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. Form **990**

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 2010

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Ā	F	For the 2	010 calen	dar year, or tax year beginning Apr 1 , 2010, and ending Mar 31	, 2011	Ĺ		
В		Check if app			loyer Identification N	_		
	ĺ		s change)	-0018700			
		Name o			phone number			
		Initial re	•		07) 745-39	950		
		Termin		<u> </u>				
			ed return	Wasilla AK 99654 G Gross	s receipts \$ 610	1.249		
		Ħ	ition pending	Lucy to				
		Аррііса	ition penang	Perry Streeter PO Box 875715 Wasilla AK 99687 H(b) Are all affiliates in		Yes No		
-		Tax-exem	int status	501(c)(3) X 501(c) (8) ◀ (insert no.) 4947(a)(1) or 527	st (see instructions)			
<u>:</u>		Website		ww.bpoe.mtaonline.net H(c) Group exemption	number ►			
K	_		rganization		State of legal domic			
_			Summar		State of legal doffic	ile AIX		
[3	<u> </u>			be the organization's mission or most significant activities: Charitable and Frat	ernal			
				ships, assistance to youth, elderly and poor of community		donations		
	2			ols, youth programs, local food bank and other community				
	<u> </u>			s, social and recreational opportunities to members.	-	· -		
	5		eck this bo		net assets			
(7			oting members of the governing body (Part VI, line 1a)	3	5		
3	2			dependent voting members of the governing body (Part VI, line 1b)	4	5		
-				r of individuals employed in calendar year 2010 (Part V, line 2a)	5	16		
	3			r of volunteers (estimate if necessary)	7a	285		
	`			ed business revenue from Part VIII, column (C), line 12 d business taxable income from Form 990-T, line 34	7a 7b	9,241.		
_	+	D Net	unrelated	Prior Yea		rrent Year		
		8 Cor	ntributions		342.	57 , 477.		
9	3				329.	126,300.		
o i con o			-		023.	4,198.		
å	2				063.	185,772.		
					757.	373,747.		
CO.	T				149.	30,345.		
Õ		14 Ber	nefits paid	to or for members (Part IX, column (A), line 4)	973.	383.		
					284.	130,389.		
SCANNED	200			fundraising fees (Part IX, column (A), line 1 e)				
M				sing expenses (Part IX, column (D), line 25)	, ,			
	3				943.	206,269.		
ไกเ				es Add lines 13-17 (must equal Part W colling (A) illne 25) 366,	349.	367,386.		
=					408.	6,361.		
<u> </u>	8	is Rev	veriue less	Paginning of Curry		nd of Year		
e	2	20 Tot	al accete	(Part X, line 16) OGDEN, UT 1,188,		,138,035.		
≥ ;					822.	369,463.		
018	3			and the control of th	212.	768,572.		
	<u> </u>			re Block	212.1	100,512.		
_					lan and ballat it in the			
cc	mpl	lete Declar	ation of preparation	leclare that I have examined this return, including accompanying schedules and statements, and to the best of my knowled aper (other than officer) by based on all information of which preparer has any knowledge	ge and belief, it is the	ie, correct, and		
				then street	-27-11			
S	ig	n	Signatu	ure of office Date				
H	ler	e 'e	Per	ry Streeter				
				r print name and title				
_			Print/Type p	preparer's name Preparer's signature Date Check	ıf PTIN			
P	ai	d	Teri 1	L. Namtvedt Teria Vantual CA 6/24/11 self-emplo	oyed P0055	8894		
		parer	Firm's name					
		Only	Firm's addr					
		-		Wasilla AK 99687-1625 Phone no	(907)376-	·3576		
M	laγ	the IRS	discuss th	nis return with the preparer shown above? (see instructions)		es No		
_				Reduction Act Notice, see the separate instructions. TEEA0101 03/25/11	F	orm 990 (2010)		

Pai	990 (2010) Benevolent Protective Order of Elks #1842	92-0	01870	00	l	⊃age 2
	t III Statement of Program Service Accomplishments					
	Check if Schedule O contains a response to any question in this Part III					
1	Briefly describe the organization's mission:					
	Charitable and Fraternal					
	Scholarships, assistance to youth, elderly and poor of community	7 _cnr c	ugii_	uona	<u></u>	12
	See Form 990, Page 2, Part III, Line 1 (continued)		- 			-
2	Did the organization undertake any significant program services during the year which were not listed on t	he prior				
_	Form 990 or 990-EZ?			Yes	Х	No
	If 'Yes,' describe these new services on Schedule O					
3	Did the organization cease conducting, or make significant changes in how it conducts, any program servi	ces?		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 t	y expen	ses. Se	ction 5	501(c)	(3)
	and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and expenses, and revenue, if any, for each program service reported	allocatio	ns to o	ners,	ine tot	aı
4:	a (Code:) (Expenses \$ including grants of \$) (Recode:)	evenue	\$)
	Scholarship program established and maintained to provide					
	scholarships for higher education to deserving high school senio					
	Seven scholarships were awarded during the fiscal year.					
4	b (Code:) (Expenses \$) (R	evenue	\$)
	Assistance to youth, elderly and poor of community through donat					
	community schools, youth programs, elderly programs, local food					
	bank and other community based assistance programs. As program					
	provided support to variety of causes, exact number of persons					
	benefited cannot be established.					
		- -				
		- -				
	c (Code:) (Expenses \$ including grants of \$) (R	evenue	Ś			١
	Provided social and recreational opportunities to members of	0101140	-			
4						
4	lodge. 860 members benefited from opportunities.					
4	lodge. 860 members benefited from opportunities.					
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4	lodge. 860 members benefited from opportunities.		 		·	
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4	lodge. 860 members benefited from opportunities.					
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4	lodge. 860 members benefited from opportunities.					
4	lodge. 860 members benefited from opportunities.					
	d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$					

Page 3 Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete 1 Х Schedule A Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions) 2 Х 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 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 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 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 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II 7 X Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D. Part III 8 Х 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 9 X Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If Х 10 'Yes,' complete Schedule D, Part V 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. a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule Х 11 a D. Part VI **b** Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII 11 b X 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 Х 11 c 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 Х 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 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 Х 12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Х 12a Schedule D. Parts XI, XII, and XIII 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 Х 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E 13 Х X 14a Did the organization maintain an office, employees, or agents outside of the United States? 142 **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 Х 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 Х 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, 17 Х column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions) Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, 18 Х lines 1c and 8a? If 'Yes,' complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' 19 Х complete Schedule G, Part III 20 Х 20 a Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H

