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Form **990**

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.

OMB No. 1545-0047

2010

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Openio Public	, ;
* * Challenge	, ,
Inspection	
THE PARTY NAMED IN COLUMN TWO	

ري	Ά	For the 2010 calendar year, or tax year beginning 4/01, 2010, and ending	g 3/31	, 2011
· 22	В	Check if applicable	D Employer	Identification Number
)	Address change BENEVOLENT & PROTECTIVE ORDER OF 407	42-0	136000
4.5℃	9	Name change PERRY ELKS LODGE	E Telephone	
الله در کر	{		515-4	465-3791
) }	PERRY, 1A 50220-2323	313	103 3771
ار مور	{	Terminated		272 027
7 × 5 × 5 × 5 × 5 × 5 × 5 × 5 × 5 × 5 ×		Amended return Application pending F Name and address of principal officer DAVID ROUSCH	G Gross reco	
7.5)		H(b) Are all affiliates includ	, 片''' 片'''
بخ		SAME AS C ADOVE	If 'No,' attach a list (s	
	<u> </u>	Tax-exempt status 501(c)(3) X 501(c) (8) ◄ (Insert no.) 4947(a)(1) or 527		
	<u>J</u>		H(c) Group exemption num	ber ► 1156
	K	Form of organization	on M Sta	te of legal domicile IA
	Pa	rt 🔯 Summary		
		1 Briefly describe the organization's mission or most significant activities: <u>CHARITABI</u>	<u>LE_WORKS_OF_T</u>	HE_BENEVOLENT_&_
	ě	PROTECTIVE ORDER OF THE ELKS		
	ā			
	eri			
	& Governance	2 Check this box I if the organization discontinued its operations or disposed of more	re than 25% of its ne	<u> </u>
	જ	 Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 	• -	3 6 4 0
	ies	5 Total number of individuals employed in calendar year 2010 (Part V, line 2a)	· · ·	5 0
	Activities	6 Total number of volunteers (estimate if necessary)	: ' -	6 0
	Ac	7a Total unrelated business revenue from Part VIII, column (C), line 12		7a 24,375.
		b Net unrelated business taxable income from Form 990-T, line 34.	·	7b -7,685.
			Prior Year	Current Year
		8 Contributions and grants (Part VIII, line 1h)		55,070.
	jue	9 Program service revenue (Part VIII, line 2g)		
	Revenue	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		
	R	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		122,828.
		12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		177,898.
		13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		
		14 Benefits paid to or for members (Part IX, column (A), line 4).		
		15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		83,540.
	Expenses	16a Professional fundraising fees-(Part IX, column (A), line 11e)		
	De l	b Total fundraising expenses (Part V., column (D), line 25)		
	ă	17 Other expenses (Part IX, column (A), lines 11a-11d, 1 (24f)	The second week to make the	100,180.
		18 Total expenses Add lines 23-17 ஸ்ரிழ் சீழித் இழி (X, colipm (A), line 25)	· 	183,720.
			Beginning of Current Y	-5,822.
	te or	20 Total assets (Part X, line 16)	211, 34	
	Asset	20 Total assets (Part X, line 16) 1. Total liabilities (Part X, line 26).	72,59	
2011	let /			
ග	2 <u>i</u>	22 Net assets or fund balances. Subtract line 21 from line 20 .	138,74	2. 132,920.
€1		it il Signature Block		
2	Und	er penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to t plete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge	the best of my knowledge ar	nd belief, it is true, correct, and
			10/01	
	٥.	Signature of officer	Date	
	Sig He	?"		
W	ne	P DAVID ROUSCH Type or print name and title	TREASURER	
Z				, PTIN
E.		Will the state of	' ' '	11
3	Pa		11 self-employed	P00122600
SCANNED	Pro	eparer Firm's name MERIWETHER, WILSON & CO., PLC		
~ <i>,</i>	US	e Only Firm s address > 1307 SECOND ST.		42-0731256
		PERRY, IA 50220	Phone no (515) 465-3591
	Ma	y the IRS discuss this return with the preparer shown above? (see instructions).		X Yes No

