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### **Return of Organization Exempt From Income Tax**

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A	For th	ne 2010 c	alend	ar year, or tax y	ear begin	ning Apr	1	,;	2010, an	d ending	Mar	31		, 2011	
		f applicable		C Name of organiz				529				D Employ	er ident	ification Number	
	Ad	dress chang	ge	Doing Business	As							59-0	233	010	
	Na	me change	. [	Number and stre	et (or POb	ox if mail is not d	lelivered to s	treet addr)		Room/si	ute	<b>E</b> Telepho	ne num	ber	
		itial return	1	P. O. Box	333							(863	3) 3	85-8647	
	Те	rminated		City, town or cou	ıntry				State ZIF	Code + 4	· ·			-	
		nended retu	1LU	Sebring					FL 3	3871-	0333	G Gross re	ceipts	s 648,94	8.
	Ħ	plication pe	1	F Name and addre	ess of principa	al officer		_				a group retur			s X No
			- 1	Same as C Abov	ePOB	30x 333	Sebr	ina	FL 3	3871		affiliates incl		Ye	s No
$\overline{}$	Tax-	exempt stat			501(c) (		nsert no.)	4947(a)		527	If 'No,'	attach a list	(see ins	structions) —	_
<u> </u>		bsite: ►			1 00.(0). (			<u>., , , , , , , , , , , , , , , , , , , </u>	.,, .,		H(c) Group	exemption nu	mber •	•	
K		of organiza		X Corporation	Trust	Association	Other -		I Vear		on 199			legal domicile E	·T.
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1 0				e the organizati	on's missi	ion or most s	ignificant	activities:	Lode	re Sv	stem C	nerati	ODS	for	
_	•			e member k			igiiiiicaiii	activities.	700	A- 51.	700111 0	Potate	2.10	-=	. – – – –
Activities & Governance		2222	~= <u>.</u>		2000111	=									
ma															
)Ve	2	Check th	his bo	x ► I if the c	rganizatio	on discontinue	ed its ope	rations or	disposed	d of more	than 25	% of its ne	t asse	ets.	
ğ				ing members of	-		•		,				3	7	
9	4	Number	of inc	lependent voting	members	s of the gover	rning body	(Part VI,	lıne 1b)				4	7	
/itie				of individuals er			ar 2010 (F	Part V, line	2a)					9	
€				of volunteers (e										155	
⋖ ,	l			d business reve									7 a		0.
	<u>b</u>	Net unre	elated	business taxabl	e income	from Form-99	Fitine	34	?		<del></del>		7 b		
	_	_						- <b>-</b>			F	rior Year		Current	
•	8	Contribu	utions	and grants (Par	t VIII, line	(45)	A 199	Š			<b>-</b>	78,4			4,362.
בת				ce revenue (Pa				- • •    •			<u> </u>	39,9		11	6,198.
Revenue	10			come (Part VIII,				S			<b> </b>		12.		102.
ш.	11			(Part VIII, colu – add lines 8 tl					\ l.ma 1:	2)	<u> </u>	129,7			6,740.
=	12								), line i	<u> </u>	+	248,2			7,402.
Z0Z	ı			milar amounts p				-3)			<u> </u>	29,1	<u>91.</u>		7,778.
වෙ	ı			to or for member				(8)	1	٥\	<u> </u>				0 140
				r compensation				umn (A), I	nes 5-1	U)	<b> </b>	84,9	02.	8	0,149.
JUL ∬ Expenses	16a	Professi	ional f	undraising fees	(Part IX, o	column (A), li	ine 11e)		•	•	ļ				
⊋ક્ષ	b	Total fur	ndrais	ıng expenses (F	Part IX, co	lumn (D), line	e 25) 🟲 💄		22	<u>,097.</u>					
	17	Other ex	xpens	es (Part IX, colu	ımn (A), lı	nes 11a-11d,	11f-24f)				L	180,0	54.	20	3,163.
	18	Total ex	pense	s Add lines 13	-17 (must	equal Part IX	, column	(A), line 2	5)		.[	294,1	47.	31	1,090.
Ž	19	Revenue	e less	expenses Subt	ract line 1	8 from line 1	2					-45,8	98.		3,688.
\$ 8 g											Beginni	ng of Curren	t Year		
3 <b>1</b> 1	20	Total as	sets (	Part X, line 16)								539,3			2,208.
D 👯	21	Total lia	bilitie	s (Part X, line 2	6)							80,0	88.		6,607.
žį	22	Net asse	ets or	fund balances.	Subtract I	ıne 21 from lı	ne 20					459,2	89.	41	5,601.
Pa	rt II			e Block							<u> </u>	<u> </u>		L	37 - 3 - 3
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Form 990 (2010) BPOE Sebring # 1529
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		<b>X</b> _
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? <i>If 'Yes,' complete Schedule D, Part II</i>	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		_x
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			£,
á	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? <i>If 'Yes,' complete Schedule D, Part VI</i>	11 a	х	
i	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	11 b		х
•	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		х
•	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		Х
1	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		х
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		х
	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		x
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	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		x
	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		<u>x</u> _
	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		х
	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		х
	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	x	
	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_	х	
	a Did 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		

