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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

Open to Public

Department of the Treasury Internal Revenue Service Inspection The organization may have to use a copy of this return to satisfy state reporting requirements 6/01 For the 2010 calendar year, or tax year beginning 2011 2010, and ending D Employer Identification Number Check if applicable FRATERNAL ORDER OF EAGLES #32 Address change 81-0136920 1800 SOUTH RESERVE A Telephone number Name change MISSOULA, MT 59801 406-721-3091 Initial return Terminated Amended return 568,176. G Gross receipts \$ F Name and address of principal officer H(a) Is this a group return for affiliates? Application pending X No Yes H(b) Are all affiliates included? SAME AS C ABOVE No If No,' attach a list (see instructions) X 501(c) (8 Tax-exempt status 527 501(c)(3) 4947(a)(1) or Website: ► H(c) Group exemption number Form of organization Corporation Association L Year of Formation M State of legal domicile Summary Briefly describe the organization's mission or most significant activities Check this box ► if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2010 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 6 353,677. 7a Total unrelated business revenue from Part VIII, column (C), line 12 7 a b Net unrelated business taxable income from Form 990-T, line 34 7b -56,741**Prior Year Current Year** Contributions and grants (Part VIII, line 1h)
Program service revenue (Part VIII, line 2g)
Investment inflorme (Part VIII, column (A), lines 3, 4, and 7d)
Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 18.642 29, 297. ıБ 682. 360, 719 323,698. Total revenue ( add times 8 through 11 (must equal Part VIII, column (A), line 12) 379,363 353,677. Grants and smilar amounts-paid (Part IX, column (A), lines 1-3) Benefits paid to or for members (Part IX, column (A), line 4) 166,290 160,623. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 223,945. 220,498. 390,235. Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 381,121. -27,444.Revenue less expenses Subtract line 18 from line 12 -10,872.Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 475,238 432,411. Total liabilities (Part X, line 26) 3,365 3,172. Net assets or fund balances Subtract line 21 from line 20 471,873. 429,239 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (either that) officer) is based in all information of which preparer has any knowledge. Sign Type or print name and title Here HEAD TRUSTEE Print/Type preparer's name Date Preparer's signature MCNAY, CPA, PC JAMES A MCNAY Paid P01250336 self employed Preparer ► JAMES A. **Use Only** ► 1800 SOUTH RESERVE, SUITE Firm's address Firm's EIN > 81-0467842

MT 59801

MISSOULA,

May the IRS discuss this return with the preparer shown above? (see instructions) BAA For Paperwork Reduction Act Notice, see the separate instructions.

(406) 721-3091

TEEA0113L 12/21/10

Form 990 (2010)

Form <b>990</b> (201	<del></del>		81-0136920 Pa	age 2
	Statement of Program Service	•		
	Check if Schedule O contains a response	onse to any question in this Part III		Ш
1 Briefly d	escribe the organization's mission			
				- – –
		nt program services during the year which were not li		
	0 or 990-EZ?		Yes X	No
	describe these new services on Sch	edule O ake significant changes in how it conducts, any progr	am services? Yes X I	NI -
	describe these changes on Scheduk		am services? Yes X I	No
	_		services by expenses Section 501(c)(3	3)
and 501	(c)(4) organizations and section 4947 s, and revenue, if any, for each prog	for each of the organization's three largest program s (a)(1) trusts are required to report the amount of grants are reported.	nts and allocations to others, the total	•
CAPCAISC	s, and revenue, it any, for each prog	gram service reported		
4a (Code	) (Expenses \$	including grants of \$	) (Revenue \$	
<b>-</b>				
	* * · ·			
<b>4b</b> (Code _	(Expenses \$	including grants of \$	) (Revenue \$	)
4c (Code	') (Expenses \$	including grants of \$	) (Revenue \$	
				_′
4104	One of the second secon	la () )		
4d Other pro (Expense	ogram services (Describe in Schedu es \$ incl	le O) <u>uding</u> grants of\$    )(Reven	ue \$	
	gram service expenses ►	/ (Neven		
BAA	<del></del>	TEEA0102L 10/06/10	Form <b>990</b> (20	010)

			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		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		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		X
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		X
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, VIII, VIII, IX, or X as applicable	*	} * ĵ	
;	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
١	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	11 c		<u>X</u>
(	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		<u>X</u>
	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		<u>X</u>
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a		<u>X</u>
	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		<u>X</u>
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		<u>X</u>
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Parts I and IV	14b		<u>X</u>
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15		X
	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		<u>X</u>
	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		<u>X</u>
	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		X
ZU :	aDid the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		<u>X</u>
ł	olf 'Yes' to line 20a, did the organization attach its audited financial statements to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20 b		