	990 (2010) BENEVOLENT & PROTECTIVE ORDER OF 407	42-0136000	Page 2
Pài	Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		<u> </u>
1	Briefly describe the organization's mission:		
	CHARITABLE WORKS OF THE BENEVOLENT & PROTECTIVE ORDER OF THE ELF	<u> </u>	
	Did the organization undertake any significant program services during the year which were not listed or	on the prior	
4	5 000 000 573	· — .	X No
	If 'Yes,' describe these new services on Schedule O		<u>v</u> 140
3	Did the organization cease conducting, or make significant changes in how it conducts, any program si	ervices? Yes	X No
•	If 'Yes,' describe these changes on Schedule O.		
4	Describe the exempt purpose achievements for each of the organization's three largest program services.	es by expenses. Section	501(c)(3)
	and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants a expenses, and revenue, if any, for each program service reported.	ind állocátions to others,	the total
42	(Code: Code: \$\frac{179,650}{2}\) (Expenses \$\frac{179,650}{2}\] including grants of \$\frac{1}{2}\]	Revenue \$)
	CHARITABLE WORKS OF THE BENEVOLENT & PROTECTIVE ORDER OF THE ELK		
41	(Code: procest spenses	Revenue \$)
40	c (Code: Code: \$ including grants of \$) (Revenue \$)
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		<b>-</b>
			<b>- -</b>
	d Other program services (Describe in Schedule O.)		
41	(Expenses \$ including grants of \$ ) (Revenue \$	,	
	e Total program service expenses ► 179,650.		

			res	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		X
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions).	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		
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		
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		х
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		<u>x</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		<u>x</u>
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		<u>x</u>
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? I 'Yes,' complete Schedule D, Part V	10		х
11				* *
	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	X	
	<b>b</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? <i>If 'Yes,' complete Schedule D, Part VII</i>	11 b		<u>X</u>
	c 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	11 c		X
	d 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	11 d		X
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	X	
	f 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	11 f		X
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		<u>X</u>
	<b>b</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	12 b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		<u>X</u>
14	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
	<b>b</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		<u>x</u>
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		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	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 (see instructions)	17		<u>X</u>
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		<u>X</u>
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		Χ
20	aDid the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		X
	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)	20 b		

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		x
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		_ X_
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		Х
24 a	a 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and			
Þ	complete Schedule K. If 'No,'go to line 25  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		<u>X</u> _
	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		
	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a 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		
ì	that the transaction 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		X
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		_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):			ier zig
ä	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		_X_
ı	b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		<u>X</u>
(	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		_X_
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		<u>X</u>
	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
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		X
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		<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity 9 If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		<u>X</u>
•	a 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  Yes X No			
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		
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 $R$ , $Part\ VI$	37		<u>X</u>
38	Note. All Form 990 filers are required to complete Schedule O	38		X
3A.4	<b>L</b>	Form	990 (	2010)