Form 990 (2010) BPOE Sebring # 1529

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	х_	
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		<u>x</u>
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? <i>If 'Yes,' complete Schedule J</i>	23		x
24 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 complete Schedule K. If 'No, 'go to line 25	24a		_x_
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .	24b		
c	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		
25 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		
t	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		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
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a	_	<u> </u>
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV .	28b		x
•	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		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		<u> </u>
30	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>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		<u>X</u> _
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? 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		X
ā	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		
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		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	х	
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# Form 990 (2010) BPOE Sebring # 1529 Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V				ᄔ
1 1	r		Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	11	. 1		
<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 vendors and reportable (gambling) winnings to prize winners?	gaming	1 c		
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	9			
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	Х	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X
<b>b</b> If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O		3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authori financial account in a foreign country (such as a bank account, securities account, or other financial account	ty over, a	4a		х
<b>b</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 Account	its.	•		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	. 1	5 b		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5c		<u> </u>
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?	ızatıon	6a	х	
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or g	ıfts were		-	
not tax deductible?	•	6b	<u> X</u>	<u> </u>
7 Organizations that may receive deductible contributions under section 170(c).				
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods a	and			
services provided to the payor?		7a	<u> X</u>	<b> </b>
<b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	ĺ	7Ь	Х	<u> </u>
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was requ Form 8282?	red to file	7с		x
d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d				
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract	.7	7 e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	ĺ	7 f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 889 as required?	)9	7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization fil Form 1098-C?	e a	7 h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organization supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess bus holdings at any time during the year?	s. Did the iness	8		
9 Sponsoring organizations maintaining donor advised funds.	•	Ů		
a Did the organization make any taxable distributions under section 4966?		9a		i
<b>b</b> Did the organization make a distribution to a donor, donor advisor, or related person?	ļ	9b		
10 Section 501(c)(7) organizations. Enter				
a Initiation fees and capital contributions included on Part VIII, line 12.				
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities				
11 Section 501(c)(12) organizations. Enter				
a Gross income from members or shareholders				
b Gross income from other sources (Do not net amounts due or paid to other sources		1		
against amounts due or received from them )				
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a	L	<del>                                     </del>
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year . 12b	<del></del>			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.				
a Is the organization licensed to issue qualified health plans in more than one state?		13a		<del> </del>
Note. See the instructions for additional information the organization must report on Schedule O.				
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		<u> </u>		<b> </b>
14a Did the organization receive any payments for indoor tanning services during the tax year? .		14a	<u> </u>	X
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	<u>.                               </u>	14b	<u> </u>	<u>L</u>

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 Yes 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 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee? 2 X 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? 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 х Does the organization have members or stockholders? 6 Х 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? Х 7 a b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7 b X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a 8ь Х b Each committee with authority to act on behalf of the governing body? 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 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10 a 10a Does the organization have local chapters, branches, or affiliates? 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? Х 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13 X 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise 12b X c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 120 Х Does the organization have a written whistleblower policy? 13 X 14 X 14 Does the organization have a written document retention and destruction policy? 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 15a X **b** Other officers of key employees of the organization 15<sub>b</sub> X If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16 a Х b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16<sub>b</sub> Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. Own website Another's website X Upon request 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. State the name, physical address, and telephone number of the person who possesses the books and records of the organization 2618 Kenilworth Blvd Sebring FL 33870 (863) 385-8647

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Form <b>990</b> (2010)	RPOF	Sehring	#	1529

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Form 990 (2010)

## Part VII | 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 employees.'
- 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.

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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	nor any r	<u>elated</u>	org	anız	atio	n com	pen	sated any current office	cer, director, or trustee	<u>.                                    </u>
(A)	(B)	(C)						(D)	(E)	(F)
Name and title	Average hours per week (describe hours for related	علامارد عا عرامارد عا	g anstitutional trustee		a key employee	hat appl High est o	y) 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
	organiza- tions in Schedule O)	trustee	ral foustee		cyrre	High est compensated employee				organizations
(1) Joseph Bryant 1 Year Trustee	10.00	v		x				0.	0.	0
	10.00			^	┢			0.1		<u> </u>
(2) Richard Stover 2 Year Trustee	10.00	x		х				0.1	0.	0.
(3) John Holmes				_						
3 Year Trustee	10.00	Х		X_			_	0.	0.	0.
(4) Heide Stover										
Exalted Ruler	30.00	х		х	İ			0.	0.	0.
(5) Richard Holmes										
Esteemed Leading Knight	30.00	Х						0.	0.	0.
(6) Helen McElroy										
Esteemed Loyal Knight	10.00	Х		X			<u> </u>	0.	0.	0.
_O Ronald Schilffarth				1	1					
Esteemed Lecturing Knight	10.00	<u> </u>	<u> </u>	X_	<u> </u>		<u> </u>	0.	0.	0.
(8) Donna Barnhart			Ì			1	1	1		
Lodge Secretary	20.00		ļ	Х	_	-		2,077.	0.	<u> </u>
(9) Joan Roth		i	ł	1	}		l			
Lodge Treasurer	20.00		<u> </u>	X	<u> </u>	—	<u> </u>	2,508.	0.	0.
(10)									İ	
(11)										
(12)	:				Γ					<del></del>
(13)										
(14)					-					
(15)										
(16)					Γ					<del></del>
(17)			-							
<del></del>	L		ᅳ	Ц.			ь.	<del></del>	L	