Form 990 (2010) FRATERNAL ORDER OF EAGLES #32

Part IV | 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		_ X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2° If 'Yes,' complete Schedule I, Parts I and III	22		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 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
ŀ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
1	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		
(	I 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	-	
ı	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		<u>x</u>
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):			
ć	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		<u>X</u>
I	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  Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	28c		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity? 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		Χ
â	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2  Yes X No			
36	<b>Section 501(c)(3) organizations.</b> 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? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38		<u>X</u>
BAA		Form	990 (2	2010)

Form 990 (2010) FRATERNAL ORDER OF EAGLES #32 81-0136920 Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V Yes No 12 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1 a b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable. 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming X (gambling) winnings to prize winners? 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 12 X b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a Х X b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 3ь 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Х financial account in a foreign country (such as a bank account, securities account, or other financial account) **4**a **b** If 'Yes,' enter the name of the foreign country. See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts 5a 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? 5 c 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? X 62 **b** If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b 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 and services provided to the payor? 7 a X b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282 7с Х d If 'Yes,' indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7е f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? **7** f g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? **7**g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C7 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 Х 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9a b Did the organization make a distribution to a donor, donor advisor, or related person? 9h 10 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 10 a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders 11 a **b** Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ) 11 b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b c Enter the amount of reserves on hand 13c

14a Did the organization receive any payments for indoor tanning services during the tax year?

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

Х

14a

14b

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. Х Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 5 1a Enter the number of voting members of the governing body at the end of the tax year 1a 5 1 b 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 Х 2 officer, director, trustee or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Х 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<u>a</u> X governing body? 7b Х 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 the following 8a a The governing body? 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 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, 10b and branches to ensure their operations are consistent with those of the organization? X 11 a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11 a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 Х 12a Does the organization have a written conflict of interest policy? If 'No.' go to line 13 12a 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 X 13 Does the organization have a written whistleblower policy? 13 X 14 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 Х a The organization's CEO, Executive Director, or top management official Х **b** Other officers of key employees of the organization 15b 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? 16a 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 16b organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > NONE Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply 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 19 statements available to the public SEE SCHEDULE O State the name, physical address, and telephone number of the person who possesses the books and records of the organization JAMES A MCNAY, CPA, PC 1800 SOUTH RESERVE, STE A, MISSOULA, MT 59801 406-721-3091

Form <b>990</b> (2010	) FRATERNAL	OBDEB OF	FACIFC	#32
rom <b>990</b> (2010	)) LEGITERNAL	OKUER OF	. EWGTEO	#32

#### 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 employee'
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization	n nor any	related	d or	ganı	zatio	on cor	nper	nsated any current offi	icer, director, or truste	e
(A)	(B)				<del></del>			(D)	(E)	(F)
Name and title	Average hours per week (describe hours for related organizations in Schedule O)	Po Individual trustee or director		,	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W 2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
(1) TRENT SINCLAIR	25							17.014	0	-
PRESIDENT (2) CORY BAINES	25							17,214.	0.	0.
VICE PRESIDENT	0							0.	0.	0.
(3) BILL RAYMOND				:						
SECRETARY	10							1,650.	0.	0.
_(4)_JOHN_NELSONTRUSTEE	0							0.	0.	0.
(5) DUANE NYGGARD								<u> </u>	0.	
TRUSTEE	0							0.	0.	0.
(6) FLOYD LOVELL										
TRUSTEE	0							0.	0.	0.
_(7)_TIM_SUPOLATRUSTEE	0							0.	0.	0
								0.	0.	0.
TRUSTEE	0							0.	0.	O.
(9)										
(10)					-					
(11)			_							
(12)										
(13)				-						
(14)					_					
(15)						ļ				
(16)	-									
(17)				-						
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Form 990 (2010)

Part VII   Section A. Officers, Directors, Trus	(B)	\ <del>e</del> y			C)	<del>:es</del>	, aı	(D)	(E)	ipioye	(F)	σπ
Name and title	Average	Posi	tion (			hat a	pply)	Reportable	Reportable		Estimated	נ
	hours per week (describe hours for related organi zations in Sch O)	Individual trustee or director	Institutional trustee	Officer	,	Highest compensated employee		compensation from the organization (W 2/1099 MISC)	compensation from related organizations (W 2/1099 MISC)	am cc	ount of oi impensati from the rganization and relate ganization	ther ion on ed
(18)												
(19)												
(20)							**					
(21)												
(22)												
(23)												
(24)											<del></del>	
(25)												
(26)											<del></del>	
(27)												
(28)												
(29)												
1 b Sub-total c Total from continuation sheets to Part VII, Section A			!				<b>&gt;</b>	18,864.	0.			0.
d Total (add lines 1b and 1c)							<b>-</b>	18,864.	0.			0.
<ul><li>2 Total number of individuals (including but not limited from the organization ► 0</li></ul>	to those	e list	ed a	abov	e) w	vho i	rece	ived more than \$	100,000 in reportal	ole com	pensati	on
3 Did the organization list any former officer, director of	or truste	e ke	V PI	mole	vee	or	hial	hest compensated	employee		Yes	No
on line 1a <sup>2</sup> If 'Yes,' complete Schedule J for such in  4 For any individual listed on line 1a, is the sum of rep	dıvıdual		•	•	•		J	•	, ,	3		_X
the organization and related organizations greater th	an \$150	,000	? <i>If</i>	Ye:	s' cc	mpi	lete	Schedule J for	)(I)	4		Х
5 Did any person listed on line 1a receive or accrue co for services rendered to the organization? If 'Yes,' co	mpensa omplete	tion <i>Sch</i>	fron edu	n an <i>le J</i>	y ur for s	rela such	ited <i>per</i>	organization or in rson	dıvıdual 	5		Х
Section B. Independent Contractors  1 Complete this table for your five highest compensate compensation from the organization	d indepe	ende	nt c	ontr	acto	rs t	hat ı	received more tha	n \$100,000 of	·		
(A)  Name and business address						(B) Description o	f services		C) ensatior	า		
	<u>-</u>						1					
2 Total number of independent contractors (including b	_	mite	d to	thos	se li	sted	abo	ove) who received	more than			
\$100,000 in compensation from the organization >	0 TE	EA01	081	12/21	/10					Forn	1 990 (2	2010

