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SCANNED NOV 14 2011

Form **990**

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung

OMB No 1545-0047

2010

Open to Public Inspection

benefit trust or private foundation) Department of the Treasury Internal Revenue Service

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

<u>A</u>	For the	2010 calendar year, or tax year beginningJanuary 1, 2010, and endi	_	· · · · · · · · · · · · · · · · · · ·	, 20 10
В	Check if	applicable C Name of organization Fraternal Order of Eagles, Aerie 2817		Employ	er identification number
	Address				93-0404799
	Name ch	ange Number and street (or P.O box if mail is not delivered to street address) Room/s	uite E	Telepho	one number
	Initial retu				541-265-2430
	Terminate	City or town, state or country, and ZIP + 4			
	Amended			Gross r	eceipts \$ 280,676.99
	Applicate	on pending F Name and address of principal officer Patrick W. Ruddiman	H(a) Is this a	group return	for affiliates? Yes V No
		106 East Olive Street, Newport, Oregon 97365	H(b) Are all	affiliates ir	ncluded?
	Tax-exer	npt status	If "No,	" attach a	list. (see instructions)
J	Website	x >	H(c) Group	exemption	n number 🕨
K	Form of o	rganization ☐ Corporation ☐ Trust ☐ Association ☑ Other ▶ Fraternal L Year of form	nation:	M State	of legal domicile.
Р	art I	Summary			
	1	Briefly describe the organization's mission or most significant activities:			
n					
Ē					
Ē					
Activities & Governance	2	Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25°	% of its net assets.		
Ğ	3	Number of voting members of the governing body (Part VI, line 1a)		3	171
Se Se	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	0
¥	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)		5	9
Ç	6	Total number of volunteers (estimate if necessary)		6	50
•	7a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	
	b	Net unrelated business taxable income from Form 990-T, line 34		7b	0.00
		_ NEUEIVED	Prior Yea	r	Current Year
Revenue	8	Contributions and grants (Part VIII) Ine 1h)			10,201.72
	9	Program service revenue (Part VIII, line 2g) [] . 1 .4 .2 [1]			
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)			764.58
Œ	11	Other revenue (Part VIII, column (A), lines 5, 60, 8ç, 9c, 10c, and 11e)			105,517.71
	12	Total revenue—add lines 8 through 11 (houst equal Part VIII, column (A), line 12)	75	,390.60	116,484.01
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)			
	14	Benjefits paid to or for members (Part IX, column (A), line 4)			
ø	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	53	,950.79	52,093.79
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)			
8	b	Total fundraising expenses (Part IX, column (D), line 25) ▶			
ij	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)			
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) .	34	,271.67	28,932.12
	19	Revenue less expenses. Subtract line 18 from line 12	(12,	831.86)	35,458.10
Net Assets or Fund Balances			Beginning of Curr	ent Year	End of Year
Sets	20	Total assets (Part X, line 16)	1,062	,407.48	1,087,403.10
A P	21	Total liabilities (Part X, line 26)	33	,927.00	23,464.52
		Net assets or fund balances. Subtract line 21 from line 20	1,028	,480.48	1,063,938.58
P	art II	Signature Block			
		ties of perjury, I declare that I have examined this return, including accompanying schedules and stat			ny knowledge and belief, it is
tru	e, correct	, and cortiflete. Declaration of preparer (other than officer) is based on all information of which prepar	er has any knowled	ige	4
		Taw Wood		0/11/	11
Sig	_	Signature of officer	Date		
He	re	Patrick Ruddiman Secretary			
		Type or print name and title			
Pa	id	Print/Type preparer's name Preparer's signature [Date	Check	prin PTIN
	epare	r		self-emp	
	se Onl		Firm's	EIN >	
_		Firm's address ▶	Phone	e no	
Ма	y the IF	S discuss this return with the preparer shown above? (see instructions)		<u></u>	Yes No
For	Paperv	ork Reduction Act Notice, see the separate instructions.	No 11282Y		Form 990 (2010)

) (Revenue \$

Other program services. (Describe in Schedule O.)