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12/21/10

Part VII   Section A. Officers, Directors, Trus	tees, F	(ey	Em	plo	ye	es,	and	d Highest Con	pensated Emp	loyees (cont)
(A)	(B)	• • • • • • • • • • • • • • • • • • • •						(D)	(E)	(F)
Name and title	Average hours				_			Reportable compensation from	Reportable compensation from	Estimated amount of other
	hours per week (describe hours for related organi- zations in Sch O)	or di	nstit	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the
	related	ecto	ution	er.	emp	est c	र्ष	<b>,</b>	<b>,,</b>	organization and related
	zations	, Š	nal tr		loyer	Ę,	1			organizations
	Sch O)	stee	uste		"	ensa	ļ			
	Į.		"			ê	-			
(10)	<b>├</b> ─┈	├-					-			
_(18)	┨			,	Į į		l			
	<del> </del> -	├─	Н							
	i						ı			
(20)	<u> </u>	1	Н							- <del></del>
	1									
(21)			П							
	1									
(22)										
	]									
(23)										
		<u> </u>			<u>L</u>					
(24)	]									
	<u> </u>	<u> </u>								
_(25)	1			]						
		<b>Ļ</b> _		_	ļ			<del></del>		
(26)	4	Ì								
	<del> </del>	<u> </u>	ļ.,	<u> </u>	<u> </u>	[		<del></del>		
(27)	4				Ì					[
(400)	<del> </del> -	├─	┝	<del>                                     </del>	├	$\vdash\dashv$			<del></del>	<del> </del> -
(28)	-}	Ì				i		Į.		
(20)		├-		-	$\vdash$	$\vdash$				
_(29)	1			ĺ						
1 b Sub-total	<del></del>	<u> </u>		·	<u> </u>		•	4,585.	0.	0
c Total from continuation sheets to Part VII, Section	Δ						▶	170001		<u>-</u>
d Total (add lines 1b and 1c)	-				•		•	4,585.	0.	0
2 Total number of individuals (including but not limited	to thos	e lis	ted a	abov	/e) v	vho r	rece		100,000 in reportabl	
from the organization   0					·				•	·
										Yes No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in	or truste	e, k	еу е	mpl	oye	e, or	hıgl	hest compensated	l employee	
on line 1a? If 'Yes,' complete Schedule J for such in	dıvıdual						•			3 X
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater the	oortable	com	pen	sati	oņ a	nd o	ther	compensation from	om	1 1
the organization and related organizations greater tr	ıan \$150	J,000	J <i>? 1</i> 7	rre	S' C	ompi	iete	Schedule J for		4 X
5 Did any person listed on line 1a receive or accrue or	omnens	ation	fror	m aı	יו עח	nrela	ated	organization or it	ndıvıdual	
for services rendered to the organization? If 'Yes,' c	omplete	Sch	edu	le J	for :	such	per	son		_5 X
Section B. Independent Contractors										
Complete this table for your five highest compensation from the organization	ed indep	end	ent c	conti	racto	ors tl	hat	received more tha	in \$100,000 of	
(A)								(B	$\overline{}$	(C)
Name and business addres	ss							Description	of services	Compensation
2 Total number of independent contractors (including	but not l	limite	ed to	tho	se l	ısted	da b	ove) who received	l more than	
\$100,000 in compensation from the organization >	0									