TEEA0108L 12/21/10

Total revenue Peterbet or Provided Business Code Spage 1	Га	rt viii Statement of Revenue	<del></del>	<del></del>	- <del>1</del>	
Table   Tabl				Related or exempt function	Unrelated business	Revenue excluded from tax under sections
29,297.   29,2	S .	1a Federated campaigns 1a				
29,297.   29,2	ANT					
29,297.   29,2	Ę, Š	c Fundraising events 1c				
29,297.   29,2	IFTS NR A					
29,297.   29,2	S, G	e Government grants (contributions) 1 e	7			
29,297.   29,2	NO.		7			
29,297.   29,2	튎	similar amounts not included above 1 f				
29,297.   29,2	E O	\				
29,297.   29,2	ਨੁ₹	h Total. Add lines 1a-1f	7			
3 Investment income (including dividends, interest and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties 6 Gross Rents b Less rental expenses c Rental income or (loss) 7 a Gross amount from sales of assets other then inventory b Less cost or other basis and sales orgenses c Gain or (loss) d Net gain or (loss)  5 Royalties  1 O Securities 1 O Securities 1 O Securities 2 O Securities 3 O Securities 4 O Securities 5 O Securities 5 O Securities 6 O Securities 7 O Securities 7 O Securities 8 O Securities 9 O Secur	H.	Business Code			1	
3 Investment income (including dividends, interest and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties 6 Gross Rents b Less rental expenses c Rental income or (loss) 7 a Gross amount from sales of assets other then inventory b Less cost or other basis and sales orgenses c Gain or (loss) d Net gain or (loss)  5 Royalties  1 O Securities 1 O Securities 1 O Securities 2 O Securities 3 O Securities 4 O Securities 5 O Securities 5 O Securities 6 O Securities 7 O Securities 7 O Securities 8 O Securities 9 O Secur	VEN	2a MEMBERSHIP DUES & ASSESSMENTS	29,297.		29,297.	
3 Investment income (including dividends, interest and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties 6 Gross Rents b Less rental expenses c Rental income or (loss) 7 a Gross amount from sales of assets other then inventory b Less cost or other basis and sales orgenses c Gain or (loss) d Net gain or (loss)  5 Royalties  1 O Securities 1 O Securities 1 O Securities 2 O Securities 3 O Securities 4 O Securities 5 O Securities 5 O Securities 6 O Securities 7 O Securities 7 O Securities 8 O Securities 9 O Secur	끭	b				
3 Investment income (including dividends, interest and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties 6 Gross Rents b Less rental expenses c Rental income or (loss) 7 a Gross amount from sales of assets other then inventory b Less cost or other basis and sales orgenses c Gain or (loss) d Net gain or (loss)  5 Royalties  1 O Securities 1 O Securities 1 O Securities 2 O Securities 3 O Securities 4 O Securities 5 O Securities 5 O Securities 6 O Securities 7 O Securities 7 O Securities 8 O Securities 9 O Secur	Š				-	
3 Investment income (including dividends, interest and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties 6 Gross Rents b Less rental expenses c Rental income or (loss) 7 a Gross amount from sales of assets other then inventory b Less cost or other basis and sales orgenses c Gain or (loss) d Net gain or (loss)  5 Royalties  1 O Securities 1 O Securities 1 O Securities 2 O Securities 3 O Securities 4 O Securities 5 O Securities 5 O Securities 6 O Securities 7 O Securities 7 O Securities 8 O Securities 9 O Secur	SER					
3 Investment income (including dividends, interest and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties 6 Gross Rents b Less rental expenses c Rental income or (loss) 7 a Gross amount from sales of assets other then inventory b Less cost or other basis and sales orgenses c Gain or (loss) d Net gain or (loss)  5 Royalties  1 O Securities 1 O Securities 1 O Securities 2 O Securities 3 O Securities 4 O Securities 5 O Securities 5 O Securities 6 O Securities 7 O Securities 7 O Securities 8 O Securities 9 O Secur	¥	e				
3 Investment income (including dividends, interest and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties 6 Gross Rents b Less rental expenses c Rental income or (loss) 7 a Gross amount from sales of assets other then inventory b Less cost or other basis and sales orgenses c Gain or (loss) d Net gain or (loss)  5 Royalties  1 O Securities 1 O Securities 1 O Securities 2 O Securities 3 O Securities 4 O Securities 5 O Securities 5 O Securities 6 O Securities 7 O Securities 7 O Securities 8 O Securities 9 O Secur	OGR					
other similar amounts)  4 Income from investment of tax-exempt bond proceeds  5 Royalities  (i) Real (ii) Personal  6a Gross Rents  b Less: rental expenses c Rental income or (loss)  7a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss)  8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 a b Less: direct expenses c Net income or (loss) from gaming activities See Part IV, line 19 b Less dors income from gaming activities See Part IV, line 19 b Less control goods sold c Net income or (loss) from gaming activities See Part IV, line 19 b Less control goods sold b Lett. or more or (loss) from sales of inventory  Nescollanceus Revenue Business Code 11a GAMING MACHINE INCOME b OVER/SHORT c MISC INCOME 3, 184. d All other revenue c Total. Add lines 11a-11d	_g_	g Total. Add lines 2a-2f	29,297.			