Total program service expenses ▶

including grants of \$

(Expenses \$

Form 99			F	Page (
Part	V Checklist of Required Schedules			г :
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A		Yes	No
_		1		V
2 3	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions) 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		√
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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			1
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		V
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	√	352.500
b	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	11b		1
	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	11c		1
	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	11d		1
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11e		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		1
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
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, Parts I and IV	14b		1
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, Parts II and IV.	15		✓
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, Parts III and IV	16		1
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 (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		1
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 Did the organization energies and are more beautistics? If "Yes," according to Schedule II.	19		1
20 a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		✓
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		/

Part	V 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		1
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		√
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		✓
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		1
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		1
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction 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 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	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		√
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? If "Yes," complete Schedule L, Part III	27		1
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		✓
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		√
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		✓
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		√
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		√
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		· ·
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1			,
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	34		1
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	_ 		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	30		
38	Part VI	37		✓
	19? Note. All Form 990 filers are required to complete Schedule O	38		
		For	n 990	(2010)

Form **990** (2010)

	0 (2010)			Page .
Part	V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0	1		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	1		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and	1		
•	reportable gaming (gambling) winnings to prize winners?		·	,
_		1c	 	/
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1		1
	Statements, filed for the calendar year ending with or within the year covered by this return 2a	<u>l</u>		Ĺ
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	1	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
3a		- 20	}	,
_		3a		V
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	L	1
4a	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)?	4a	1	✓
b	If "Yes," enter the name of the foreign country: ▶			
_	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
_	· · · · · · · · · · · · · · · · · · ·	l _		,-
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	<u> </u>	✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	L	✓
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	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	1	1
.	If "Yes," did the organization include with every solicitation an express statement that such contributions or	- Ua		-
b		l	1	
	gifts were not tax deductible?	6b		1
7	Organizations that may receive deductible contributions under section 170(c).	ļ		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		ļ	
	and services provided to the payor?	7a	1	1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		1
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			-
C		١_	}	
		7c	ļ	✓
d	If "Yes," indicate the number of Forms 8282 filed during the year		1	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		1
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		1
_		///	<u> </u>	-
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	ļ		
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	_		
	organization, have excess business holdings at any time during the year?	8		✓
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		✓
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		7
10	Section 501(c)(7) organizations. Enter:	- J.		 •
		1		
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 . 10b	1		1
11	Section 501(c)(12) organizations. Enter:			İ
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources	1	1	
	against amounts due or received from them.)			İ
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	40-	1	
_		12a		ļ
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	L	L	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			l —
h	Enter the amount of reserves the organization is required to maintain by the states in which			1
~	the appropriate to the money to the constraint to the constraint of the constraint o			
_	100	ł		
С	Enter the amount of reserves on hand	ļ		<u> </u>
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	L	L
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b		L

Part	"No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change O. See instructions. Check if Schedule O contains a response to any question in this Part VI			
Secti	on A. Governing Body and Management			
1a b 2	Enter the number of voting members of the governing body at the end of the tax year	2	Yes	No
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		√
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Does the organization have members or stockholders? Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	4 5 6 7a	√	√ √
ь 8	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7b	✓	
a b 9	The governing body?	8a 8b	1	
Secti	ion B. Policies (This Section B requests information about policies not required by the Internal Reven	<u> </u>	ode)	
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		✓
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?.	10b		√
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	√	
b 12a	Describe in Schedule O the process, if any, used by the organization to review this Form 990. Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Ĭ	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise 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		1
13	Does the organization have a written whistleblower policy?	13	√	
14 15	Does the organization have a written document retention and destruction policy?	14	✓	
а	The organization's CEO, Executive Director, or top management official	15a		1
b	Other officers or key employees of the organization	15b		1
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)	-10-	-	- 1
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?	16a 16b		✓
	ion C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed Oregon Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3 for public inspection. Indicate how you make these available. Check all that apply. Own website. □ Apother's website. □ Apother's website. □ Upper request.	s only	y) ava	ilable
19	Own website Another's website Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of and financial statements available to the public.		-	olicy,
20	State the name, physical address, and telephone number of the person who possesses the books and records organization: Patrick W. Ruddiman 106 East Olive Street, Newport, Oregon 97365	or the		

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Form 9	990 (2010	1
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Part VII	Compensation of Officers, Di	irectors, Trustees,	Key Employees, H	lighest Compensated	Employees,
	and Independent Contractors	S			

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.