Par	t VIII   Statement of Revenue	<del></del>	(m)		(5)
 		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
200	1 a Federated campaigns 1 a				
NA ST	b Membership dues 1b 7,999.	]			
£ §	c Fundraising events 1c 4,863.	l l			ļ
FA	d Related organizations . 1d 1,500.	]			
S,G	e Government grants (contributions) 1 e				
NO.	f All other contributions gifts grants and	]	ì		
뛆뵘	f All other contributions, gifts, grants, and similar amounts not included above				
E O	g Noncash contributions included in lns 1a-1f: \$	]			
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	h Total. Add lines 1a-1f	14,362.			
3	Business Code				
KEN	2a Membership Dues and Fees 900099	60,074.	60,074.	0.	0.
#	b Lodge Member Activities 900099	22,410.	22,410.	0.	0.
8	c Florida Elks Golf Tournament 900099	33,714.	33,714.	_0.	0.
SER	d				
AR.	e				
SG	f All other program service revenue				
<u>E</u>	g Total. Add lines 2a-2f	116,198.			
	3 Investment income (including dividends, interest and			_	
	other similar amounts)	102.	0.	0.	102.
	4 Income from investment of tax-exempt bond proceeds	` <del></del>		<u> </u>	<del> </del>
	5 Royalties	·	<del>-</del>		<del> </del>
	(i) Real (ii) Personal	-			
	<b>6a</b> Gross Rents <b>4,053.</b>	-			
	b Less: rental expenses	-			
	c Rental Income or (loss) 4, 053.	4 053	4 052		
	d Net rental income or (loss)	4,053.	4,053.	0.	0.
	7 a Gross amount from sales of assets other than inventory	-			
		1			
	b Less cost or other basis and sales expenses .				
	c Gain or (loss)	-			
	d Net gain or (loss)				
JE	8a Gross income from fundraising events		!		
	(not including $\frac{4,863}{}$ of contributions reported on line 1c).				1
OTHER REVEN	See Part IV, line 18 a 17, 136.	1			
ER	b Less: direct expenses b 7,446.	4			
P	c Net income or (loss) from fundraising events	9,690.		0.	9,690.
		7,030.		<u> </u>	7,030.
	9a Gross income from gaming activities See Part IV, line 19 a 330,075.				
	b Less: direct expenses b 289, 265.				
	c Net income or (loss) from gaming activities	40,810.	0.	0.	40,810.
	10a Gross sales of inventory, less returns				
	and allowances . a 167,022.				
	b Less: cost of goods sold . b 84,835.	1		_	
	c Net income or (loss) from sales of inventory .	82,187.	82,187.	0.	0.
	Miscellaneous Revenue Business Code				
	11a				<u> </u>
	b				
	C	<del> </del>			
	d All other revenue	<del> </del>		<u></u>	<del> </del>
	e Total. Add lines 11a-11d				<del> </del>
	12 Total revenue. See instructions	267,402.	202,438.	0.	50,602.

Page 10

#### 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).

(D) Fundraising (B) Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. Management and Program service Total expenses expenses general expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, 27,778 27,778 line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 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, 5,855 5,855 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) 80. 64,479 33,629 30,770 7 Other salaries and wages Pension plan contributions (include section 401(k) and section 403(b) employer contributions) 2,033 1,199 Other employee benefits 834. 9. 10 Payroll taxes 7,782. 4,591 3,182 11 Fees for services (non-employees). a Management **b** Legal 1,070. 1,070 c Accounting **d** Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other 260 260 12 Advertising and promotion 6,712 6,712 13 Office expenses Information technology 15 Royalties 65,152 34,991 8,441 21,720. 16 Occupancy 17 3,100. 3,100 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 2,998. 2,998 19 Conferences, conventions, and meetings 20 Interest 12,529. 12,529 21 Payments to affiliates 21,595 21,595 22 Depreciation, depletion, and amortization 916. 23 916 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.) 49,085 a Lodge Member Activities 49,085 b FL Elks Golf Tournament 20,388. 20,388 c Operating Supplies Social 8,214. 7,926. 288. d Community Service Programs 2,710. 2,710. e Member Newsletter 6,275. 6,275. <u>2,15</u>9. 1,190. f All other expenses 969 311,090 25 Total functional expenses. Add lines 1 through 24f 208,649. 80,344 22,097. Joint costs. Check here ► 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