other similar amounts)  4 Income from investment of tax-exempt bond proceeds  5 Royalities  (i) Real (ii) Personal  6a Gross Rents  b Less: rental expenses c Rental income or (loss)  7a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss)  8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 a b Less: direct expenses c Net income or (loss) from gaming activities See Part IV, line 19 b Less dors income from gaming activities See Part IV, line 19 b Less control goods sold c Net income or (loss) from gaming activities See Part IV, line 19 b Less control goods sold b Lett. or more or (loss) from sales of inventory  Nescollanceus Revenue Business Code 11a GAMING MACHINE INCOME b OVER/SHORT c MISC INCOME 3, 184. d All other revenue c Total. Add lines 11a-11d		3 Investment income (including dividends, interest and				
Second Process   Seco		other similar amounts)	682.		682.	
Ga Gross Rents		4 Income from investment of tax-exempt bond proceeds	•			
Bess cost or other basis and sales expenses continuous or (loss)  Ba Gross amount from sales of assets other than inventory  b Less cost or other basis and sales expenses continuous or (loss)  Ba Gross income from fundraising events  (o) Other assets other than inventory  b Less cost or other basis and sales expenses continuous or (loss)  d Net gain or (loss)  d Net gain or (loss)  b Asset of good and inventory and inventory and allowances continuous or (loss) from fundraising events  9a Gross income from gaming activities a b Less direct expenses b continuous or (loss) from gaming activities and allowances continuous or (loss) from gaming activities and allowances continuous or (loss) from gaming activities and allowances continuous or (loss) from sales of inventory, less returns and allowances continuous or (loss) from sales of inventory continuous c		5 Royalties	•			
b Less rental expenses c Rental income or (loss) d Net rental income or (loss)  7a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events See Part IV, line 18 b Less direct expenses c Net income or (loss) from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from sales of inventory and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Moscilalizations Revenue  Business Code  11a GAMING MACHINE INCOME b OVER/SHORT c MISC INCOME d All other revenue e Total. Add lines 11a-11d						
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Ta Gross amount from sales of assets other than inventory   Description of assets other than inventory   Description of assets other than inventory   Description of assets of the pairs and sales expenses   C Gain or (loss)   Description of the pairs and sales expenses   Description of the pairs and sales are pairs and sales are pairs and sales of inventory   Description of the pairs and sales are pairs are pairs and sales are pairs and sales are				. ` `	, * > *,	` .
By Service amount from sales of assets other than inventory  b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss)  8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events  9a Gross income from gaming activities See Part IV, line 19 a b Less direct expenses c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  11a GAMING MACHINE INCOME b OVER/SHORT c MISC INCOME d All other revenue e Total. Add lines 11a-11d						
b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss)  8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events  9a Gross income from gaming activities See Part IV, line 19 a b Less direct expenses b c Net income or (loss) from gaming activities See Part IV, line 19 b Less direct expenses b c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances b Less cost of goods sold b 214,499 c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11a GAMING MACHINE INCOME b OVER/SHORT c MISC INCOME d All other revenue e Total. Add lines 11a-11d	}	/a Gross amount from sales of	1	,	* *** *	*
and sales expenses c Gain or (loss) d Net gain or (loss)  8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold b 214, 499. c Net income or (loss) from sales of inventory  C Net income or (loss) from sales of inventory  Business Code 11a GAMING MACHINE INCOME 112, 567. 112, 567. b OVER/SHORT c MISC INCOME 3, 184. d All other revenue e Total. Add lines 11a-11d		assets other than inventory	1			<b>&gt;</b>
C Gain or (loss) d Net gain or (loss)  8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events  9a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory c Net income or (loss) from sales of inventory  11a GAMING MACHINE INCOME b OVER/SHORT c MISC INCOME d All other revenue e Total. Add lines 11a-11d				**		
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(not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less: direct expenses b c Net income or (loss) from fundraising events  9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses b c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances a 416, 239. b Less cost of goods sold b 214, 499. c Net income or (loss) from sales of inventory 201, 740.  Miscellaneous Revenue Business Code  11 a GAMING MACHINE INCOME 112, 567. b OVER/SHORT 6, 207. 6, 207. c MISC INCOME 3, 184. 3, 184. d All other revenue e Total. Add lines 11a-11d		d Net gain or (loss)				