20 b

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)

Yes No

		i I		l
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	Х	
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		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 complete Schedule K If 'No,'go to line 25	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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	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	s 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		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a 28b		x
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete	28b 28c		X
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 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	28b		X
29 30	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 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 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	28b 28c 29		х х х
29 30	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 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 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	28b 28c 29		X X
29 30 31	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 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 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	28b 28c 29		х х х
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29 30 31 32	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 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 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II 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 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	28b 28c 29 30 31		x x x x x x
29 30 31 32	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 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 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II 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 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V,	28b 28c 29 30 31 32		x x x x x x x
29 30 31 32 33 34	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 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 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II 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 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	28b 28c 29 30 31 32 33 34		x x x x x x
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29 30 31 32 33 34 35	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 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 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II 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 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, IIne 1 Is any related organization a controlled entity within the meaning of section 512(b)(13)? The part of 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, IIne 2 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, IIne 2	28b 28c 29 30 31 32 33 34 35		x x x x x x
29 30 31 32 33 34 35	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 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 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II 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 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1 Is any related organization a controlled entity within the meaning of section 512(b)(13)? 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 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? On onduct more than 5% of its activities through an entity that is not a related organization and that is	28b 28c 29 30 31 32 33 34 35 36 37 38	X	x x x x x x

?ar	Statements Regarding Other IRS Filings and Tax Compliance					
	Check if Schedule O contains a response to any question in this Part V					
				1	Yes	No
1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	12		電影	11 2
t	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1 b	3		企业	
c	Did the organization comply with backup withholding rules for reportable payments to vendors (gambling) winnings to prize winners?	and reportable gaming	110	1 c	X	<u>. i.</u> ,
2 a	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	16			
ŀ	of at least one is reported on line 2a, did the organization file all required federal employment	L	— 	2b	X	.1
•	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see ins				_	, 3.24 1 (
32	Did the organization have unrelated business gross income of \$1,000 or more during the year				Х	
	o If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O				х	
	a At any time during the calendar year, did the organization have an interest in, or a signature of	or other authority over a				
	financial account in a foreign country (such as a bank account, securities account, or other fire the name of the foreign country:	nancial account)?		4a	唱 逐	X
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Fil	nancial Accounts				, F.
5 -	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax		1400	5a ±	-3,7,5	Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelte	-		5b		X
	of It 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	T transaction		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, an	nd did the organization				
	solicit any contributions that were not tax deductible?			6a		X
ŀ	o If 'Yes,' did the organization include with every solicitation an express statement that such connot tax deductible?	ntributions or gifts were		6b		
7	Organizations that may receive deductible contributions under section 170(c).		疊			
á	a Did the organization receive a payment in excess of \$75 made partly as a contribution and pa services provided to the payor?	artly for goods and	**	7a	X	<u> </u>
ŀ	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?			7b	Х	
(Did the organization sell, exchange, or otherwise dispose of tangible personal property for wh Form 8282?	ich it was required to file		7 c		х
•	d If 'Yes,' indicate the number of Forms 8282 filed during the year	7d	2		變變	
•	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal b	penefit contract?		7 e		X
ſ	Did the organization, during the year, pay premiums, directly or indirectly, on a personal bene	efit contract?		7 f		Х
Ç	g If the organization received a contribution of qualified intellectual property, did the organizatio as required?	n file Form 8899		7 g		
ı	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the of Form 1098-C?	organization file a		7 h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting supporting organization, or a donor advised fund maintained by a sponsoring organization, had holdings at any time during the year?	g organizations. Did the ave excess business		8		数式
9	Sponsoring organizations maintaining donor advised funds.				MA-2	1487°
	a Did the organization make any taxable distributions under section 4966?		-	9 a		
	b Did the organization make a distribution to a donor, donor advisor, or related person?		-	9 b		
	Section 501(c)(7) organizations. Enter.		S		25	
	a Initiation fees and capital contributions included on Part VIII, line 12	10a				
	b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				k á
	Section 501(c)(12) organizations. Enter:	<u>,</u>				Maria Maria
	a Gross income from members or shareholders	11a				
	b Gross income from other sources (Do not net amounts due or paid to other sources					
	against amounts due or received from them.)	11b				
12	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of		1	2a	72 (PR)	** *
	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b				1
	Section 501(c)(29) qualified nonprofit health insurance issuers.		3. 3.		3-775	<u>(4)</u>
í	a Is the organization licensed to issue qualified health plans in more than one state?	_	1	3a -∵::-	ا دولا المواج	3 13
	Note. See the instructions for additional information the organization must report on Schedule	e O.	1			
	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	13Ь				
	c Enter the amount of reserves on hand	13c	*	構度	囊	Mar.
14	a Did the organization receive any payments for indoor tanning services during the tax year?		1	4a		<u> X</u>

b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O

Form 990 (2010) Benevolent Protective Order of Elks #1842 92-0018700 Part VI 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. X 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 1 a 1 b b Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Х officer, director, trustee or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors or trustees, or key employees to a management company or other person? X Did the organization make any significant changes to its governing documents 4 Х since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Х 6 X Does the organization have members or stockholders? 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the 7 a governing body? 7b X **b** Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by Ś the following 8a Х a The governing body? **b** Each committee with authority to act on behalf of the governing body? 8b X Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the 9 organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Х 10a Does the organization have local chapters, branches, or affiliates? **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 Х 11 a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. X 12a 12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13 **b** Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise 12b to conflicts? c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 12c 13 X 13 Does the organization have a written whistleblower policy? 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? 15a a The organization's CEO, Executive Director, or top management official 15b Х **b** Other officers of key employees of the organization 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 Х 16a taxable entity during the year? 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 > Alaska 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 X Upon request Own website Another's website

► Della Divelbiss ______2600 N. Barry's Resort Road; Wasilla, ____ AK _ 99654 _____(907) 745-3950

Form 990 (2010)

statements available to the public.

Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial

State the name, physical address, and telephone number of the person who possesses the books and records of the organization

BAA

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

- 1 a 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))			(D)	(E)	(F)
Name and title	Average hours		,	_		that app		Reportable compensation from	Reportable compensation from	Estimated amount of other
	per week (describe hours for related organiza- tions in Schedule O)	ਸਥੇvid ਏ frustee or director	mstitutional trustae	Offi-er	Key emphyee	Highest compensated employee	Forner	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) W. Michael Southcott										
Trustee Chair	0.00	Χ						0.	0.	0.
(2) Kathi Johns	_[
Trustee	0.00	<u>X</u>						0.	0.	0.
(3) Sharon Kircher Trustee	0.00	х					,	0.	0.	0.
(4) Alan Johnson										
Trustee	0.00	Х						0.	0.	0.
(5) Don Peek									_	
Trustee	0.00	Х						0.	0.	0.
(6) Perry Streeter										
Exalted Ruler	0.00			Х				0.	0.	0.
(7) Mary Hastings										
Secretary	40.00			Х		X		_ 10 <u>,6</u> 25.	0.	0.
(8) Cindy Corey										
Leading Knight	0.00			Х				0.	0.	0.
(9) Traci Yates	_									
Loyal Knight	0.00			Х				0.	0.	0.
(10) Larry Vasanoja	0.00			x				0.	0.	0.
(11) Greg Moscibrocki										
Lecturing Knight	0.00			Х				0.	0.	0.
(12) Bill McKillop										
Chaplin	0.00			Х				0.	0.	0.
(13) David Wiles										
Esquire	0.00			Х				0.	0.	0.
(14) Marilyn Grasser										
Inner Guard	0.00			Х				4,375.	0.	0.
(15) Karen Hoverston	_[10	
Tiler	0.00			Х				0.	0.	0.
(16)	-									
(17)		-								
			1					<u> </u>	<u> </u>	

TEFA0107 12/21/10

(A)	(B)			((;)			(D)	(E)	(F)	
Name and title	Average hours			checl				Reportable compensation from	Reportable	Estimated	1
	per week (describe hours for related organi- zations in Sch O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation fror related organization (W-2/1099-MISC)	ns compensati	on on ed
(18)											
(19)											
(20)				_							
(21)											
(22)											
(23)											
(24)						-				-	
(25)											
(26)			_								
(27)											
(28)											
(29)											
1 b Sub-total			•		-		>	15,000.		0.	C
c Total from continuation sheets to Part VII, Section A	١						>				
d Total (add lines 1b and 1c)								15,000.		0.	0
Total number of individuals (including but not limited from the organization ▶ 0	to thos	e lis	ted a	abov	/e) v	vho	rece	eived more than \$	100,000 in report		
 3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such inc 4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater th such individual 	dividual ortable	com	pen	satio	on a	nd o	othe.	r compensation fro		Yes 3	X
 5 Did any person listed on line 1a receive or accrue co for services rendered to the organization? If 'Yes,' co 	mpensa	ation Sch	froi	m ar	ny ui	nrel	ated	l organization or in	idividual	段型 7.** 。	X
Section B. Independent Contractors											
Complete this table for your five highest compensate compensation from the organization	d indep	ende	ent c	contr	acto	rs t	hat	received more tha	n \$100,000 of		
Name and business address	S							Description (of services	(C) Compensatio	'n
					-		_				
											_
2 Total number of independent contractors (including b \$100,000 in compensation from the organization ▶	out not li	mite	ed to	tho	se I	iste	d ab	ove) who received	more than		

Form 990 (2010)

OTHER REVENUE CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	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		
	1a Federated campaigns 1a						
N S	b Membership dues . 1b 8,650.						
S S	c Fundraising events 1c						
₹¥.	d Related organizations 1 d						
2 2							
SIS	e Government grants (contributions)						
Ĕ베	f All other contributions, gifts, grants, and						
문히	similar amounts not included above 1f 48,827.						
동의	g Noncash contributions included in lns 1a-1f \$						
	n Total. Add lines 1a-11	57,477.					
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Business Code	1.40	140				
2	2a Pool Table 722410	148.	148.	0.	0.		
m E	b Kitchen 722100	0.	0.	0.	0.		
≥	c Regular Dues 900099	64,450.	64,450.	0.	0.		
SE	d Lodge Activities Income 713990	30,038.	30,038.	0.	0.		
AM	e Dining Room 532000	31,664.	31,664.	0.	0.		
20	f All other program service revenue						
<u>«</u>	g Total. Add lines 2a-2f ▶	126,300.					
	3 Investment income (including dividends, interest and	4 400	2 225		0.63		
	other similar amounts)	4,198.	3,335.	0.	863.		
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties				-		
	(i) Real (ii) Personal						
	6a Gross Rents						
	b Less ⁻ rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)	 					
	7a Gross amount from sales of (i) Securities (ii) Other						
	assets other than inventory						
	b Less: cost or other basis						
	and sales expenses						
	c Gain or (loss)				ļ. ———————		
	d Net gain or (loss)						
	8a Gross income from fundraising events						
N	(not including \$						
E	of contributions reported on line 1c).						
8	See Part IV, line 18 a				•		
H	b Less: direct expenses b				 		
٥	c Net income or (loss) from fundraising events .						
	9a Gross income from gaming activities See Part IV, line 19 a 138,393.						
	b Less ⁻ direct expenses b 110,322.						
	c Net income or (loss) from gaming activities	28,071.	0.	7,863.	20,208.		
	10a Gross sales of inventory, less returns						
	and allowances a 282,503.						
	b Less. cost of goods sold b 126,180.						
	c Net income or (loss) from sales of inventory	156,323.	156,323.	0.	0.		
	Miscellaneous Revenue Business Code						
	11a						
	b						
	c						
	d All other revenue	1,378.	0.	1,378.	0.		
	e Total. Add lines 11a-11d	1,378.			ļ <u>-</u>		
	12 Total revenue. See instructions	373.747.	285.958.	9,241.	21,071.		