Pa	rt X	Balance Sheet				
			6	(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		90,695.	1	76,814.
	2	Savings and temporary cash investments		47,741.	2	28,272.
	3	Pledges and grants receivable, net .	[		3	
	4	Accounts receivable, net			4	
	5	Receivables from current and former officers, directors and highest compensated employees. Complete Part I			5	
	6	Receivables from other disqualified persons (as define persons described in section 4958(c)(3)(B), and contrisponsoring organizations of section 501(c)(9) voluntary organizations (see instructions)	buting employers and		6	
A	7	Notes and loans receivable, net	·		7	
A S E T	8	Inventories for sale or use	·	11,878.	8	16,440.
Ţ	9	Prepaid expenses and deferred charges	ľ	9,118.	9	10,120.
ŭ			1 1			
	10a	Land, buildings, and equipment, cost or other basis Complete Part VI of Schedule D	10a 842,689.			· · · · · · · · · · · · · · · · · · ·
	b	Less <sup>1</sup> accumulated depreciation .	10b 483,451.	378,621.	10 c	<u>359,238.</u>
	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		1,324.	15	<u>1,324.</u>
	16	Total assets Add lines 1 through 15 (must equal line	34)	539,377.	16	492,208.
	17	Accounts payable and accrued expenses		2,607.	17	<u>3,687.</u>
	18	Grants payable			18	·
	19	Deferred revenue		77,477.	19	72,920.
Ļ	20	Tax-exempt bond liabilities		<u> </u>	20	_ <del></del>
A B	21	Escrow or custodial account liability. Complete Part I	V of Schedule D	- <del>-</del>	21	
į Į Ţ	22	Payables to current and former officers, directors, trus highest compensated employees, and disqualified per of Schedule L	stees, key employees, sons Complete Part II		22	
Ė	23	Secured mortgages and notes payable to unrelated the	ırd nartıes		23	
٠	24				24	
	25	Other Irabilities. Complete Part X of Schedule D	parties	4.	25	
	26	Total liabilities. Add lines 17 through 25		80,088.	26	76,607.
N	1	Organizations that follow SFAS 117, check here	X and complete lines	00,0001		, 07 007.
Ĕ		27 through 29 and lines 33 and 34.				
A	27	Unrestricted net assets		409,022.	27	406,444.
ASSETS	28	Temporarily restricted net assets			28	
	29	Permanently restricted net assets		50,267.	29	9,157.
R	1	Organizations that do not follow SFAS 117, check he	re ► and complete			
FUZD		lines 30 through 34.	<u> </u>			
Ŋ	30	Capital stock or trust principal, or current funds		<u> </u>	30	
B A L	31	Paid-in or capital surplus, or land, building, or equipm	nent fund .		31	
Ä	32	Retained earnings, endowment, accumulated income,	or other funds		32	
YZCES	33	Total net assets or fund balances		459,289.	33	415,601.
<u> </u>	34	Total liabilities and net assets/fund balances		539,377.	34	492,208.

BAA

Form **990** (2010)

Forn	1990 (2010) BPOE Sebring # 1529 59-02330	10	Pa	age 12
Par	t XI Reconciliation of Net Assets		-	
	Check if Schedule O contains a response to any question in this Part XI .			Щ
1	Total revenue (must equal Part VIII, column (A), line 12)		67,4	
2	Total expenses (must equal Part IX, column (A), line 25)	3	311,090.	
3	Revenue less expenses Subtract line 2 from line 1		43,6	
4	Other changes in net assets or fund balances (explain in Schedule O)  Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))  6		59,2	<u> 289.</u>
5	Other changes in net assets or fund balances (explain in Schedule O)			
6		4	15,6	501.
Pai	t 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 Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.	_		
22	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	Х	
1	Were the organization's financial statements audited by an independent accountant?	2b		х
(	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2 c	x	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		-	
(	If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both			
	X Separate basis Consolidated basis Both consolidated and separate basis	ļ	<u> </u>	
3	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	. 3a		х
1	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3 b		

BAA

Form **990** (2010)

## SCHEDULE D

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.

OMB No 1545-0047

Open to Public Inspection Employer identification number

Name of the organization 59-0233010 BPOE Sebring # 1529 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 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? 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 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) . 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic 2d 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? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 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)(ii)? Yes 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 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 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 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

► S

#### Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply) Public exhibition Loan or exchange programs Ь Scholarly research Other Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection Part IV Escrow and Custodial Arrangements. Complete if organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21, 1a is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No b If 'Yes,' explain the arrangement in Part XIV and complete the following table: Amount c Beginning balance 1 c d Additions during the year 1 d e Distributions during the year 1 e 1f f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? Yes No b If 'Yes,' explain the arrangement in Part XIV Part V Endowment Funds. Complete if the organization answered 'Yes' to Form 990. Part IV. line 10 (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1 a Beginning of year balance **b** Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or guasi-endowment **b** Permanent endowment c Term endowment ► 3a Are there endowment funds not in the possession of the organization that are held and administered for the Yes No organization by. (i) unrelated organizations 3a(i) (ii) related organizations 3a(ii) b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R? **3b** 4 Describe in Part XIV the intended uses of the organization's endowment funds. | Part 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 (investment) basis (other) depreciation 1a Land 95,037 95.037. 314,103 225,995 **b** Buildings 540,098 c Leasehold improvements d Equipment 200,354 169,348 31,006. 7,200 7,200. e Other Total, Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c), 359,238.