c Net income or (loss) from fundraising events  9a Gross income from gaming activities See Part IV, line 19  b Less direct expenses  c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances  b Less cost of goods sold  c Net income or (loss) from sales of inventory  c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11a GAMING MACHINE INCOME  112,567.  b OVER/SHORT  c MISC INCOME  d All other revenue  e Total. Add lines 11a-11d  121,958.	NUE	(not including \$				
c Net income or (loss) from fundraising events  9a Gross income from gaming activities See Part IV, line 19  b Less direct expenses  c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances  b Less cost of goods sold  c Net income or (loss) from sales of inventory  c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11a GAMING MACHINE INCOME  112,567.  b OVER/SHORT  c MISC INCOME  d All other revenue  e Total. Add lines 11a-11d  121,958.	E.	•				
c Net income or (loss) from fundraising events  9a Gross income from gaming activities See Part IV, line 19  b Less direct expenses  c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances  b Less cost of goods sold  c Net income or (loss) from sales of inventory  c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11a GAMING MACHINE INCOME  112,567.  b OVER/SHORT  c MISC INCOME  d All other revenue  e Total. Add lines 11a-11d  121,958.	ER	The state of the s	_			
c Net income or (loss) from fundraising events  9a Gross income from gaming activities See Part IV, line 19  b Less direct expenses  c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances  b Less cost of goods sold  c Net income or (loss) from sales of inventory  c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11a GAMING MACHINE INCOME  112,567.  b OVER/SHORT  c MISC INCOME  d All other revenue  e Total. Add lines 11a-11d  121,958.	픋					,
See Part IV, line 19  b Less direct expenses c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances a 416,239. b Less cost of goods sold b 214,499. c Net income or (loss) from sales of inventory  Miscellaneous Revenue  11a GAMING MACHINE INCOME b OVER/SHORT c MISC INCOME d All other revenue e Total. Add lines 11a-11d  121,958.		c Net income or (loss) from fundraising events				
c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances  b Less cost of goods sold  c Net income or (loss) from sales of inventory  c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11a GAMING MACHINE INCOME  112,567.  b OVER/SHORT  c MISC INCOME  d All other revenue  e Total. Add lines 11a-11d  121,958.		9a Gross income from gaming activities See Part IV, line 19				,
10a Gross sales of inventory, less returns and allowances  b Less cost of goods sold  c Net income or (loss) from sales of inventory  Miscellaneous Revenue  11a GAMING MACHINE INCOME  b OVER/SHORT  c MISC INCOME  d All other revenue  e Total. Add lines 11a-11d  416,239.  416,239.  416,239.  416,239.  416,239.  416,239.  5201,740.  201,740.  201,740.  112,567.  112,567.  6,207.  6,207.  3,184.  121,958.		b Less direct expenses b				
and allowances  b Less cost of goods sold  c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11a GAMING MACHINE INCOME  b OVER/SHORT  c MISC INCOME  d All other revenue  e Total. Add lines 11a-11d  b Less cost of goods sold  214,499.  201,740.  201,740.  112,567.  112,567.  112,567.  6,207.  6,207.  3,184.  121,958.		c Net income or (loss) from gaming activities				
c Net income or (loss) from sales of inventory       201,740.       201,740.         Miscellaneous Revenue       Business Code         11a GAMING MACHINE INCOME       112,567.         b OVER/SHORT       6,207.       6,207.         c MISC INCOME       3,184.       3,184.         d All other revenue       121,958.       121,958.		10a Gross sales of inventory, less returns and allowances a 416, 239.				
Miscellaneous Revenue         Business Code           11a GAMING MACHINE INCOME         112,567.           b OVER/SHORT         6,207.           c MISC INCOME         3,184.           d All other revenue         2121,958.						
Miscellaneous Revenue         Business Code           11a GAMING MACHINE INCOME         112,567.           b OVER/SHORT         6,207.           c MISC INCOME         3,184.           d All other revenue         3,184.           e Total. Add lines 11a-11d         121,958.	L	c Net income or (loss) from sales of inventory	201,740.		201,740.	
b OVER/SHORT 6,207. 6,207. c MISC INCOME 3,184. 3,184. d All other revenue e Total. Add lines 11a-11d ► 121,958.						<del>/</del>
b OVER/SHORT       6,207.         c MISC INCOME       3,184.         d All other revenue       3,184.         e Total. Add lines 11a-11d       ▶ 121,958.	-		<u>112,</u> 567.		112,567.	
c MISC INCOME       3,184.         d All other revenue       3,184.         e Total. Add lines 11a-11d       ▶ 121,958.			6,207.			
d All other revenue e Total. Add lines 11a-11d  ► 121, 958.		c MISC INCOME				
		d All other revenue				
		e Total. Add lines 11a-11d	121,958.			
		12 Total revenue. See instructions		0.	353,677.	0.

