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Return of Organization Exempt From Income Tax

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

2011

Open to Public
Inspection

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

For the 2011 calendar year, or tax year beginning , 2011, and ending

Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization Fraternal Order of Eagles, Aerie 4506		D Employer Identification Number 27-0385382
	Doing Business As		E Telephone number (252) 441-8520
	Number and street (or P O box if mail is not delivered to street addr) Room/suite PO Box 2109		
	City, town or country State ZIP code + 4 Kill Devil Hills NC 27948		G Gross receipts \$ 355,141.
	F Name and address of principal officer John Sanborn PO Box 2109 Kill Devil Hills NC 27948		
I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) (8) (Insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'No,' attach a list (see instructions) H(c) Group exemption number	

J Website: N/A
K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other **L** Year of Formation 2007 **M** State of legal domicile NC
Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities. <u>people helping people</u>		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	
	4	Number of independent voting members of the governing body (Part VI, line 1b)	
	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	
Revenue	6	Total number of volunteers (estimate if necessary)	
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	
	7b	Net unrelated business taxable income from Form 990-T, line 34.	
	Prior Year		Current Year
	8	11,455.	10,125.
	9	0.	
	10		
	11	134,758.	154,514.
	12	146,213.	164,639.
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 3-5)
14		Benefits paid to or for members (Part IX, column (A), line 4)	
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	
16a		Professional fundraising fees (Part IX, column (A), line 11)	
b		Total fundraising expenses (Part IX, column (D), line 25)	
17		81,868.	76,584.
18		144,916.	158,156.
19		1,297.	6,483.
Beginning of Current Year		End of Year	
20		33,813.	100,863.
Net Assets or Fund Balances	21	31,536.	92,103.
	22	2,277.	8,760.

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 (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer	Date 05/21/12	
	John Sanborn	Secretary	
Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date
	Kenneth Bukantas, EA		05/21/12
	Firm's name	Firm's EIN	Check <input type="checkbox"/> if self-employed PTIN P00039851
	Firm's address	Phone no.	
KEN BUKANTAS ACCOUNTING		56-2167201	
2224 S CROATAN HWY STE 16		(252) 480-3898	
NAGS HEAD NC 27959-8923			

May the IRS discuss this return with the preparer shown above? (see instructions)

☐ Yes ☒ No

BAA For Paperwork Reduction Act Notice, see the separate instructions.

TEEA0101 07/05/11

Form 990 (2011)

POSTMARK DATE AUG 23 2013

SEP 17 2013

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