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Schedule D (Form 990) 2010

Part VII	Investments-Other Securities. See F	orm 990, Part X, III	ne 12.	
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valua Cost or end-of-year man	tion:
(1) Financi	ial derivatives		Cost of end-of-year mai	ket value
	v-held equity interests			
<u>_(B)</u>				
<u>(C)</u>				
(D)			<del></del>	
<u>(E)</u>				
(F)				
(H)				
<u></u>				
Total. (Colui	mn (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	tion:
(1)			Cost of end-of-year mai	NCE VAILE
(2)				
(3)				
(4)				
(5)				
(6)				<del></del>
	<del></del>			<del> </del>
(8)				
(10)		<u> </u>		
	nn (b) must equal Form 990, Part X, column (B) line 13)			
Part IX	Other Assets. (See Form 990, Part X,	line 15)		
	(a) De	scription		(b) Book value
(1)		<del></del>	· · · · · · · · · · · · · · · · · · ·	
(2)	<del></del>	<del></del>	<del></del>	<del> </del>
<u>(3)</u> <u>(4)</u>		<del></del>		
(5)			<del></del>	
(6)				<del></del>
_(7)				
(8)				
(9)				
(10)				
	lumn (b) must equal Form 990, Part X, column(B)		<u> </u>	·
Part X	Other Liabilities. (See Form 990, Part  (a) Description of liability	(b) Amount		
(1) Fede	eral income taxes	(b) Amount	<del></del>	
(2)	and meetic taxes			
(3)				
(4)				
(5)				
(6)				
(7)				
(8)	<del></del>			
<u>(9)</u>		<del></del> -	<del></del>	
<u>(10)</u> (11)		<del></del>		
	mn (b) must equal Form 990, Part X, column (B) line 25)	<b>•</b>		
3 3 3 3 3 7 3 5 7 5 7 5 7 5 7 5 7 5 7 5				·

<sup>2.</sup> 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 under FIN 48 (ASC 740).

Sche	dule D (Form 990) 2010 BPOE Sebring # 1529	59-0233010	Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements		
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		
Par	t XII   Reconciliation of Revenue per Audited Financial Statements With Revenue pe	r Return	
1	Total revenue, gains, and other support per audited financial statements .	. 1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments 2a		
t	Donated services and use of facilities . 2b		
C	: Recoveries of prior year grants		
C	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 VIII, line 12, but not on line 1.		
	Investments expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Part XIV.)		
	Add lines 4a and 4b	4c	
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	
Par	t XIII   Reconciliation of Expenses per Audited Financial Statements With Expenses	per Return	
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
	Donated services and use of facilities	<b></b>	
	Prior year adjustments . 2b		
	Other losses 2c	<b></b> -	
	d Other (Describe in Part XIV.)		
•	e Add lines 2a through 2d		
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
	a Investments expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIV)	<del> </del>	
	o Other (Describe in Part XIV )  c Add lines <b>4a</b> and <b>4b</b>	4c	
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	
	t XIV   Supplemental Information		
Part	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, 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 compladditional information	IV, lines 1b and 2b; lete this part to provide	
BAA	TEEA3304 02/11/11	Schedule <b>D</b> (Form 9	90) 2010

oci ledule <b>D</b>	(Louin ago) 5010 BLOF 26DITUG # 125a	23-0233010	Page 5
Part XIV	Supplemental Information (continued)		
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<b></b> .			
		<b>-</b>	
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#### **SCHEDULE G** (Form 990 or 990-EZ)

# Supplemental Information Regarding Fundraising or Gaming Activities

Employer identification number

OMB No 1545-0047 2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Complete if the organization answered'Yes' to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ. See separate instructions.

59-0233010 BPOE Sebring # 1529 Fundraising Activities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations Solicitation of non-government grants þ Internet and email solicitations f Solicitation of government grants Phone solicitations Special fundraising events C ď In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key Yes No employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? **b** If 'Yes,' list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (i) Name and address of individual (ii) Activity (iii) Did fundraiser (iv) Gross receipts (or retained by) (vi) Amount paid to have custody or control from activity fundraiser listed in (or retained by) or entity (fundraiser) of contributions? column (i) organization Yes No 1 2 3 4 5 6 7 8 9 10 Total List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Page 2

Par	<u>( II )</u>	reported more than \$15,000 of fu and 6a. List events with gross rec	indraising event co	ntributions and gros	irm 990, Part IV, III ss income on Form	ne 18, or 990-EZ, lines 1
RE			(a) Event #1  Canisters at Bingo (event type)	(b) Event #2 Lunch Club Weds (event type)	(c) Other events 4 (total number)	(d) Total events (add column (a) through column (c))
MCZM<	1	Gross receipts .	4,863.	14,130.	3,006.	21,999.
Ě	2	Less Charitable contributions	4,863.			4,863.
	3	Gross income (line 1 minus line 2)	0.	14,130.	3,006.	17,136.
	4	Cash prizes				
n	5	Noncash prizes				
D I R E C T	6	Rent/facility costs				
	7	Food and beverages		6,076.	1,370.	7,446.
X P	8	Entertainment .				
EXPENSES	9	Other direct expenses	L			
S	10 11		• ,,		. ►	7,446. 9,690.
Par	t III		ation answered 'Ye	s' to Form 990, Par	t IV, line 19, or rep	
REVENUE			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
E U	1	Gross revenue	293,615.	36,460.		330,075.
_ E	2	Cash prizes	254,236.	26,450.		280,686.
D P E N S E S	3	Non-cash prizes .				
C S T E S	4	Rent/facility costs .	<u> </u>			
	5	Other direct expenses	7,178.	1,401.		8,579.
	6	Volunteer labor .	X Yes 100.00% No	X Yes 100.00% No	Yes %	
	7	Direct expense summary Add lines 2 three	ough 5 in column (d)			289,265.
	8	Net gaming income summary. Combine li	ines 1, column (d) and I	ine 7 .		40,810.
	aisti bif'N	er the state(s) in which the organization op the organization licensed to operate gaming lo,' explain	activities in each of the	ese states?		Yes X No
	 a We	re any of the organization's gaming license 'es,' explain:	s revoked, suspended o	r terminated during the	 tax year?	Yes X No