## 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)

	All other organizations must composition of the com	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21		ехрепзез	general expenses	expenses
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	18,864.	0.	18,864.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	119,992.		119,992.	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	237.		237.	-
9	Other employee benefits	9,672.		9,672.	
10	Pavroll taxes	11,858.		11,858.	
	Fees for services (non-employees)			==, 5551	<del></del>
	a Management				
	b Legal				
	Accounting				
	Lobbying				
	, ,				<del>-</del>
	Professional fundraising services See Part IV, line 17				
	Investment management fees			<del>_</del>	<del></del>
•	Other	2 601		0.601	
	Advertising and promotion	8,691.		8,691.	
13	Office expenses	3,034.	<del></del>	3,034.	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	109.		109.	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	6,992.		6,992.	
20	Interest				
21	Payments to affiliates				<u>_</u>
22	Depreciation, depletion, and amortization	24,860.		24,860.	
23	Insurance.	15,357.		15,357.	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	LIVE MUSIC	45,399.		45,399.	
b	TAXES, LICENSES & PERMITS	31,265.		31,265.	
	MACHINE EXPENSE	23,932.		23,932.	
	UTILITIES	22,399.		22,399.	- "-
	REPAIRS & MAINTENANCE	11,138.		11,138.	<u> </u>
	All other expenses	27,322.		27,322.	
	Total functional expenses Add lines 1 through 24f	381,121.	0.	381,121.	0.
	Joint costs. Check here ► if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	301,121.	J.	301,121.	Form <b>990</b> (2010)

81-0136920 Page 11

Pa	rt X	Balance Sheet				
				(A) Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing		109,944.	1	71,934.
	2	Savings and temporary cash investments		54,465.	2	58,915.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Receivables from current and former officers, director and highest compensated employees Complete Part			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) voluntar organizations (see instructions)	buting employers and		6	
A	7	Notes and loans receivable, net			7	
ASSETS	8	Inventories for sale or use	İ	15,080.	8	15,441.
֡֝֞֞֟֞֞֝֟֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	9	Prepaid expenses and deferred charges	Ì		9	
3						· · · · · · · · · · · · · · · · · · ·
	10 a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 832,624.			
ļ	b	Less: accumulated depreciation	10b 557, 114.	285,720.	10 c	275,510.
	11	Investments - publicly traded securities	,		11	
	12	Investments - other securities See Part IV, line 11	ļ		12	
	13	Investments - program-related See Part IV, line 11			13	
	14	Intangible assets			14	
ı	15	Other assets See Part IV, line 11		10,029.	15	10,611.
	16	Total assets Add lines 1 through 15 (must equal line	34)	475,238.	16	432,411.
	17	Accounts payable and accrued expenses			17	
	18	Grants payable			18	
	19	Deferred revenue			19	
Ļ	20	Tax-exempt bond liabilities			20	
Å B	21	Escrow or custodial account liability Complete Part I	V of Schedule D		21	
! L !	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	ž .	22	
Ė	23	Secured mortgages and notes payable to unrelated th	urd parties		23	
٠		Unsecured notes and loans payable to unrelated third	· ·		24	
	25	Other liabilities Complete Part X of Schedule D	parties	3,365.	25	3,172.
	26	Total liabilities. Add lines 17 through 25		3,365.	26	3,172.
N	20	Organizations that follow SFAS 117, check here ▶	and complete lines	3,303.		3,172.
N E T		27 through 29 and lines 33 and 34.				
	27	Unrestricted net assets			27	
ASSETS	28	Temporarily restricted net assets	Ì		28	
5		Permanently restricted net assets	F	· · · · · · · · · · · · · · · · · · ·	29	
Q R	23	Organizations that do not follow SFAS 117, check her	e ► X and complete			
		lines 30 through 34.	- and complete			
F UZD	30	Capital stock or trust principal, or current funds			30	
	31	Paid in or capital surplus, or land, building, or equipm	ent fund		31	
ř	32	Retained earnings, endowment, accumulated income,	Γ	471,873.	32	429,239.
<b>B4 L4Z0Eの</b>	33	Total net assets or fund balances	ļ	471,873.	33	429,239.
É	34	Total liabilities and net assets/fund balances	Ţ	475,238.	34	432,411.