## Form 990 (2010) BENEVOLENT & PROTECTIVE ORDER OF 407 Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V.	<del></del>		<u> </u>	<u>  </u>
	, ,		Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		0		
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		0		
c Did the organization comply with backup withholding rules for reportable payments to vendo (gambling) winnings to prize winners?	ors and reportable gaming	1c		
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	0		
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employme	nt tax returns?	. 2b		
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see	instructions)		33.	, ,
3a Did the organization have unrelated business gross income of \$1,000 or more during the ye	ear?	3a	_ X	
<b>b</b> If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule C	)	_ 3b	X	
4a At any time during the calendar year, did the organization have an interest in, or a signature financial account in a foreign country (such as a bank account, securities account, or other	e or other authority over, a financial account)?	4a	78w 5.20	X
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		مدائمته ا		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the ta	•	5a		<u>X</u>
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax she	Iter transaction?	5 b		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5 c		
<b>6a</b> Does the organization have annual gross receipts that are normally greater than \$100,000, solicit any contributions that were not tax deductible?	and did the organization	6a		<u> </u>
<b>b</b> If 'Yes,' did the organization include with every solicitation an express statement that such onto tax deductible?	contributions or gifts were	_6b		
7 Organizations that may receive deductible contributions under section 170(c).			13	38
<b>a</b> Did the organization receive a payment in excess of \$75 made partly as a contribution and services provided to the payor?	partly for goods and	700 7a		X
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided	7	7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for v Form 8282?	which it was required to file	7с		X
d If 'Yes,' indicate the number of Forms 8282 filed during the year .	7d		14.46	
e Did the organization receive any funds, directly or indirectly, to pay premiums on a persona	I benefit contract?	_7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal be	nefit contract?	7f		<u>X</u> _
${\bf g}$ If the organization received a contribution of qualified intellectual property, did the organization required?	tion file Form 8899 N/A	7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did th Form 1098-C?	e organization file a	7h	MANAGE BA	- Carl
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) support supporting organization, or a donor advised fund maintained by a sponsoring organization, holdings at any time during the year?	ing organizations. Did the have excess business	8	-	
9 Sponsoring organizations maintaining donor advised funds.	1	332		100
a Did the organization make any taxable distributions under section 4966?		9a		
<b>b</b> Did the organization make a distribution to a donor, donor advisor, or related person?	1	9b		
10 Section 501(c)(7) organizations. Enter.		<b>\$</b> 1,44	0 <del>43</del>	<b>M</b>
a Initiation fees and capital contributions included on Part VIII, line 12	10a			
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11 Section 501(c)(12) organizations. Enter	Ţ.,	3,		4
a Gross income from members or shareholders	11a		<i>*</i> . :	
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	116	12.	, , , , , , , , , , , , , , , , , , ,	· W
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu		12a		144 4753 17 ⁴
<b>b</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.	1	10.46		ACT
a is the organization licensed to issue qualified health plans in more than one state?	· ·	13a	94.20	ACTOR AND
Note. See the instructions for additional information the organization must report on Schedu	ule O	4		
<b>b</b> Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c Enter the amount of reserves on hand	13c	1 3.33	7	
14a Did the organization receive any payments for indoor tanning services during the tax year?	. 1.	14a		<u>X</u> _
<b>b</b> If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in	Schedule O N	14b		

Form 990 (2010) BENEVOLENT & PROTECTIVE ORDER OF 407 42-0136000 Part VI3 Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body at the end of the tax year b Enter the number of voting members included in line 1a, above, who are independent 1 b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee? 2 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 Did the organization make any significant changes to its governing documents 4 X since the prior Form 990 was filed? . Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Does the organization have members or stockholders? 6 X 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the 7a governing body? . X X b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8a a The governing body? X **b** Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O 9 Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10 a Does the organization have local chapters, branches, or affiliates? 10 a X 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 11 a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O 12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13 Х 12a 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. 12 c 13 Does the organization have a written whistleblower policy? 13 X 14 Does the organization have a written document retention and destruction policy? 14 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? a The organization's CEO, Executive Director, or top management official 15 a Х **b** Other officers of key employees of the organization 15 b If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X 16 a b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > NONE 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 Upon request 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. SEE SCHEDULE O 19 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► DAVE ROUSCH 2823 WILLIS, PERRY, IA 50220 515-465-3791

Form <b>990</b> (2010)	BENEVOLENT	r.	PROTECTIVE	ORDER	OF	407
"OHRI <b>330</b> (2010)	DEMEACHERIA	œ	LUCITAR	OKDEK	Or	30/

42-0136000

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Form 990 (2010)

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

Check if Schedule O contains a response to any question in this Part VII

### 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.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

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

(A)	(B)	(C)		(D)	(E)	(F)				
Name and title	Average hours per week (describe hours for related organiza- tions in Schedule O)	ndwidual trustee or director	institutional trustee	_	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
	0	Х						0.	0.	0
(2) MATT VANPELT	<del>                                     </del>	^						0.	0.	0.
TRUSTEE	0	Х						0.	0.	0.
_(3)_STEVE_HICKTRUSTEE	0	х						0.	0.	0.
(4) DAVID ROUSCH				.,				1 000		
TREASURER	5			X				1,200.	0.	0.
(5)_ LARRY_MEACHAM SECRETARY	5			Х				2,500.	0.	0.
(6) GERALD ANDERSON										
EXALTED RULER	0			Х			L	0.	0.	0.
	-									
_(8)	-									
										<del></del>
<u>(10)</u>										
<u>(11)</u>					_					
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(15)										
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	<u> </u>	<u> </u>	Ц_	Щ.	<u> </u>	<u>l </u>	<u> </u>	L		· · · · · · · · · · · · · · · · · · ·