Schedule <b>G</b> (Form 990 or 990-EZ) 2010 BPOE Sebring # 1529	59-0233010	) Page <b>3</b>
11 Does the organization operate gaming activities with nonmembers?		Yes X No
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity administer charitable gaming?	formed to	Yes X No
13 Indicate the percentage of gaming activity operated in: a The organization's facility	13 a	100.00%
<b>b</b> An outside facility	13b	
14 Enter the name and address of the person who prepares the organization's gaming/special events books		
Name ► Joan Roth, Treasurer  Address ► PO Box 333 Sebring, FL 33871	<i></i>	
15a Does the organization have a contact with a third party from whom the organization receives gaming reve  b If 'Yes,' enter the amount of gaming revenue received by the organization ► \$	_	Yes X No
Name •		
Address ►		
16 Gaming manager information:		
Name ► <u>Heide Stover</u>		
Gaming manager compensation ► \$0.		
Description of services provided  Coordinator		
▼ Director/officer		
17 Mandatory distributions		
a Is the organization required under state law to make charitable distributions from the gaming proceeds to state gaming license?	L.	Yes X No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations organization's own exempt activities during the tax year ► \$	or spent in the	
Supplemental Information. Complete this part to provide the explanations recolumns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as a this part to provide any additional information (see instructions).	ured by Part I applicable. Also	, line 2b, c complete

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	둞	<u>6</u>
	SHEI	Form 9
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Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22. ► Attatch to Form 990.

1545-0047	10
OMB No	20

Open to Public Inspection

**ջ** □ X Yes Employer identification number 59-0233010 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. General Information on Grants and Assistance BPOE Sebring # 1529 Department of the Treasury Internal Revenue Service Name of the organization Part

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to

Part II

Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000.	for any recipient	that received m	ore than \$5,000. C	heck this box if no	one recipient rec	eived more than	\$5,000.
Fart II can be duplicated if additional space is needed	additional space	is needed					<b>A</b>
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) <u>Harry Anna Investment Fun</u> <u>P O Box 49</u> Umatilla FL 32784	59-2825890	501(c)(3)	14,610.				Finan, Support
(2)							
		-					
(3)							
(b)							
(5)							
			•				
<b></b> Φ							
$\omega$							
(8)							
	) and government orc	janizations	i			<b>A</b>	1
3 Enter total number of other organizations	ons						0

Schedule I (Form 990) 2010

TEEA3901 10/29/10

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

age 2	1
59-0233010  The United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Beded.	
Ization answered 'Yes	
complete if the organ	
le United States. C	
r # 1529 Individuals in the Itonal space is ne	
Grants and Other Assistance to Individuals in the Part III can be duplicated if additional space is ne	
schedule I (Form 990) 2010 Partill Grants and Oth Part III can be o	
Schedule I	

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
2					
3					
4					
5					
9					
7	1			-	
Pt_I Line 2 The Lodge is familiar with the work of every one of its	ele uns par to p a <u>miliar with</u>	Lhe work of ev	on required in Part   ery_one_of_its_s	t I, line Z, and any other supported	ler additional information.
	verifies_the_	501(c)(3) stat	us College_s	charities and verifies the 501(c)(3) status. College scholarship funds are	are
awarded and administered by	ministered by	South Florida	Community Col	South Florida Community College, who reports to	- to
the_Lodge_annually_on_the_us	a <u>lly on the u</u>	se of those funds.			
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Schedule I (Form 990) 2010

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

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

OMB No 1545-0047

2010

Open to Public Inspection

Employer identification number

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.