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)

Do i	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	16,401.	16,401.		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	13,944.	13,944.		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				_
4	Benefits paid to or for members .	383.	383.		
5	Compensation of current officers, directors, trustees, and key employees	15,000.		15,000.	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	102,945.	96,838.	6,107.	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits .	10.44	40.00		
10	Payroll taxes	12,444.	10,661.	1,783.	
	Fees for services (non-employees)				
	ı Management . D Legal				
	: Accounting	6,625.	4,833.	1,792.	
	Lobbying	0,020.	1,0001		
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
ç	Other	4,575.	4,400.	175.	
12	Advertising and promotion .	87.	87.	0.	
13	Office expenses .	2,030.		2,030.	
14	Information technology				
15	Royalties .	71 060	50.007	04 655	
16	Occupancy	71,962.	50,307.	21,655.	
17 18	Travel Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	7,970.		7,970.	
	Interest	9,351.		9,351.	
	Payments to affiliates .	18,110.	18,110.	10.056	
22	Depreciation, depletion, and amortization	24,475. 15,620.	5,419. 11,741.	19,056. 3,879.	
	Insurance 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.)	15,620.	11,741.	3,079.	
á	Credit Card Expense	5,605.	3,857.	1,748.	
	Licenses	2,550.	2,550.		
	Supplies-Bar	11,990.	9,923.	2,067.	
	NSF Fee Collected	287.	10.070	287.	
	Lodge Activities	18,970.	18,970.		
	All other expenses Total functional expenses. Add lines 1 through 24f	6,062. 367,386.	6,062. 274,486.	92,900.	
26		307,380.	2/4,400.	32,300.	
BAA	(B) joint costs from a combined educational campaign and fundraising solicitation	NS			Form 990 (2010)

Balance Sheet

(B) (A) End of year Beginning of year 47,344 102,979. 1 Cash - non-interest-bearing 2 184,860 98,557. Savings and temporary cash investments 3 Pledges and grants receivable, net Accounts receivable, net 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 6 Notes and loans receivable, net 7 13,158 8 11,127. Inventories for sale or use 6,821 9 6,632. Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 1,131,939 10b 356,198 100 **b** Less: accumulated depreciation. 781,441 775,741. 11 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 12 125,122 117,782. 13 Investments - program-related See Part IV, line 11 13 29,288. 14 25,215. 14 Intangible assets 15 Other assets. See Part IV, line 11 2. Total assets. Add lines 1 through 15 (must equal line 34) 1,188,034. 16 1,138,035. 16 26,407. 17 21,992. 17 Accounts payable and accrued expenses 18 Grants payable 18 Deferred revenue 34,281 19 35,274. 19 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Payables to current and former officers, directors, trustees, key employees, 22 highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 186,178 23 179,373. 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 160,000. 24 120,000. 18,956. 25 12,824. 25 Other liabilities Complete Part X of Schedule D 425,822. 26 369,463. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here X and complete lines 27 through 29 and lines 33 and 34. 394,477 27 382,202. 27 Unrestricted net assets 267,735 28 286,370. 28 Temporarily restricted net assets 100,000 29 100,000. 29 Permanently restricted net assets R Organizations that do not follow SFAS 117, check here and complete FUZD lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31 BALANCEV 32 32 Retained earnings, endowment, accumulated income, or other funds 762,212 33 768,572. 33 Total net assets or fund balances 1,188,034 34 1,138,035. 34 Total liabilities and net assets/fund balances Form 990 (2010) BAA

Form	1 990 (2	2010)	Benev	<u>olen</u>	<u>t Pr</u>	<u>otec</u>	<u>tive</u>	Or	<u>der</u>	of	<u>E1.</u>	ks #	184	2				9	2-0	018	700		Pa	ige 12
Pai	t XI	Rec	onciliati	on of	Net .	Asset	S																	_
		Chec	k if Schedi	ule O	ontain	s a res	ponse	to ar	ny qu	estion	ın t	this Pa	rt XI										_	X
1	Total	revenu	ie (must ed	qual Pa	art VIII	, colum	ın (A),	line	12)											1				47.
2	Total	expens	ses (must	equal l	Part IX	, colum	ın (A),	line	25)										L	2		3	67 <u>,</u> 3	<u> 886.</u>
3	Rever	nue les	s expense	s Sub	tract li	ne 2 fro	om line	e 1											.	3				<u>861.</u>
4	Net a	ssets c	or fund bala	ances	at beg	nning (of year	r (mu:	st equ	ual Pa	ırt X	, line	33, cc	olumr	n (A))				Ļ	4		7	62,2	212.
5	Other	chang	jes in net a	assets	or fund	d balan	ces (e	xplaır	n ın S	Schedu	ule C)								5				<u>-1.</u>
6		ssets o	or fund bala	ances	at end	of year	r. Com	bine	lines	3, 4, á	and	5 (mւ	ıst eq	jual P	art X,	line	33,			6		7	68,5	572 <u>.</u>
Pai	t XII	Fina	ancial St	atem	ents	and R	epor	ting																_
		Chec	k if Sched	ule O	contair	s a res	ponse	to ar	ny qu	estion	ın t	this Pa	art XII	l			•							Ш
									_		_	_		_	_						_		Yes	No
1	Accou	unting	method us	ed to p	orepare	the Fo	orm 99	0:		Cash	Σ	X Ac	crual	L	_ Ot⊦	er _					— l			
	If the	organı hedule	zation cha O.	inged i	ts met	nod of a	accour	nting	from	a prioi	r ye	ar or o	check	ed 'O	ther,'	expla	ain]
2	Were	the or	ganızatıon'	's finai	ncial st	atemer	nts cor	npile	d or r	eviewe	ed b	y an i	ndepe	ender	nt acc	ounta	ant?					2a	X	
1) Were	the or	ganızatıon'	's fınaı	ncial st	atemer	nts auc	dited I	by an	ındep	oenc	dent a	ccoun	ntant?	•						. [2b		_X
•	If 'Ye	s' to lir w, or c	ne 2a or 2t ompilation	o, does	the or	ganıza al state	tion ha	ave a	comr	mittee	that	t assu indep	mes r ende	respo ent ac	nsıbıl count	ity fo	r over	sight o	f the	audıt,		2c	х	
	If the	organı hedule	zation cha O.	nged e	either i	ts over	sight p	roces	ss or	selectı	ion j	proces	ss dur	rıng tl	he tax	yea	r, exp	aın						
(lf 'Ye separ	s' to lir rate ba	ne 2a or 2b sis, conso	o, chec lidated	k a bo basıs,	x below or bot	v to ind	dicate	wher	ther th	ne fii	nancia	al stat	temer	nts for	the	year v	vere is:	sued	on a				
	X	Separ	ate basis		Cor	solidat	ed bas	SIS		Both o	cons	solidat	ed an	nd sep	parate	bas	IS							
3	As a Audit	result o Act ar	of a federa nd OMB Cii	al awar rcular	d, was A-133?	the ore	ganıza	tion r	equir	ed to ι	unde	ergo a	n aud	dit or	audits	as s	et for	th in th	e Sır	igle		За		<u>x</u>
ا	If 'Ye or au	s,' dıd dıts, ex	the organi cplain why	zation ın Sch	underq redule	o the r O and	equire descri	d aud be an	dit or ny ste	audits ps tak	? If en t	the or to und	ganız ergo s	zation such	did raudits	ot ur	dergo	the re	quire	d aud	ıt	3b		
RΔΔ																						Form	990	(2010)