TEEA0107L 12/21/10

Part VII Section A. Officers, Directors, Trust	tees, k	(ey	En	nplo	οуε	es,	an	d Highest Cor	npensated Em	oloyees (cont)
(A)	(B)	Posi	than i		<b>c)</b>	ihat s	·nnh/\	(D)	(E)	(F)
Name and title	Average hours per week (describe		т_	Officer			-	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation
	per week (describe hours for related organi-	rector	Institutional trustee	ª	Key employee	Highest compensate employee	द्	(11-21-1055-11100)	(W-2 1000-111100)	from the organization and related
	zations in Sch O)	trustee	il trust		yee	npens				organizations
	,		ee			sated				
_U8)						-	-			
_(20)	-	-					-			
_(21)										
_(23)										
_(24)										
_(25)										
_(26)										
_(27)										
(28)										
(29)										
1 b Sub-total				اـــــا			<b>&gt;</b>	3,700.	0.	0.
c Total from continuation sheets to Part VII, Section	A						<b>\</b>	0.	0.	0.
d Total (add lines 1b and 1c)  2 Total number of individuals (including but not limited	to the	se li	 sted	abc	ve)	whe	o re	3,700.	0. \$100,000 in reporta	0. able compensation
from the organization > 0									——————————————————————————————————————	TOTO COTTIPOLITATION
3 Did the organization list any <b>former</b> officer, director on line 1a? If 'Yes,' complete Schedule J for such in	or truste	ee, l	key (	emp	loye	ee, d	or hi	ghest compensate	ed employee	Yes No
4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater the	oortable	con	npei 00? /	nsati If 'Yo	ion es' (	and com	oth plet	er compensation f e Schedule J for	rom	
<ul> <li>such individual</li> <li>Did any person listed on line 1a receive or accrue confor services rendered to the organization? If 'Yes,' c</li> </ul>	ompens	atioi	n fro	om a	ny i	unre	late	d organization or	ındıvıdual	4 X
Section B. Independent Contractors										5 X
Complete this table for your five highest compensate compensation from the organization	ed indep	end	lent	con	trac	tors	tha	t received more th	nan \$100,000 of	
(A) Name and business address	5	•						( <b>B)</b> Description o	f services	(C) Compensation
		•								
				—						
2 Total number of independent contractors (including \$100,000 in compensation from the organization ►		lımıt	ed t	to the	ose	liste	ed a	bove) who receive	ed more than	

	t 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
TS, GRANTS R AMOUNTS	1a Federated campaigns.1ab Membership dues1bc Fundraising events1cd Related organizations1d	34,726.	^	revenue		312, 313, U 314
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	e Government grants (contributions)  f All other contributions, gifts, grants, and similar amounts not included above.  g Noncash contributions included in lns 1a-1f: \$	20,344.	,		\$´~	
E S	h Total. Add lines 1a-1f	Business Code	55,070.		32	
PROGRAM SERVICE REVENUE	b c c d e e e e e e e e e e e e e e e e e			\$ 2 \$ \$*		
<u>ā</u>	<ul> <li>g Total. Add lines 2a-2f</li> <li>3 Investment income (including dividend other similar amounts)</li> <li>4 Income from investment of tax-exempts</li> <li>5 Royalties</li> </ul>	s, interest and . > t bond proceeds >		5.	*	×8 2
	6a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss)	(II) Personal				
	7 a Gross amount from sales of assets other than inventory  b Less: cost or other basis and sales expenses	(II) Other				
	c Gain or (loss) d Net gain or (loss).	<b>&gt;</b>				<u> </u>
OTHER REVENUE	8a Gross income from fundraising events (not including \$	a b	**		.**	
	9a Gross income from gaming activities See Part IV, line 19 b Less direct expenses	a 6,873. b 2,449.		(A)		
	c Net income or (loss) from gaming acti	vities	4,424.			4,424.
	<ul><li>10 a Gross sales of inventory, less returns and allowances</li><li>b Less cost of goods sold</li></ul>	a 191,559. b 93,490.	***	*	, ,	<i>§</i> `
	c Net income or (loss) from sales of inv		98,069.	73,694.	24,375.	
	Miscellaneous Revenue	Business Code	17 70*	17 701	\ <u></u>	<b> </b>
	11a INSURANCE REIMBURSEMENT b RENT c	722100 722100	17,721. 2,614.	17,721. 2,614.		
	d All other revenue					
	e Total. Add lines 11a-11d	<b>&gt;</b>	20,335.	04.000	24 275	4 424
	12 Total revenue. See instructions		177,898.	94,029.	_ 24,375.	4,424.