59-0233010 BPOE Sebring # 1529 Pt VI-B, Line 11a The completed 990 is first reviewed by the Auditing and Accounting Committee, who presents it at the next Board of Directors meeting. If approved by the board, it is \_\_ recommended to the general membership for their review and approval at the next regular Lodge meeting Pt VI-C, Line 19 Governing documents, conflict of interest policy, and <u>financial</u> statements are maintained by the Lodge Secretary and will be made available to the public upon request. Pt VI-B, Line 12c Conflicts of interest are defined in the Constitution and \_\_\_Bylaws. Members are required to discuss any conflicts of interest\_\_\_\_ that they might be aware of at any regular meeting. Pt VI-B, Line 15 Compensation of Officers is provided for in the Lodge's \_\_\_\_\_bylaws. All amendments to the bylaws are voted upon by \_\_\_\_\_the membership and subject to review by the Grand Lodge\_\_\_ \_\_\_\_\_Judiciary\_Committee. Pt VI-A, Line 6 By joining the organization, each individual becomes a \_\_\_\_\_\_voting\_member. Pt VI-A, Line 7a The members elect the governing body. Pt VI-A, Line 7b The members approve all significant decisions of the \_\_\_\_\_governing\_body. Pt VI-A, Line 2 Heide Stover and Richard Stover have a family relationship; \_ John Holmes and Richard Holmes have a family relationship. Pt III, Line 4d Promoted the welfare and enhanced the happiness of our members, \_\_\_\_\_and encouraged good fellowship through Lodge activities, recognizing a belief in God and the American Spirit. Membership benefits were provided to 715 members during the year.

**Depreciation and Amortization** (Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return. OMB No 1545-0172

Attachment Sequence No 67

Department of the Treasury Internal Revenue Service Name(s) shown on return

BPOE Sebring # 1529

Identifying number

59-0233010 Business or activity to which this form relates / Form 990EZ Part I **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I 1 Maximum amount (see instructions) Total cost of section 179 property placed in service (see instructions) 2 2 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-4 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0-. If married filing separately, see instructions 5 6 (a) Description of property (b) Cost (business use only) (C) Elected cost Listed property. Enter the amount from line 29 7 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2009 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs) 11 12 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2011. Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property ) (See instructions ) Part II Special depreciation allowance for qualified property (other than listed property) placed in service during the 14 tax year (see instructions) 15 Property subject to section 168(f)(1) election 15 Other depreciation (including ACRS) 16 10,443 Part III MACRS Depreciation (Do not include listed property ) (See instructions) Section A MACRS deductions for assets placed in service in tax years beginning before 2010 17 11,045. If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here . . . Section B -Assets Placed in Service During 2010 Tax Year Using the General Depreciation System (a) Classification of property (b) Month and (C) Basis for depreciation (g) Depreciation (e) Convention year placed in service (business/investment use Recovery period only - see instructions) 19a 3-year property 5.0 yrs 962 200 DB 48. **b** 5-year property MO 1,653. 7.0 yrs MQ 200 DB 59. c 7-year property d 10-year property e 15-year property f\_20-year property q 25-year property 25 yrs S/L h Residential rental 27.5 yrs MM S/L property 27.5 yrs MM S/L 39 yrs S/L i Nonresidential real MM property MM S/L Section C - Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System 20 a Class life S/L b 12-year S/L 12 yrs c 40-year 40 yrs S/L MM Part IV Summary (See instructions ) 21 Listed property Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on

the appropriate lines of your return. Partnerships and S corporations — see instructions

For assets shown above and placed in service during the current year, enter

21,595.

22

Form 4562 (2010) BPOE Sebring # 1529 59-0233010 Page 2 Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement ) Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable Section A — Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.) No 24b If 'Yes,' is the evidence written? 24 a Do you have evidence to support the business/investment use claimed? X Yes X Ye<u>s</u> No (c) Business/ investment (b) (i) Elected section 179 cost Basis for depreciation (business/investment Type of property (list vehicles first) Date placed Cost or Recovery period Method/ Depreciation deduction in service other basis Convention use use only) percentage Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) Property used more than 50% in a qualified business use: 27 Property used 50% or less in a qualified business use Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 28 Add amounts in column (i), line 26 Enter here and on line 7, page 1 29 Section B — Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other 'more than 5% owner,' or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles (a) (b) (c) (d) **(f)** Total business/investment miles driven Vehicle 6 Vehicle 1 Vehicle 2 Vehicle 3 Vehicle 4 Vehicle 5 during the year (do not include commuting miles) Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year Add lines 30 through 32 Yes Yes No No Yes No Yes No Yes No Yes Νo Was the vehicle available for personal use during off-duty hours? Was the vehicle used primarily by a more than 5% owner or related person Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions) Yes No Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? Do you meet the requirements concerning qualified automobile demonstration use? (See instructions ) Note: If your answer to 37, 38, 39, 40, or 41 is 'Yes,' do not complete Section B for the covered vehicles. | Amortization (1) (a) (b) (c) (d) (e) Description of costs Date amortization Amortizable Code Amortization Amortization begins period or percentage for this year 42 Amortization of costs that begins during your 2010 tax year (see instructions): Amortization of costs that began before your 2010 tax year 43

44

Total. Add amounts in column (f). See the instructions for where to report

44

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 1 (continued)

Briefly describe the organization's mission:

members; to quicken the spirit of American patriotism; to cultivate good fellowship; to perpetuate itself as a fraternal organization and to provide for its government, the BPOE will serve the people and communities through benevolent programs, demonstrating that Elks Care and Elks Share.