TEEA0112 12/21/10

Schedulè C (Form 990 or 990-EZ) 201	0 Benevolent	Protective Order on is exempt under se	of Elks #1842	2 92-0018	
Part II-A Complete if section 501(n is exempt under se	ction sur(c)(s) and	u illeu Forili 5700 (el	ection under
A Check ► I if the filir	ng organization bel	ongs to an affiliated group			
B Check ► if the filing	ng organization che	cked box A and 'limited cor	ntrol' provisions apply.	 ,	
(The term	Limits on Lobb 'expenditures' me	ying Expenditures ans amounts paid or incur	red.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditu	res to influence pu	blic opinion (grass roots lo	bbying)		
b Total lobbying expenditu	ires to influence a	egislative body (direct lobb	yıng)		
c Total lobbying expenditu	ires (add lines 1a a	and 1b)			
d Other exempt purpose e	•				
e Total exempt purpose e	xpenditures (add lii	nes 1c and 1d)			
f Lobbying nontaxable am both columns	nount Enter the an	nount from the following tab	le in		
If the amount on line 1e, col	umn (a) or (b) is:	The lobbying nontaxable a	mount is:		
Not over \$500,000		20% of the amount on line 1e.			
Over \$500,000 but not over \$1	,000,000	\$100,000 plus 15% of the exces	s over \$500,000		
Over \$1,000,000 but not over \$	1,500,000	\$175,000 plus 10% of the exces			
Over \$1,500,000 but not over \$	17,000,000	\$225,000 plus 5% of the excess	over \$1,500,000.		
Over \$17,000,000		\$1,000,000			
g Grassroots nontaxable a					
h Subtract line 1g from lin			•		
i Subtract line 1f from line		•			
j If there is an amount of section 4911 tax for this	her than zero on ei s year?	ther line 1h or line 1i, did th	ne organization file Forr	n 4720 reporting	Yes No
(Son	ne organizations tl colun	4-Year Averaging Period nat made a section 501(h) enns below. See the instruct	lection do not have to	complete all of the five ph 2f.)	
	Loi	bying Expenditures During	g 4-Year Averaging Per	iod	
Calendar year (or fiscal	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
year beginning in)					
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					
BAA				Schedule C (Form	n 990 or 990-EZ) 2010

Schedule C (Form 990 or 990-EZ) 2010 Benevolent Protective Order of Elks #1842 92-0018700 Part II-B | Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768

		(a)		(b)	
		Yes	No		Amount	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
	Volunteers?					
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
	: Media advertisements?					
	Mailings to members, legislators, or the public?					
	Publications, or published or broadcast statements?	-				
	Grants to other organizations for lobbying purposes?					
	,					
	Direct contact with legislators, their staffs, government officials, or a legislative body?					
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
	Other activities? If 'Yes,' describe in Part IV					
	Total Add lines 1c through 1i					
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	•				
	of Yes,' enter the amount of any tax incurred under section 4912					
	If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912	×				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		L			
Pa	t III-A Complete if the organization is exempt under section 501(c)(4), section 50 section 501(c)(6).	1(c)(5)	, or			
	300000000000000000000000000000000000000				Yes	s No
1	Were substantially all (90% or more) dues received nondeductible by members?				1 X	\rightarrow
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				2 X	\rightarrow
	Did the organization make only inviouse lobbying experimitares of \$2,000 or less. Did the organization agree to carryover lobbying and political expenditures from the prior year?	•		-	3	$\frac{1}{x}$
Pa	t <u>III-B</u> Complete if the organization is exempt under section 501(c)(4), section 50 section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered 'No' OR if P	1(c)(5) art III-	, or A, line	e 3		
	is answered 'Yes.'					
1	Dues, assessments and similar amounts from members .		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
	ı Current year .		2a			
	Carryover from last year .		2b		·	
	: Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and politic	s cal				
	expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5			
Pa	t IV Supplemental Information					
Con Also	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; an , complete this part for any additional information.	d Part II	-B, line	11.		
- -						
	·	- -				
		_ _				

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Name of the organization Employer identification number Benevolent Protective Order of Elks #1842 92-0018700 Part | 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 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? No Part II | Conservation Easements. Complete if the organization answered 'Yes' to Form 990, 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 Preservation of a certified historic structure Protection of natural habitat 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 a Total number of conservation easements 2a 2b **b** Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2 c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d 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, Yes No 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)(ı) and section 170(h)(4)(B)(ıı)? 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: (i) Revenues included in Form 990, Part VIII, line 1 ▶\$ (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or 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 ► S b Assets included in Form 990, Part X