- 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, if any. 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 neither the organization no	r any relate	d orga	aniz	atio	n c	ompe	nsa	ited any currer	t officer, director	r, or trustee.
(A)	(B)	(B) (C) (D) (E)						(E)	(F)	
Name and Title	Average hours per week (describe hours for related organizations in Schedule O)	Individual tr or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	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
(1) Mike Smith - Worthy President	1.0							0	o	0
80 NE 72nd Street, Newport, Oregon 97365	<u> </u>		_	✓		ļ	<u> </u>			
(2) Ron West - JR Worthy Past President	1.0			١,				o	0	0
P.O. Box 531, Siletz, Oregon 97380	 	-								
(3) Herb Faber - Worthy Vice President 44 SW Brooks Street, Newport, Oregon 97365	.5			1				0	0	0
(4) Pat Ruddiman - Secretary 209 NE 10th Court, Newport, Oregon 97365	6.0			/				0	0	0
(5) Jim Sweeden - Chaplain P.O. Box 931, Newport, Oregon 97365	1.0			1				o	0	0
(6) Bob Field - Treasurer P.O. Box 533, South Beach, Oregon 97366	1.5			1				0	o	0
(7) Josh Billy - Worthy Conductor P.O. Box 531, Siletz, Oregon 97380	2.0			1				0	0	0
(8) Arlen Phillips 923 SE Bay Blvd, Newport Oregon 97365	1.0	1						0	0	0
(9) Tom Madison 1088 Pioneer Mtn Loop, Toledo, Oregon 97391	1.0	1						0	0	0
(10) Frank Glantz 1539 NW Nye Street, Newport, Oregon 97365	1.0	1						0	0	0
(11) Leo Schulz 1512 NW Ocean View Drive, Newport, OR 97365	1.0	1						0	0	0
(12)										
(13)	-									
(14)	†									
(15)	1					<u> </u>				· · · · · · · · · · · · · · · · · · ·
(16)	1									

	, (A)	(B)			(0	<u>;)</u>			(D)	(E)	<u> </u>		
	Name and title		1		,,	•,			(D)	(E)		(F)	
	Name and title	Average	Positi	on (c		allt	hat ap		Reportable	Reportable		imated	:
		hours per week	or c	Inst	Officer	Κey	Hig	For	compensation from	compensation related		ount of other	
		(describe hours for	vidu	Ě	Cer	Key employee	hest	Former	the organization	organization (W-2/1099-MI	1	ensatio	n
		related	tor	onal		ploy	96		(W-2/1099-MISC)	(44-27 1055-1411	, I	om the Inization	n
		organizations in Schedule	Individual trustee or director	Institutional trustee		8	pen		1			related	
		O)	Ф	tee			Highest compensated employee		1		Orga	inzation	13
(17)							<u> </u>	-					
7.77								İ					
(18)	· · · · · · · · · · · · · · · · · · ·							<u> </u>					
X.17													
(19)													
(20)											Ì		
								<u> </u>					
(21)								ŀ					
(22)				-	-			-					
(22)									1		Ì		
(23)						-		\vdash			_		
3777													
(24)													
(25)													
							ļ	_					
(26)													
(07)					-			-					
(27)											ŀ		
(28)													
120/									1				
1b \$	Sub-total		٠					▶					
c 1	Fotal from continuation sheets to Part	VII, Sectio	n A					▶					
<u>d</u> 1	Total (add lines 1b and 1c)		<u> </u>			<u> </u>		<u> </u>					
	Total number of individuals (including but			ose	list	ed a	above	e) w	ho received m	ore than \$10	0,000 in		
r	reportable compensation from the organi	zation ► n	one									T	
0 F	Old the evapoimation list any former of	diana disa							الدناء معالما			Yes	No
	Old the organization list any former of employee on line 1a? If "Yes," complete s							-	oloyee, or nign				1
	For any individual listed on line 1a, is the											 	•
	organization and related organizations												
	individual										. 4	-	1
5 [Did any person listed on line 1a receive o	r accrue co	ompe	nsat	tion	froi	m any	un un	related organiz	ation or indi	vidual		
f	for services rendered to the organization	? If "Yes," c	ompl	ete	Sch	edu	ıle J f	or s	such person		5		1
	B. Independent Contractors												
	Complete this table for your five highest of	compensat	ed ind	dep	end	ent	contr	act	ors that receive	ed more than	1 \$100,000 d	f	
	compensation from the organization.	·											
	(A) Name and business add	ress							(B) Description of s	ervices	(C) Compen		
								-					
		·						-					
								 					
