total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ. (See the instructions for Part II.)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	5,241.	23,947.
23 Land and buildings	162,262.	125,934.
24 Other assets (describe ▶ See Statement 3)	23,424.	21,555.
25 Total assets	190,927.	171,436.
26 Total liabilities (describe ▶ See Statement 4)	171,199.	110,860.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	19,728.	60,576.

BAA For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

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Form 990-EZ (2009)

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Part III Statement of Program Service Accomplishments (See the instructions.)

Expenses

What is the organization's primary exempt purpose? See Statement 5

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title

(Required for section 501(c)(3) and (4) organizations and section 4947(a)(1) trusts; optional for others.)

28 SOCIAL ACTIVITIES CONNECTED WITH FRATERNAL ORGANIZATION

(Grants \$) If this amount includes foreign grants, check here

28a 97,231.

29

(Grants \$) If this amount includes foreign grants, check here

29a

30

(Grants \$) If this amount includes foreign grants, check here

30 a

31 Other program services (attach schedule).

(Grants \$) If this amount includes foreign grants, check here

31 a

32 **Total program service expenses** (add lines 28a through 31a)

32	97,231.
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Part IV **List of Officers, Directors, Trustees, and Key Employees.** List each one even if not compensated (See the instrs)

[illegible]

Part V Other Information (Note the statement requirements in the instrs for Part V.)

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity		X
34 Were any changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the changes		X
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T		
a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?		
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N		X
37a Enter amount of political expenditures, direct or indirect, as described in the instructions 37a 0		
b Did the organization file Form 1120-POL for this year?		X
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?		X
b If 'Yes,' complete Schedule L, Part II and enter the total amount involved 38b N/A		
39 Section 501(c)(7) organizations. Enter.		
a Initiation fees and capital contributions included on line 9.		
b Gross receipts, included on line 9, for public use of club facilities		
39a 0		
39b 0		
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 N/A , section 4912 N/A ; section 4955 N/A		
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I 40b		
c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 0		
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization 0		
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T 40e		X
41 List the states with which a copy of this return is filed None		

42a The organization's books are in care of **FINANCE COMMITTEE** Telephone no. **(785) 843-9690**
 Located at **1803 WEST 6TH LAWRENCE KS** ZIP + 4 **66044**

b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? **42b** X
 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 a Foreign Bank and Financial Accounts.

c At any time during the calendar year, did the organization maintain an office outside of the U.S.? **42c** X
 If 'Yes,' enter the name of the foreign country

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041** — Check here ☐ N/A
 and enter the amount of tax-exempt interest received or accrued during the tax year **43** N/A

	Yes	No
44 Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ		X
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' Form 990 must be completed instead of Form 990-EZ		X

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

	Yes	No
46 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	46	
47 Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	47	
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	48	
49a Did the organization make any transfers to an exempt non-charitable related organization?	49a	
b If 'Yes,' was the related organization a section 527 organization?	49b	

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances

f Total number of other employees paid over \$100,000 ... **▶** _____

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation

d Total number of other independent contractors each receiving over \$100,000. **▶** _____

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.			
	<input checked="" type="checkbox"/> Signature of officer <i>LeRoy Bateson</i>	<input checked="" type="checkbox"/> Date 7-17-2010		
	Type or print name and title LEROY BATESON		Treasurer	
Paid Preparer's Use Only	Preparer's signature John B. Bateson, CPA	Date	Check if self-employed <input type="checkbox"/>	Preparer's Identifying Number (See instructions) P00130755
	Firm's name (or yours if self-employed), address, and ZIP + 4 Bateson & Wiederholt, PC 1828 Swift, Suite 310 N Kansas City, MO 64116	EIN 74-2863462	Phone no (816) 842-1177	
	May the IRS discuss this return with the preparer shown above? See instructions <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

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Form 990-EZ (2009)

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Federal Statements

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Client F010

MOUNT OREAD AERIE NO 309 FRATERNAL
ORDER OF EAGLES OF LAWRENCE, KS, INC.

48-0514053

7/15/10

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Statement 1
Form 990-EZ, Part I, Line 10
Grants and Similar Amounts PaidPayments to Affiliates

Name:	GRAND AERIE FEES	
Address:	1623 GATEWAY CIRCLE SOUTH	
	GROVE CITY, OH 43213	
Purpose of payment:	PER CAPITA TAX	
Amount:		\$ 2,682.
 Name:	 STATE AERIE FEES	
Address:	1201 OLIVE	
	LEAVENWORTH, KS 66048	
Purpose of payment:	PER CAPITA TAX	
Amount:		\$ 558.
 Payments to Affiliates		\$ 3,240.

Statement 2
Form 990-EZ, Part I, Line 16
Other Expenses

BANK FEES	\$ 522.
CABLE TV	1,978.
CLEANING & OPERATING SUPPLIES	703.
Conferences, Conventions, and Meetings	75.
CONTRACT LABOR	3,177.
Depreciation	36,328.
Insurance	9,734.
Interest	12,295.
KANSAS ANNUAL REPORT	40.
MISCELLANEOUS	-1,795.
Office Expenses	739.
OTHER EXPENSES	354.
REAL & PERSONAL PROP TAX	14,923.
REPAIRS & MAINTENANCE	3,859.
SECURITY	633.
Total	\$ 83,565.

Statement 3
Form 990-EZ, Part II, Line 24
Other Assets

	<u>Beginning</u>	<u>Ending</u>
PREPAID INSURANCE	\$ 5,197.	\$ 5,341.
TAX ESCROW	4,436.	2,423.
INVENTORY	13,791.	13,791.
Total	\$ 23,424.	\$ 21,555.

2009

Federal Statements

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Client F010

MOUNT OREAD AERIE NO 309 FRATERNAL
ORDER OF EAGLES OF LAWRENCE, KS, INC.

48-0514053

7/15/10

01:01PM

Statement 4
Form 990-EZ, Part II, Line 26
Total Liabilities

	<u>Beginning</u>	<u>Ending</u>
ACCOUNTS PAYABLE	\$ 468.	\$ 0.
LOAN TERM DEBT	164,355.	103,565.
ACCRUED REAL ESTATE TAX	5,218.	5,862.
ACCRUED INTEREST	399.	272.
PAYROLL TAXES PAYABLE	71.	543.
SALES & LIQUOR TAX PAYABLE	688.	618.
Total	<u>\$ 171,199.</u>	<u>\$ 110,860.</u>

Statement 5
Form 990-EZ, Part III
Organization's Primary Exempt Purpose

SOCIAL ACTIVITIES CONNECTED WITH FRATERNAL ORGANIZATION