#### Partix 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 com	<del> </del>	<del>,                                     </del>		
Do 1 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	( <b>B)</b> Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	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				Ass.
4	Benefits paid to or for members.			10.18 12.3	
5	Compensation of current officers, directors, trustees, and key employees.	3,700.	0.	3,700.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	71,738.	71,738.		
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions) .				
9	Other employee benefits.				
10	Payroll taxes	8,102.	7,732.	370.	
11	Fees for services (non-employees):				
ä	a Management				
ŀ	<b>L</b> egal			· · · · · · · · · · · · · · · · · · ·	
•	Accounting	2,763.	2,763.		
•	<b>i</b> Lobbying			The state of the s	
	e Professional fundraising services. See Part IV, line 17 Investment management fees				
	Other				
	Advertising and promotion	1,241.	1,241.		
13	Office expenses.				
14	Information technology				
15	Royalties				
16	Occupancy	11,290.	11,290.		
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,498.	2,498.		
20	Interest	2,909.	2,909.		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	8,456.	8,456.		
23		6,320.	6,320.	David State of the	. Con regarded at manufacturer.
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)				
	a_UTILITIES	19,108.	19,108.		
	ENTERTAINMENT	6,909.	6,909.		
•	GRAND_LODGE_DUES	6,699.	6,699.		
	d SUPPLIES	4,866.	4,866.		
	SALES_TAXES	3,900.	3,900.	· · · · · · · · · · · · · · · · · · ·	
	f All other expenses SEE SCH. O	23,221.	23,221.		
25	Total functional expenses, Add lines 1 through 24f	183,720.	179,650.	4,070.	<u> </u>
26	Joint costs. Check here ► if following 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				
BAA					Form <b>990</b> (2010)

Form 990 (2010)

	rî X	Balance Sheet	DER 01 107		0130	rage II
THE STATE OF		Data roo erreet		(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing .		32,645.	1	33,785.
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net	6,922.	4	2,591.	
	5	Receivables from current and former officers, director and highest compensated employees. Complete Part		5		
	6	Receivables from other disqualified persons (as defin persons described in section 4958(c)(3)(B), and contraponsoring organizations of section 501(c)(9) volunta organizations (see instructions)	ributing employers and		6	
A	7	Notes and loans receivable, net			7	
SETS	8	Inventories for sale or use.		7,766.	8	8,106.
Š	9	Prepaid expenses and deferred charges.			9	
•	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 388,575.		:.j	
		Less: accumulated depreciation.	10b 233,024.	164,008.	10 c	155,551.
	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	9 34)	211,341.	16	200,033.
	17	Accounts payable and accrued expenses		6,472.	17	6,853.
	18	Grants payable.			18	
	19	Deferred revenue	•		19	
L	20	Tax-exempt bond liabilities .			20	
Ä	21	Escrow or custodial account liability Complete Part	IV of Schedule D		21	
L   T	22	Payables to current and former officers, directors, truinghest compensated employees, and disqualified pe of Schedule L	ustees, key employees, ersons. Complete Part II	m= //a/	22	
E S	23	Secured mortgages and notes payable to unrelated t	hird parties	47,273.	23	39,382.
	24	Unsecured notes and loans payable to unrelated third	d parties.		24	
	25	Other liabilities. Complete Part X of Schedule D		18,854.	25	20,878.
	26	Total liabilities. Add lines 17 through 25		72,599.	26	67,113.
Ņ		Organizations that follow SFAS 117, check here	X and complete lines			
T		27 through 29 and lines 33 and 34.				
Ş	27	Unrestricted net assets		138,742.	27	<u>132,920.</u>
女いの正丁の	28	Temporarily restricted net assets .			28	
	29		Г <del>~</del> ¬		29	
Q R		Organizations that do not follow SFAS 117, check h	ere ► and complete			
FUZD	20	lines 30 through 34.  Capital stock or trust principal, or current funds		,	30	
	30 31	Paid-in or capital surplus, or land, building, or equip	ment fund		31	
Ã	32	Retained earnings, endowment, accumulated income			32	
BALAZCES	33	Total net assets or fund balances	, or other fullus	138,742.	33	132,920.
Ę	34	Total liabilities and net assets/fund balances		211,341.	34	200,033.
	34	rotal nabilities and het assets/fully balances		411,341.	34	200,033.