											·····	·	
	Total number of independent contractor received more than \$100,000 in compens	*	-							ove) who			

Part	VIII	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
क्ष क	1a	Federated campaigns 1a				
השים עריים	b	Membership dues 1b 5,800.00				
s, g	С	Fundraising events 1c 4,401.72				
Contributions, gifts, grants and other similar amounts	d	Related organizations 1d				
imi	е	Government grants (contributions) 1e				,
rtioi er s	f	All other contributions, gifts, grants,				
후		and similar amounts not included above 11				
d at	g	Noncash contributions included in lines 1a-1f \$				
	h	Total. Add lines 1a-1f	10,201.72			
Program Service Revenue	0-	Business Code				
eve	2a b					
8	C					
Ž	d					
Š	e					
E G	f	All other program service revenue .				
6	g	Total. Add lines 2a–2f				
	3	Investment income (including dividends, interest,				
		and other similar amounts)	764.58	764.58		
	4	Income from investment of tax-exempt bond proceeds ▶			·	
	5	Royalties				
	_	(i) Real (ii) Personal				
	6a	Gross Rents				
	b	Less: rental expenses	1			
	C	Rental income or (loss) Net rental income or (loss)	-			
	d 7a	Gross amount from sales of (i) Securities (ii) Other				<u> </u>
	/"	assets other than inventory				
	ь	Less: cost or other basis	1			
	-	and sales expenses .				
	c	Gain or (loss)				
	d	Net gain or (loss)				
ē	8a	Gross income from fundraising				
Ē	•••	events (not including \$				
Other Revenu		of contributions reported on line 1c).				
ē		See Part IV, line 18 a				
¥	ь	Less: direct expenses b				
O	,	Net income or (loss) from fundraising events . ▶				
	9a	Gross income from gaming activities.				
		See Part IV, line 19 a 122,756.47				
	b	Less: direct expenses b 89,026.98	1			
	C	Net income or (loss) from gaming activities	33,729.49	33,729.49		
	10a	Gross sales of inventory, less returns and allowances a 146.954.22				
			1			
	b c	Less: cost of goods sold b 75,166.00 Net income or (loss) from sales of inventory >	71,788.22	71,788.22		
	-	Miscellaneous Revenue Business Code	71,766.22	11,100.22		
	11a		1			†
	b					
	С					
	d	All other revenue				
	е	Total. Add lines 11a–11d ▶				1
	12	Total revenue. See instructions ▶	116,484.01			

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). (C) Management and (A) Total expenses (D) Fundraising Do not include amounts reported on lines 6b. Program service 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and 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 3 Grants and other assistance to governments. organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 5 trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . 7 45,305.75 45,305.75 Other salaries and wages 8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . 9 Other employee benefits 10 Payroll taxes 6,788.04 6,788.04 11 Fees for services (non-employees): Management Legal 275.00 275.00 Accounting C Lobbying Professional fundraising services. See Part IV, line 17 f Investment management fees . . . Other g 12 Advertising and promotion . 4,796.68 13 Office expenses 4,796.68 14 Information technology . . . 15 16 Occupancy 16,117.10 16,117.10 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings . 19 1,068.17 1.068.17 20 21 Payments to affiliates 22 Depreciation, depletion, and amortization . 23 884.92 884.92 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.) Fund Raising Expenses 2,038.42 а 2,038.42 Music Expense 1,170.00 ь 1,170.00 C **Dues payments to Aerie** 3,622.00 3,622.00 d e All other expenses 28.00 Total functional expenses. Add lines 1 through 24f 25 81,025.91 78,987.49 2,038.42 Joint costs. Check here ▶ ☐ if following 26 SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