3 Using the organization's accusation, accession, and other records, check any of the following that are a significant use of its collection items (check at that apply): a Public exhibition b Chair or second and a public exhibition c Public exhibition d Loan or exchange programs b Scholarly research c Uniter Chair or Public exhibition d Loan or exchange programs c Preservation for future generations d Loan or exchange programs c Preservation for future generations c Other Fortive y level, of the organization's collections and explain how they further the organization's exempt purpose in Part IV Exemption Fortive y level, of the organization of the organization answered Yes to Form 900, Part IV, line Fart IV Exercive and Custodial Arrangements. Complete the following table: Fart IV Exercive and Custodial Arrangements. Complete the following table: 1 a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not yes No Fart IV Exercive and Custodian Part IV b Yes No Yes No Fart IV Explain the arrangement in Part XIV and complete the following table:	Schedule D (Form 990) 2010 Benev Part III Organizations Maintai						92-001 ther Similar Ass		ontinu	Page 2 ued)
b Scholarly research e Other Preservation for future generations	3 Using the organization's acquisition items (check all that apply)	on, accession, and	other records, ch	eck any	of the following	ng that	are a significant use	e of its o	collectio	n
c Preservation for future generations 4 Provides a description of the organization's collections and explain how they further the organization's exempt purpose in Provincial Additions of the organization of the organization selection? Yes No Part IV Excrow 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? No bill 'Yes,' explain the arrangement in Part XIV and complete the following table: C Beginning balance d Additions during the year c Engine balance d d d d d d d d d d	a 🔲 Public exhibition		d Loan	or exch	nange program	ıs				
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" to Form 990, Part IV, 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? bit 14 see, sexplain the arrangement in Part XIV and complete the following table: a Beginning balance d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? bit Yes, explain the arrangement in Part XIV Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance b Contributions 1 a Beginning of year balance c Net investment earnings, gains, and losses d Grants or scholarships 4,000, 7,000, 8,000, 9 and 10, 110, 110, 110, 110, 110, 110, 110,	b Scholarly research		e 🗌 Othe	r						
Part XIV 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" to Form 990, Part IV, 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? b if "Yes," explain the arrangement in Part XIV and complete the following table: 1	c Preservation for future genera	itions								
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 Inc.	Part XIV							ın		
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 Inc.	5 During the year, did the organizati	ion solicit or receiv	e donations of art	t, histori	ical treasures,	or othe	er sımılar ın?	Yes	Г	¬ No
b if Yes,' explain the arrangement in Part XIV and complete the following table: Amount 1c	Part IV Escrow and Custodial	Arrangements	. Complete if	organ						
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C Beginning balance d Additions during the year 1e 1d 1d 1d 1f 1f 1f 1f 1f	b If 'Yes,' explain the arrangement i	n Part XIV and cor	nplete the followi	ng table	··					
d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? Defit Yes, explain the arrangement in Part XIV Part VI Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10. 1a 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 quasi-endowment \(\bigcite{\textit{ Yes}} \) to 11 \(\bigcite{\text{ No}} \) 33 Are there endowment \(\bigcite{\text{ 29.89}} \) \$3 Are there endowment funds not in the possession of the organization that are held and administered for the organizations b if 'Yes' to 3a(f), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organizations endowment tunds 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 depreciation (b) Book value basis (other) buildings c Leasehold improvements d Equipment e Other Total. Add lines la through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) 1 Total. Add lines la through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) 1 Total. Add lines la through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) 1 Total. Add lines la through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) 1 Total. Add lines la through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) 1 Total. Add lines la through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)								Amoun	t	
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Finding balance 2a Did the organization include an amount on Form 990, Part X, line 21? Yes No bit Yes, explain the arrangement in Part XIV Part V Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (e) Four years back (a) Two years back (a) Two years back (a) Two years back (e) Four years back (a) Two years ba	d Additions during the year					. [1 d			
2a Did the organization include an amount on Form 990, Part X, line 21? Yes No	e Distributions during the year						1 e			
Pafr V Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10. 1a Beginning of year balance 143,290 147,138 147,846	f Ending balance					. [1f			
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 (d) Three years back (e) Four years back (e) Four years back (e) Four years back (form years back (form years back) (e) Four years back (form years back) (form years) back (fo	2a Did the organization include an ar	nount on Form 990	, Part X, line 21?					Yes		No
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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 depreciation 1 a Land 1 a Land 312,126. b Buildings c Leasehold improvements d Equipment e Other Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) (c) Accumulated (c) Accumulated depreciation 312,126. 312,126. 312,126. 312,126. 312,126. 312,126.	b If 'Yes' to 3a(II), are the related or	ganizations listed a	as required on Sc	hedule I	R?			3b		
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e Other Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) → 775,741.	· •									
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) ► 775,741.			 	ļ	159,064	•	132,975.		26,	<u>,089.</u>
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		(d) must equal For	m 990, Part X, co	olumn (l	B), line 10(c)))		lula B C		

92-0018700

Schedi	dle D (Form 990) 2010 Benevolent Protective Order of Elks #1842	92-0018700	Page
Part	XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements		
1 1	otal revenue (Form 990, Part VIII,column (A), line 12)		
2 7	otal expenses (Form 990, Part IX, column (A), line 25)		
3 E	excess or (deficit) for the year. Subtract line 2 from line 1		
4 1	let unrealized gains (losses) on investments		
5 0	Oonated services and use of facilities		
6 I	nvestment expenses		
7 F	Prior period adjustments		
8 (Other (Describe in Part XIV)		
9 1	otal adjustments (net) Add lines 4 through 8		
_10 E	excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		
Part	XII Reconciliation of Revenue per Audited Financial Statements With Revenue pe	r Return	
1 7	otal 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		
a١	let unrealized gains on investments		
	Donated services and use of facilities 2b		
c F	Recoveries of prior year grants . 2c		
	Other (Describe in Part XIV)		
	Add lines 2a through 2d	2e	
	Subtract line 2e from line 1	3	•
	Amounts included on Form 990, Part VIII, line 12, but not on line 1.		
	nvestments expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Part XIV.)		
	Add lines 4a and 4b	4c	
	otal revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	
	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	per Return	
	otal expenses and losses per audited financial statements	1	
	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
	Onated services and use of facilities .	()	
	Prior year adjustments 2b		
	Other losses . 2c		
	Other (Describe in Part XIV.)		
	Add lines 2a through 2d	2e	
	Subtract line 2e from line 1	3	
	Amounts included on Form 990, Part IX, line 25, but not on line 1:	· •	
	nvestments expenses not included on Form 990, Part VIII, line 7b	•	
	Other (Describe in Part XIV.) .		
	Add lines 4a and 4b	4c	
5_1	otal expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	
Part	XIV Supplemental Information		
Compl Part V any ac	ete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part , line 4; Part X, line 2, Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also compl ditional information	IV, lines 1b and 2b; ete this part to provide	
<u>Pt_V</u>	Line 4 Endowment funds are securely invested and earnings	are used to r	
	scholarships to deserving high school seniors in		_
	conformity with the donor's restrictions.		
		-	
		- -	

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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. Employer identification number Name of the organization 92-0018700 Benevolent Protective Order of Elks #1842 **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 а f Internet and email solicitations Solicitation of government grants b Phone solicitations Special fundraising events c g d In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No **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 (III) Did fundraiser (or retained by) (vi) Amount paid to (i) Name and address of individual (ii) Activity (iv) Gross receipts have custody or control of contributions? fundraiser listed in (or retained by) or entity (fundraiser) from activity organization column (i) Yes No 1 2 3 4 5 6 7 8 9 10 Total 3 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.