BAA

Form 990 (2010)

Form 990 (2010) FRATERNAL ORDER OF EAGLES #32 81	-0136920		Р	age 12
Part XI Reconciliation of Net Assets				
Check if Schedule O contains a response to any question in this Part XI				X
1 Total revenue (must equal Part VIII, column (A), line 12)	1	3	53,	677.
2 Total expenses (must equal Part IX, column (A), line 25)	2		81,	
3 Revenue less expenses Subtract line 2 from line 1	3		27,	
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		71,8	
5 Other changes in net assets or fund balances (explain in Schedule O) SEE SCHEDULE O	5		15,	
6 Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	4	29,2	239.
Part XII Financial Statements and Reporting				
Check if Schedule O contains a response to any question in this Part XII				X
1 Accounting method used to prepare the Form 990 Cash Accrual X Other SEE SCH. C	)		Yes	No
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O				
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Х	
<b>b</b> Were the organization's financial statements audited by an independent accountant?		2b		Х
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?	ne audit,	2c		Х
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	į			•
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue separate basis, consolidated basis, or both.	ed on a			
Separate basis Consolidated basis Both consolidated and separate basis				
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S Audit Act and OMB Circular A-133?	Single	3a		<u>X</u>
<b>b</b> If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audits, explain why in Schedule O and describe any steps taken to undergo such audits	ired audit	3b		
BAA		Form	990 (	2010)

#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

## Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Name of the organization Employer identification number FRATERNAL ORDER OF EAGLES #32 81-0136920 Part I 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) 3 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? 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, 1 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 a Total number of conservation easements 2a b Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2ç d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2dNumber of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax vear ► Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(i)? 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 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenues included in Form 990, Part VIII, line 1 >\$ b Assets included in Form 990, Part X

Schedule D (Form 990) 2010 FRAT Part III Organizations Mainta		DER OF EAGLE				.36920 <b>Assets</b> (6	contu	Page <b>2</b> nued)
3 Using the organization's acquisitintems (check all that apply) a Public exhibition b Scholarly research	ion, accessio	d 🗍 l		eck any of the following or exchange programs		use of its ci	ollecti	on
c Preservation for future general Provide a description of the organ Part XIV	inization's col					se in		
5 During the year, did the organiza assets to be sold to raise funds r  Part IV Escrow and Custodia	rather than to	be maintained as p	art of	f the organization's col	lection?	<b>Yes</b> n 990, Pa	art I\	No V, line
9, or reported an amo	ount on Fo	rm 990, Part X,	line	21		· · · · · · · · · · · · · · · · · · ·		<u>-</u>
1a Is the organization an agent, trus included on Form 990, Part X?			-		er assets not	Yes		No
<b>b</b> If 'Yes,' explain the arrangement	in Part XIV a	and complete the to	llowin	ig table.		Amount		
c Beginning balance d Additions during the year					1 c   1 d			
<ul> <li>e Distributions during the year</li> <li>f Ending balance</li> </ul>					1 e			<del></del>
2a Did the organization include an a b if 'Yes,' explain the arrangement	ın Part XIV					Yes		No
Part V Endowment Funds. Co	<u>omplete ıf</u>	the organization	n an	swered 'Yes' to Fo	orm 990, Part IV,	<u>ıne 10.</u>		
	(a) Curren	it year (b) Pri	or year	(c) Two years bac	k (d) Three years bac	(e) Fo	ur year	s back
1 a Beginning of year balance								
<b>b</b> Contributions								
<ul> <li>c Net investment earnings, gains, and losses</li> </ul>								
d Grants or scholarships								
<ul> <li>e Other expenditures for facilities and programs</li> </ul>								
f Administrative expenses								
<b>g</b> End of year balance								
2 Provide the estimated percentage	e of the year	end balance held as	3					
a Board designated or quasi-endow	vment 🟲	o						
<b>b</b> Permanent endowment ▶		ś						
c Term endowment ►	%							
3a Are there endowment funds not in organization by	n the possess	sion of the organizat	tion th	nat are held and admin	istered for the	Γ.	Yes	No
(i) unrelated organizations						3a(i)		
(ii) related organizations						3a(ii)		
b If 'Yes' to 3a(ii), are the related o	rganizations	listed as required or	n Sch	edule R?		3b		
4 Describe in Part XIV the intended								
Part VI Land, Buildings, and								
Description of investment		(a) Cost or other ba	$\overline{}$	(b) Cost or other basis (other)	(c) Accumulated depreciation	( <b>d)</b> Bo	ok va	lue
1aland	· •	\				1		

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 basis (other)

1a Land
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 depreciation

(d) Book value

(d) Book value

557, 114.
275, 510.