P	art X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		1	
	2	Savings and temporary cash investments	57,407.48	2	82,403.10
	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)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
ţ		employees' beneficiary organizations (see instructions)		6	
Assets	7	Notes and loans receivable, net		7	
Ä	8	Inventories for sale or use	5,000.00	8	5,000.00
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or			,
	İ	other basis. Complete Part VI of Schedule D 1,000,000.00			
	l	Less: accumulated depreciation 10b 0.00	1,000,000.00	10c	1,000,000.00
	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)	1,062,407.48		1,087,403.10
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
40	20	Tax-exempt bond liabilities		20	
ijes	21 22	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	·
Ē	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons.			
Liabilities		Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	33,927.00		23,464.52
	24	Unsecured notes and loans payable to unrelated third parties	33,327.00	24	23,707.32
	25	Other liabilities. Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	33,927.00		23,464.52
	-	Organizations that follow SFAS 117, check here ▶ ☐ and complete			
ės		lines 27 through 29, and lines 33 and 34.			
E	27	Unrestricted net assets	~	27	
3aj	28	Temporarily restricted net assets		28	· · · · · · · · · · · · · · · · · · ·
펄	29	Permanently restricted net assets		29	
٦	<u> </u>	Organizations that do not follow SFAS 117, check here ▶ ☐ and			
5		complete lines 30 through 34.			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds	. , , , , , , , , , , , , , , , , , , ,	30	
SSe	31	Paid-ın or capital surplus, or land, building, or equipment fund		31	
t A	32	Retained earnings, endowment, accumulated income, or other funds .		32	
Ne	33	Total net assets or fund balances	1,028,480.48		1,063,938.58
	34	Total liabilities and net assets/fund balances	1,062,407.48	34	1,087,403.10

Form **990** (2010)

Part					
	Check if Schedule O contains a response to any question in this Part XI	<u> </u>	· · · ·	• •	. 🗆
1	Total revenue (must equal Part VIII, column (A), line 12)	1		116,4	84.01
2	Total expenses (must equal Part IX, column (A), line 25)	2		81,0	25.91
3	Revenue less expenses. Subtract line 2 from line 1	3		35,4	58.10
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1	,028,4	80.48
5	Other changes in net assets or fund balances (explain in Schedule O)	5			
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,				
	column (B))	6	1	,063,9	38.58
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. 🗆
				Yes	No
1	Accounting method used to prepare the Form 990:		_		
	If the organization changed its method of accounting from a prior year or checked "Other," ex	olain ir	ī		1 '
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		/
b	Were the organization's financial statements audited by an independent accountant?		2b		✓
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over				
	of the audit, review, or compilation of its financial statements and selection of an independent accou			l	1
	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O.	olain ir	٦ 🗀		ſ
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year	ar were	€		1
	issued on a separate basis, consolidated basis, or both:				<u> </u>
_	☐ 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 ir	וי		}
	the Single Audit Act and OMB Circular A-133?		3a	لــــا	✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?	go the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	ıdits	3b		✓
			For	n 990	(2010)

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.

20**10**

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization Employer identification number Fraternal Order of the Eagles Aerie 2817 93-0404799 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 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 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 ☐ Yes ☐ No Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area ☐ Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 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 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) ☐ Yes ☐ No In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Assets included in Form 990, Part X