		G (Form 990 or 990-EZ) 2010 Benevo				
Pai	t II	Fundraising Events. Complete if reported more than \$15,000 of ful and 6a. List events with gross re	undraising event co	ontributions and gro	orm 990, Part IV, lii ss income on Form	ne 18, or 1990-EZ, lines 1
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add column (a) through column (c))
R E V			(event type)	(event type)	(total number)	
REVENUE	1	Gross receipts				
E	2	Less: Charitable contributions				
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes	! 			
Þ	5	Noncash prizes				·
DIRECT	6	Rent/facility costs				
	7	Food and beverages .				
Ž	8	Entertainment				
EXPERSES	9	Other direct expenses				
S	1	Direct expense summary. Add lines 4- th	•		>	
Do	11 11	Net income summary. Combine line 3, co Gaming. Complete if the organiz		os' to Form 000 Pa	rt IV June 10 or rer	ported more than
Pai	rt III	\$15,000 on Form 990-EZ, line 6a	ation answered it	35 (0 F0HH 990, Fa	rt iv, line 19, or lep	orted more man
REVENUE			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
N U E	1	Gross revenue		10,250.	128,143.	138,393.
E		Cash prizes			15,900.	15,900.
DIRECT	3	Non-cash prizes				
Ç S T E S	4	Rent/facility costs			7,987.	7,987.
	5	Other direct expenses		2,387.	84,048.	86,435.
_			Yes %	Yes%	Yes %	
	6	Volunteer labor	No	IIV NO	No	
	7	Direct expense summary Add lines 2 thr	ough 5 in column (d)		>	110,322.
	8	Net gaming income summary Combine I	ines 1, column (d) and	line 7	▶	28,071.
9	Ent	er the state(s) in which the organization op	perates gaming activities	s. <u>Alaska</u>		
		he organization licensed to operate gaming lo,' explain:				X Yes No
		re any of the organization's gaming license 'es,' explain:	s revoked, suspended o	or terminated during the	tax year [?]	Yes X No
BAA			TEEA3702	01/13/11	Schedule G (For	m 990 or 990-EZ) 2010
	-					,

Page 2

Sche	dule G (Form 990 or 990-EZ) 2010 Benevolent Protective Order of Elks #1842 92-00	018700	Page 3
	Does the organization operate gaming activities with nonmembers?	X Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	Yes	X No
13	Indicate the percentage of gaming activity operated in:	1	
	The organization's facility	a 10	0.00%
	An outside facility		8
	Enter the name and address of the person who prepares the organization's gaming/special events books and record	ds.	
	Name ► <u>Della DeVilbiss</u>	-	
	Address ► 2600 N Barry's Resort Drive Wasilla, AK 99654		
b	Does the organization have a contact with a third party from whom the organization receives gaming revenue? If 'Yes,' enter the amount of gaming revenue received by the organization \$ and the arm of gaming revenue retained by the third party \$ \$		X No
	,		
	Name •		
	Address ►		
16	Gaming manager information		
	Name •		
	Gaming manager compensation ► \$		
	Description of services provided		
	☐ Director/officer ☐ Employee ☐ Independent contractor		
17	Mandatory distributions		
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	X Yes	No
	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	n the	
	organization's own exempt activities during the tax year > \$ 19,650.	- D - w 1 1 1	
Pari	Supplemental Information. Complete this part to provide the explanations required by columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicab this part to provide any additional information (see instructions).	le. Also con	20, nplete

SCHEDULE 1 (Form 990)

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.

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2010

Open to Public Inspection

Employer Identification number Department of the Treasury Internal Revenue Service Name of the organization

		2				× A
00/81/		X Yes		ed 'Yes' to	than \$5,000.	
00/8100-26		the grantees' eligibility for the grants or assistance, and	arted States.	• United States. Complete if the organization answere	Observe the contract of the contract o	
Benevolent Protective Order of Elks #1842	Part I General Information on Grants and Assistance	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.	Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to	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.	Part II can be duplicated if additional space is needed
Benevol	Part I	1 Does the se	2 Desci	Part II		

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
ω							
(2)							
(3)							
						i	
(5)							
(6)							
<u>M</u>							
(8)							
2 Enter total number of section 501(c)(3) and government organizations	3) and government ord	anizations					
	Suci					•	

3 Enter total number of other organizations

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

TEEA3901 10/29/10

Schedule I (Form 990) 2010

Page 2 Schedule I (Form 990) 2010 Benevolent Protective Order of Elks #1842

Parill Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(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
1 Scholarship	2	4,000.	0.	Book	None
2 Fishing & Hunting Trips for Wounded Vets	24	9,944.	0.	Book	None
R					
4					
ស					
9					
7 Supplemental Information. Complete this part to provide the information required in Part I, line 2,	lete this part to pi	rovide the informat	on required in Par	. I, line 2, and any oth	and any other additional information.
[덕]	scholarship re	cipients_and_w	_and_wounded_vets_are_	e_made_directly_	made_directly_to_the_educational
Pt_I_Line_2institution_or	or_charter_company	any:		1	
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	! ! ! !		 	
	 	! ! ! ! !			

Schedule I (Form 990) 2010

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2010

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.