For	rm 990 (2010) BENEVOLENT & PROTECTIVE ORDER OF 407	<u>42-0136000</u>	F	Page 12
P	art XIII Reconciliation of Net Assets			
	Check if Schedule O contains a response to any question in this Part XI		<del>`</del>	
1	1 Total revenue (must equal Part VIII, column (A), line 12)	1		898.
2	2 Total expenses (must equal Part IX, column (A), line 25)	2	183,	720.
3	Revenue less expenses. Subtract line 2 from line 1	3		822.
4	4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) .	4	138,	742.
5	Other changes in net assets or fund balances (explain in Schedule 0)	5	<del></del>	0.
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	132,	920.
Pa	art XIII Financial Statements and Reporting			
	Check if Schedule O contains a response to any question in this Part XII			□
			Yes	No
1	<b>1</b> Accounting method used to prepare the Form 990 $^{\cdot}$ $\square$ Cash $\square$ Accrual $\square$ Other $_$			
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.			
2	2 a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X
	<b>b</b> Were the organization's financial statements audited by an independent accountant? .		2b	X
	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh review, or compilation of its financial statements and selection of an independent accountant?	t of the audit,	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 separate basis, consolidated basis, or both  Separate basis  Consolidated basis  Both consolidated and separate basis	issued on a	, i <b>3</b> i	
3	3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in Audit Act and OMB Circular A-133?	the Single	3a	х
	<b>b</b> If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required audit	3b	

Form **990** (2010)

### 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, lines 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions. 2010

OMB No 1545-0047

Employer identification number

BENEVOLENT & PROTECTIVE ORDER OF 407 PERRY ELKS LODGE 42-0136000 Part l 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) Aggregate grants from (during year) Aggregate value at end of year. Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 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 conferring impermissible private benefit? 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 a Total number of conservation easements b Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2с d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No 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 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(i)? 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 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of

- 1a 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
- **b** 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:
- (i) Revenues included in Form 990, Part VIII, line 1
- (ii) Assets included in Form 990, Part X
- 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
- a Revenues included in Form 990, Part VIII, line 1
- b Assets included in Form 990, Part X

►\$_____

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Schedule **D** (Form 990) 2010

►\$

Schedule <b>D</b> (Form 990) 2010 BENEV	OLENT &	PROT	ECTIVE	ORDER	OF 407	42-013	36000		Page 2
Part 🕪 Organizations Maintai	ining Colle	ctions	of Art, Hi	storica	l Treasures, o	r Other Similar Ass	sets (c	ontinu	
3 Using the organization's acquisition items (check all that apply):	on, accessior	n, and ot	her records	, check a	ny of the following	g that are a significant	use of it	s collec	tion
a Public exhibition			d TLo	an or exc	hange programs				
b Scholarly research				her	ar go programme				
c Preservation for future gener	ations		· Ш • ч						
4 Provide a description of the organ		lections :	and explain	how they	further the organ	nization's evemnt nurno	se in		
Part XIV	inzation 3 con		and explain	now are	ratalet the organ	iization's exempt purpo	,30 m		
5 During the year, did the organiza assets to be sold to raise funds r							Yes		No
Partity Escrow and Custodia 9, or reported an amo	I Arrangen unt on Fori	<b>nents.</b> ( m 990,	Complete Part X, Iı	if orgaine 21.	nization answe	ered 'Yes' to Form !	990, P	art IV,	line
1a Is the organization an agent, trus included on Form 990, Part X?	itee, custodia	n, or oth	er intermed	liary for c	ontributions or ot	her assets not	Yes	. [	No
<b>b</b> If 'Yes,' explain the arrangement	ın Part XIV a	and comp	olete the fol	lowing ta	ble:				
							Amour	ıt	
c Beginning balance .						1c			<del>_</del>
d Additions during the year				•	•	1d			
e Distributions during the year					•	1e			
f Ending balance						1f			
2a Did the organization include an a	mount on Fo	rm 990. I	Part X. line	21?			Yes	. [	No
<b>b</b> If 'Yes,' explain the arrangement					·	·	□	L	
Part Ve Endowment Funds. Co		he orga	anization	answer	ed 'Yes' to For	m 990 Part IV Jin	e 10	<del></del>	
is the control of the control of	(a) Current		(b) Prior		(c) Two years bac			Four year	e back
1 a Beginning of year balance	(a) ourrent	. ,,,,,,	(0) 1 1101	your	(c) Two years bac	(d) Thice years back	\$ 100 E	Tour year	2 Dack
<b>b</b> Contributions									
<b>b</b> Continuations									
c Net investment earnings, gains, and losses									
d Grants or scholarships							# 開展網		
<ul> <li>Other expenditures for facilities and programs</li> </ul>									
f Administrative expenses							2 22 3		
<b>g</b> End of year balance		1					1		
2 Provide the estimated percentage	e of the year	end bala	ance held as	5					
a Board designated or quasi-endov	vment ►		%						
<b>b</b> Permanent endowment ►	%								
c Term endowment ►	%								
3a Are there endowment funds not a	n the posses	sion of t	he organiza	tion that	are held and adm	inistered for the	1	Yes	No
(i) unrelated organizations							3a(i)	103	
(ii) related organizations.			•		•		3a(ii)		
<b>b</b> If 'Yes' to 3a(ii), are the related of		licted or		a Cabadi	 	•			
* * * *	•		•			•	3b		L
4 Describe in Part XIV the intended							···	_	
Pärt VI: Land, Buildings, and Equipment. See Form 990, Part X, line 10.									
Description of investment  (a) Cost or other basis (b) Cost or other (c) Accumulated (d) Book value basis (other)									
1a Land		1 1		<del>                                     </del>	3,250.	depreciation		3	,250.
<b>b</b> Buildings		<del>                                     </del>		-	5,250.	Manufacturer and property and the second			, 200.
c Leasehold improvements		<u> </u>							<del></del>
d Equipment		<del> </del>	<del></del> -						
• Other		<del> </del>		<del> </del>	395 325	233 024		152	301