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Page	4

Part	Organizations Maintaining C	Collections of	Art, His	torica	al Treasures	, or Ot	her Similar	Asse	ets (cont	inued)
3	Using the organization's acquisition, ac	ccession, and of	ther reco	rds, cl	neck any of th	e follow	ing that are a	a sigi	nificant us	se of its
	collection items (check all that apply):									
а	☐ Public exhibition		d		Loan or excha	nge pro	grams			
b	☐ Scholarly research		е		Other					
С	☐ Preservation for future generation	s								
4	Provide a description of the organization	on's collections	and expla	ain ho	w they further	the org	anization's ex	emp	t purpose	in Part
	XIV.									
5	During the year, did the organization s	olicit or receive	donation	s of a	rt, historical ti	reasures	s, or other sin	nilar		
	assets to be sold to raise funds rather t	han to be mainta	ained as p	oart of	the organizati	ion's co	llection? .		☐ Yes	☐ No
Part	V Escrow and Custodial Arrar	ngements. Co	mplete i	f the o	organization	answei	ed "Yes" to	Forr	n 990, P	art IV,
	line 9, or reported an amount	on Form 990,	Part X, li	ne 21						
1a	Is the organization an agent, trustee,	custodian or oth	ner interm	nedian	y for contribut	tions or	other assets	not		
	included on Form 990, Part X?								☐ Yes	☐ No
b	If "Yes," explain the arrangement in Par	rt XIV and compl	lete the fo	llowin	g table:					
		•						Amo	ount	
С	Beginning balance					1c				
d	Additions during the year					1d				
е	Distributions during the year					1e			•	
f	Ending balance					1f				
2a	Did the organization include an amount						• • • •		☐ Yes	□No
b	If "Yes," explain the arrangement in Pai		•							
	Endowment Funds. Complete		zation ar	swer	ed "Yes" to F	orm 99	00, Part IV, li	ne 1	0.	
		(a) Current year		or year	(c) Two year		(d) Three years b		(e) Four yea	ars back
1a	Beginning of year balance									
b	Contributions							\neg		
C	Net investment earnings, gains, and								-	
	losses				ĺ					1
d	Grants or scholarships							_		
е	Other expenditures for facilities and	· · · · · · · · · · · · · · · · · · ·	1						····	
	programs									
f	Administrative expenses		 					\neg		
g	End of year balance		†·					\dashv		
2	Provide the estimated percentage of th	e vear end balar	nce held a	ıs:						
а	Board designated or quasi-endowment		%							
b	Permanent endowment ▶	%								
С	Term endowment > %									
3a	Are there endowment funds not in the	possession of the	he organi	zation	that are held	and ad	ministered for	the		
	organization by:	•							Ye	s No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations							-	3a(ii)	
b	If "Yes" to 3a(ii), are the related organiz								3b	
4	Describe in Part XIV the intended uses							•	<u> </u>	
Part	VI Land, Buildings, and Equipr	nent. See Forr	n 990, P	art X,	line 10.				•	
	Description of investment	(a) Cost or o			ost or other basis	(c) A	Accumulated	<u> </u>	(d) Book va	alue
		(investm	nent)		(other)	de	preciation			
1a	Land				1,000,000.00		·		1,000	0,000.00
b	Buildings			h					,	
С	Leasehold improvements			<u> </u>					· · ·	
đ	Equipment						······································			
е	Other			 			V	\Box		
otal.	Add lines 1a through 1e. (Column (d) mu	ust equal Form 9	90. Part	K. colu	ımn (B), line 10	(c).)			1 000	000 00

Part VII Investments—Other Securities	See Form 990 Part X	line 12
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests	······································	
(3) Other		
(A)		
(B)	· · · · · · · · · · · · · · · · · · ·	
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12.)	<u> </u>	
Part VIII Investments—Program Relate		(, line 13.
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
<u>(7)</u>		
(8)		
(9) (10)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		
Part IX Other Assets. See Form 990, Part IX	1 .	
	(a) Description	(b) Book value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)	····	
(9)		
(10) Table (0 days 15 and 15 a		
Total. (Column (b) must equal Form 990, Part X, o		
Part X Other Liabilities. See Form 990 1. (a) Description of liability		
(1) Federal income taxes	(b) Amount	-
(2)		-
(3)	<u> </u>	-
(4)		
(5)		-
(6)	· 	-
(7)	<u> </u>	-
(8)		_
(9)		1
(10)		1
(11)	<u> </u>	1
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)		7
2. FIN 48 (ASC 740) Footnote. In Part XIV, provide	the text of the footnote to	the organization's financial statements that reports the
organization's liability for uncertain tax positions u	under FIN 48 (ASC 740).	

Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Schedule D (Form 990) 2010

Part XI

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Part XIII 1

2

b

C

b

Part XII

Schedule D (For	orm 990) 2010	Page 5
Part XIV	Supplemental Information (continued)	
	,	
	·	
	·	
·		

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

▶ Attach to Form 990 or 990-EZ.

Name of the organization	Employer identification number
Fraternal Order of Eagles Aerie 2817	93-040799
Section 6 11A - Has the organization provided a copy of this Form 990 to all members	ers of its governing body before filing the form?
The annual was an able to accious our financial information by accounting from the	C
The members are able to review any financial information by requesting from the	Secretary or Treasurer. Form 990 is provided to the
governing body for review and comment during a regular scheduled meeting.	
<u></u>	