Open to Public Inspection

Employer identification number

Benevolent Protective Order of Elks #1842	92-0018700
Pt VI-B, Line 11a Form 990 & 990-T are reviewed by the a	udit committee upon receipt from the preparer,
includes checking for completion and	d comparing to Reviewed Financial Statements.
Pt_VI-C, Line 19 A copy is provided on request.	
Pt_VI-A, Line 6 The organization has fraternal	members.
Pt VI-A, Line 7a Governing body (Board of Trustee	es) is elected by the general membership.
Pt VI-A, Line 7b Major decisions of the Trustees	_are_ratified_by_vote
of the general membership at mo	nthly member meetings.
Pt_XIRounding	

Form **4562**

Department of the Treasury Internal Revenue Service (9

Depreciation and Amortization (Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return.

OMB No 1545-0172

2010

Attachment Sequence No 67

Identifying number Name(s) shown on return Benevolent Protective Order of Elks #1842 92-0018700 Business or activity to which this form relates Form 990 / Form 990EZ Election To Expense Certain Property Under Section 179 Partl Note: If you have any listed property, complete Part V before you complete Part I 1 Maximum amount (see instructions) . 1 2 2 Total cost of section 179 property placed in service (see instructions) 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 5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0-. If married filing 5 separately, see instructions 6 (a) Description of property (b) Cost (business use only) (c) Elected cost 7 Listed property Enter the amount from line 29 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 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 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs) 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2011. Add lines 9 and 10, less line 12 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) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 Property subject to section 168(f)(1) election 15 Other depreciation (including ACRS) 16 Partill 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 19,624 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 (c) Basis for depreciation (b) Month and (d) (f) Method (g) Depreciation (e) year placed in service (business/investment use Recovery period deduction 19a 3 year property 2,700. 05/00 270. b 5-year property HY ST Line 1,297. 07/00 HY ST Line 93. c 7-year property 3,506. 10/00 ΗY ST Line 175. d 10-year property 7,200. 15/00 ST Line e 15-year property HY 240. f 20-year property 25 yrs S/L g 25-year property 27.5 yrs MM S/L h Residential rental property 27.5 yrs MM S/L i Nonresidential real 39 yrs MM S/L 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 12 yrs b 12-year S/L c 40-year 40 yrs MM S/L Part W 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 22 20,402. 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

Part V 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.)

24	a Do you have eviden	ce to support the bu	usiness/investm	ent use clair	ned? .		Yes	TT	No 24	o If 'Yes	s,' is th	e evidenc	e written?		Yes	No
T	(a) ype of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	Cos	d) st or basis	(busin	(e) Basis for depreciation (business/investment use only)		(f Reco	(f) (g) Recovery Method, period Convention		(g) ethod/			E	(i) Elected Ition 179 cost
25	Special depreci	ation allowance	for qualified	listed pro	operty pla instruct	aced in	service	durin	g the ta	x year	and	25			1 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	
26	_														15	
						<u> </u>										
	D					<u> </u>			L				<u> </u>			
	Property used 5	0% or less in a	qualified bus	iness use	<u>e:</u>	1				- 1					0.495	海道 强之"。
													 			
28	Add amounts in	column (h), lin	es 25 through	n 27. Ente	er here a	nd on lii	ne 21, p	age 1		<u>'</u>		28				
_29	Add amounts in	column (ı), lıne	26 Enter he	ere and or	n line 7,	page 1	<u> </u>		•					29		
Com to yo	nplete this section our employees, fil Total business/i	rst answer the c	questions in S	proprietor Section C	B - Info r, partner to see if (a)	r, or oth	er 'more	than	1 5% ow	ner,' o	or rela	is section	on for th	ou provi iose veh e)	icles.	icles
30	during the year commuting mile	(do not include		Veh	ncle 1	Veh	icle 2		/ehicle 3	3	Vehi	cle 4	Veh	icle 5	Veh	icle 6
31	Total commuting mi	les driven during th	ne year					<u> </u>								
32	Total other pers miles driven	onal (noncomm	nuting)									_				
33	Total miles drive lines 30 through	en during the ye i 32	ear. Add		,	-	1				-	-				
34	Was the vehicle during off-duty h		ersonal use	Yes	No	Yes	No	Ye	s N	<u> </u>	/es	No	Yes	No	Yes	No
35	Was the vehicle than 5% owner	used primarily or related perso	by a more on?													
36																
		Section (C — Question	s for Emp	ployers V	Vho Pro	vide Ve	hicle	s for Us	e by T	heir I	Employe	ees			
Ansv 5% c	ver these question owners or related	ns to determine persons (see ir	of you meet a estructions).	an except	ion to co	mpletin	g Sectio	n B f	or vehic	les us	ed by	employ	ees who	are no	t more t	han
37	Do you maintain by your employe	a written policy	y statement ti	nat prohib	oits all pe	rsonal ı	use of ve	ehicle	es, ınclu	ding co	ommı	uting,			Yes	No
38	Do you maintain employees? See	a written policy the instruction	statement the statement of the statement	nat prohib used by	ots perso	nal use e officer	of vehic	cles, d	except of	ommu r more	iting, owne	by your ers				
39	Do you treat all i	use of vehicles	by employees	s as perso	onal use?	,										
40	Do you provide r vehicles, and ret	nore than five v	ehicles to yo tion received	ur employ ?	ees, obt	aın ınfo	rmation	from	your en	nploye	es ab	out the	use of t	he		
41	Do you meet the Note: If your ans															* į
Par	t VI 🖟 Amortiz	zation														
	Desci	(a) ription of costs		Date an	(b) nortization egins		(c) Amortizabl amount	e		(d) Code section		Amor	tization lod or entage	A	(f) mortization or this year	n r
42	Amortization of	costs that begin	s durina voii	2010 tax	vear (se	e instri	ictions).		1			I perci	nage			
	uor Licens		uuring jour		26/96	11300	60,0			197		15.00			4.	000.
	inance Fee	~			29/07			159.		461		20 00				73.
43	Amortization of	-	-		•								43			
44	Total. Add amou	unts in column	(f) See the in	nstruction									44			073.
					FDI	Z0812 10	1/29/10							Fo	m 4562	(2010)

Benevolent Protective Order of Elks #1842	92-0018700
Schedule O (Form 990), Supplemental Inform Form 990, Page 2, Part III, Line 1 (continued)	
Briefly describe the organization's mission: to schools, youth programs, local for programs, social and recreation	ood bank and other community assistance based al opportunities to members.
Schedule G (Form 990 or 990EZ), Part IV Su Part III, Line 17a (continued)	upplemental Information
State Name	Amount 19,650.