155, 551. Schedule **D** (Form 990) 2010

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

	ECTIVE ORDER OF		36000 Page <b>3</b>
Part VIE Investments-Other Securities. See F	orm 990, Part X, line	e 12. N/A	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valua Cost or end-of-year ma	ation: rket value
(1) Financial derivatives			
(2) Closely-held equity interests		<del></del>	
(3) Other			
(A)	<u> </u>		
(B)		<del></del>	
(C)			
(D)			
(E)			
<u>(F)</u>		<del></del>	
<u>(G)</u>		· · · · · · · · · · · · · · · · · · ·	
(H)			
_()			
Total. (Column (b) must equal Form 990 Part X, column (B) line 12.).			
Part VIII Investments-Program Related. (See			
(a) Description of investment type	(b) Book value	(c) Method of valua Cost or end-of-year mar	ition rket value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)		***	
Total. (Column (b) must equal Form 990, Part X, column (B) line 13).	1: 15)		
Part IX Other Assets. (See Form 990, Part X,			
	scription		(b) Book value
(1)	<del></del>		
(2)			
(3)			<del></del>
(4)			<del></del>
(5)			
(6)			<del></del> -
<u>(7)</u> (8)			
(9)	····		
(10)	<del></del> -		
Total. (Column (b) must equal Form 990, Part X, column(B,	) line 15)	<b>&gt;</b>	<del></del>
Part X Other Liabilities. (See Form 990, Part			
(a) Description of liability	(b) Amount		
(1) Federal income taxes	(b) / unoditi	-1	
(2) DUES PAID IN ADVANCE	20,878	_	
(3)	20,0.0	<del>`</del>	; 1
(4)		-	
(5)	<u> </u>		
(6)			
(7)		T	
(8)			
(9)			· 2/3/1/2/2/4
(10)		7	
(11)		1	
Total. (Column (b) must equal Form 990, Part X, column (B) line 25)	<b>&gt;</b> 20,878	1	
2. FIN 48 (ASC 740) Footnote In Part XIV, provide the text			renorts the
organization's liability for uncertain tax positions under FIN	48 (ASC 740)		roports tric