BAA

Schedule **D** (Form 990) 2010

 (a) Description of liability
 (b) Amount

 (1) Federal income taxes
 3, 172.

 (2) PAYROLL LIABILITIES WITHHELD
 3, 172.

 (3)
 (4)

 (5)
 (6)

 (7)
 (8)

 (9)
 (10)

 (11)
 (11)

 Total (Column (b) must equal Form 990, Part X, column (B) line 25)
 3, 172.

2. FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

Schedule <b>D</b>	(Form 990) 2010 FRATERNAL ORDER OF EAGLES #32	8	1-013	6920	Page 4
	Reconciliation of Change in Net Assets from Form 990 to Audited Final	ncial Statements	·	N/A	
	evenue (Form 990, Part VIII,column (A), line 12)		}		
	xpenses (Form 990, Part IX, column (A), line 25)		1		
	or (deficit) for the year Subtract line 2 from line 1		-		
	realized gains (losses) on investments		ļ	···	
	d services and use of facilities		Ĺ		
	nent expenses		1		
	eriod adjustments		1		
	Describe in Part XIV)		-		
	djustments (net) Add lines 4 through 8		ļ		
	or (deficit) for the year per audited financial statements. Combine lines 3			,	
	Reconciliation of Revenue per Audited Financial Statemer	nts With Revenue per	Returr	N/A	
1 Total re	evenue, gains, and other support per audited financial statements		1		
2 Amoun	ts included on line 1 but not on Form 990, Part VIII, line 12				
a Net uni	realized gains on investments	2a			
<b>b</b> Donate	d services and use of facilities	2b	]		
<b>c</b> Recove	ries of prior year grants	2c	]		
<b>d</b> Other (	Describe in Part XIV)	2d	]		
<b>e</b> Add lın	es <b>2a</b> through <b>2d</b>		2e		
3 Subtrac	ct line <b>2e</b> from line <b>1</b>		3		
<b>4</b> Amoun	ts included on Form 990, Part VIII, line 12, but not on line 1				
a Investn	nents expenses not included on Form 990, Part VIII, line 7b	4a			
<b>b</b> Other (	Describe in Part XIV )	4b			
<b>c</b> Add lın	es <b>4a</b> and <b>4b</b>		4c		
5 Total re	evenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5		
Part XIII	Reconciliation of Expenses per Audited Financial Statements	With Expenses per Re	turn	N/A	
1 Total e	spenses and losses per audited financial statements		1		
2 Amoun	ts included on line 1 but not on Form 990, Part IX, line 25				
<b>a</b> Donate	d services and use of facilities	2a	]		
<b>b</b> Prior ye	ear adjustments	2b			
<b>c</b> Other lo	osses	2c			
d Other (	Describe in Part XIV)	2d	]		
e Add line	es <b>2a</b> through <b>2d</b>		2e		
3 Subtrac	t line <b>2e</b> from line <b>1</b>		3		
4 Amoun	is included on Form 990, Part IX, line 25, but not on line 1:				
a Investm	ents expenses not included on Form 990, Part VIII, line 7b	4a	]		
<b>b</b> Other (l	Describe in Part XIV)	4b	]		
	es <b>4a</b> and <b>4b</b>		4c		
	openses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5		
	Supplemental Information				
Complete this Part V, line 4 any additional		es 2d and 4b Also complete	lines 1b this par	and 2b; t to provide	
					. – – –
					. — — —
<del>_</del>					. – – – -
BAA	TEEA3304L 02/11/11		Sched	ule <b>D</b> (Form 9	90) 2010

TEEA3304L 02/11/11

Schedule **D** (Form 990) 2010

Schedule D (Form 990) 2010 FRATERNAL ORDER OF EAGLES #32	81-0136920	Page <b>5</b>
Part XIV Supplemental Information (continued)		

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

# Supplemental Information to Form 990 or 990-EZ

OMB No 1545 0047

2010

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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.

	Employer identification number
FRATERNAL ORDER OF EAGLES #32	81-0136920
FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS	
FORM 990 AND FOR 990T WILL BE PRESENTED TO THE BOARD OF TRUSTEE	S PRIOR TO FILING.
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AV	AILABLE
NO DOCUMENTS AVAILABLE TO THE PUBLIC.	
FORM 990, PART XII, LINE 1 - OTHER ACCOUNTING METHOD	
MODIFIED CASH	

2010 SCHEDULE O - SUPPLEMENTAL INFORMATION		PAGE 2		
CLIENT FRAT	FRATERNAL ORDER OF EAGLES #32			81-013692
7/08/11				03 04PI
FORM 990, PAR OTHER CHANG	RT XI, LINE 5 ES IN NET ASSETS OR FUND BALANCES			
CONTRIBUTIONS NON-DEDUCTIBS PRIOR PERIOD ROUNDING	LE EXPENSES		\$	-16,726. -750. 2,290.
ROUNDING		TOTAL	\$	-4. -15,190.