Schedule D (Form 990) 2010 BENEVOLENT & PROTECTIVE ORDER OF 407	42-0136000	Page 4
Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements	N/A	
1 Total revenue (Form 990, Part VIII,column (A), line 12)		
2 Total expenses (Form 990, Part IX, column (A), line 25)		
3 Excess or (deficit) for the year. Subtract line 2 from line 1		
4 Net unrealized gains (losses) on investments		
5 Donated services and use of facilities		
6 Investment expenses	,.	
7 Prior period adjustments		
8 Other (Describe in Part XIV)		
9 Total adjustments (net). Add lines 4 through 8.		
10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		
Reconciliation of Revenue per Audited Financial Statements With Revenu	ie per Return N/A	
1 Total revenue, gains, and other support per audited financial statements	. 1	<del></del> ,
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains on investments		
b Donated services and use of facilities . 2b		
c Recoveries of prior year grants.		
d Other (Describe in Part XIV) 2d		
e Add lines 2a through 2d	2e	
3 Subtract line 2e from line 1	3	<del></del>
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a Investments expenses not included on Form 990, Part VIII, line 7b	<b></b>	
b Other (Describe in Part XIV.)		
c Add lines 4a and 4b	4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)  RatikXIII Reconciliation of Expenses per Audited Financial Statements With Expen		
Total expenses and losses per audited financial statements	1 N/A	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	<b>*</b> * * * * * * * * * * * * * * * * * *	
a Donated services and use of facilities 2a		
b Prior year adjustments		
c Other losses 2c	***	
d Other (Describe in Part XIV.)		
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:	650	
a Investments expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIV )		
c Add lines 4a and 4b	4c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	. 5	
PartXIV Supplemental Information	4.5	<del> </del>
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 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	4, Part IV, lines 1b and 2b,	ما
any additional information.	s complete this part to provid	
<del></del>		

TEEA3304L 02/11/11

Schedule **D** (Form 990) 2010

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Schedule <b>D</b> (Form 990) 2010  Part XIV Supplemental	BENEVOLENT	& PROTECTIVE ORDER	OF 407	42-0136000	Page 5
Part XIV Supplementa	Information (co	ntınued)			
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Schedule **D** (Form 990) 2010

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#### SCHEDULE O (Form 990 or 990-EZ)

### Supplemental Information to Form 990 or 990-EZ

2010

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.

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Name of the organization BENEVOLENT & PROTECTIVE ORDER OF 407 PERRY ELKS LODGE	Employer identification number 42-0136000
FORM 990, PART YI, LINE 11B - FORM 990 REVIEW PROCESS	
NO REVIEW WAS OR WILL BE CONDUCTED.	
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY	AVAILABLE
NO DOCUMENTS AVAILABLE TO THE PUBLIC.	
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### **SCHEDULE O - SUPPLEMENTAL INFORMATION**

PAGE 2

**CLIENT 367600** 

### BENEVOLENT & PROTECTIVE ORDER OF 407 PERRY ELKS LODGE

42-0136000

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6/03/11

FORM 990, PART IX, LINE 24F OTHER EXPENSES

	(A)	(B)	(C)	(D)
	TOTAL	PROGRAM SERVICES	MANAGEMENT & GENERAL	FUNDRAISING
BANK CHARGES	1,582.	1,582.		
BINGO EXPENSE	127.	127.		
CARD KEY	256.	256.		
CASH SHORT (LONG)	-1,645.	-1,645.		
CREDIT / DEBIT CARD EXPENSE	684.	684.		
DONATIONS	2,606.	2,606.		
DUES & SUBSCRIPTIONS	510.	510.		
ELK OF THE YEAR EXPENSE	19.	19.		
ELKS BUCK USED	1,187.	1,187.		
ESSAY CONTEST	25.	25.		
LAUNDRY AND CLEANING	2,533.	2,533.		
LICENSES	2,850.	2,850.		
MISC EXPENSES	135.	135.		
NEWSLETTER EXPENSE	805.	805.		
OFFICE	565.	565.		
PEST CONTROL	350.	350.		
POSTAGE AND SHIPPING	2,048.	2,048.		
PRINTING AND PUBLICATIONS	1,730.	1,730.		
PUBLIC RELATIONS	1,149.	1,149.		
RENT EXPENSE	1,536.	1,536.		
SCHOLARSHIPS	2,025.	2,025.		
STATE LODGE DUES	1,444.	1,444.		
TELEPHONE	700.	700.		
TO	TAL \$ 23,221.	\$ 23,221.	\$ 0.	\$ 0.