

# See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Department of the Treasury Internal Revenue Service

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

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

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

benefit trust or private foundation)

OMB No 1545-0047 2011

Open to Public Inspection

<u> </u>	For the	2011 cale	endar year, or tax year b	oeginning	April 1	, <b>2</b> 011, a	<u>nd endi</u>	ng	March	_31	, 20 12	
В	Check if	applicable	C Name of organization B	.P.O. Elks, Da	anbury Lodge	No. 120, Inc.			D	Employ	er identification n	umber
$\overline{\mathbf{V}}$	Address	change	Doing Business As Dai	nbury Elks Lo	dge No. 120	,					06-0258842	
$\overline{\Box}$	Name ch	•	Number and street (or P			street address)	Room/s	uite	l E	Telepho	ne number	
H		•	36 Tamarack Avenue			o.: oo: uou: ooo,		ite 114		, о.ор., о.	203 791-0919	
H	Initial ret		City or town, state or cou	inter and 7ID :	4			114	<del></del>		203 /31-0313	
H	Terminal		•	•	4							04000 00
님	Amende		Danbury, CT 06811-48		Adiabast tab						· · · · · · · · · · · · · · · · · · ·	94880.99
ш	Applicati	on pending	F Name and address of pri	ncipal officer	Michael Jabe	er					for affiliates?   Yes	
			Same as C Above					Н(ь			ncluded? 🗌 Yes	
<u> </u>		npt status		✓ 501(c) ( 8	) ◀ (insert no	) 4947(a)(1) or	527		If "No,"	attach a	a list (see instruction	ons)
J	Website							H(c	) Group e	xemption	number >	1156
_		organization	Corporation Trust	Association	Other ▶	L Yea	r of forma	ation	1889	M State	of legal domicile	СТ
P	art I	Summ	nary									
	1	Briefly de	escribe the organization	on's mission	or most sign	ificant activities:	To in	culcate	the prin	ciples c	of Charity, Justin	ce,
•	i	Brotherly	y Love and Fidelity; to p	promote the w	velfare and er	hance the happin	ness of i	ts mem	bers; to	quicke	n the spirit of A	merican
Governance	ł	patriotis	m; to cultivate good fel	lowship and p	perputate itse	ld as a fraternal o	rganiza	tion.				
Ē												
Š	2	Check th	ns box ▶ 🔲 if the orga	inization disc	ontinued its	operations or dis	sposed	of more	e than 2	5% of	ıts net assets.	
ૣૢઌૢૻ	3		of voting members of			· ·				3	[	9
≱ార్జ	4		of independent voting	_		-				4		7
/ © ZU) Activities	5		mber of individuals em		•	• • •		,		5	<del></del> -	5
ا⊈ ھ	6		mber of volunteers (es		•	tori (rait v, iiile	2a)			6		30
Acti હ	1 _					=(G), t0, = 10, =	<del></del>			_	<u> </u>	
_	7a		elated business reven				• •			7a		0
₫—	b	Net unre	lated business taxable	e income troi	n Form 99 <u>0-</u>	1, line 34	<del>-iol</del> i			7b		0
7	_				<b>│</b> ←│ ,,,	N 0 0	SSI		Prior Year		Current Y	
) <b>e</b>	8		tions and grants (Part		. [품] 기미	N · 0 · 8 · 2012	S-O			85.00		2370 50
Nevenue Revenue	9		service revenue (Part		ا ا	<u></u>	18			864 60		18641.00
Revenue Revenue	10		ent income (Part VIII, c				_=		690	922.82		1653.13
	11	Other rev	venue (Part VIII, colum	ın (A), lınes 5	, 6d, 8c, 96,	10c, Gnd 11e) .			6	681.55		28022.45
§	12	Total rev	enue—add lines 8 thro	ugh 11 (must	t equal Part V	'III, column (A), Iir	ie 12)		718	553 97		50687.08
)	13	Grants a	nd similar amounts pa	aid (Part IX, c	olumn (A), lır	nes 1-3)				0		0
	14	<b>Benefits</b>	paid to or for member	rs (Part IX, co	olumn (A), lın	e 4)				0		0
S	15	Salaries,	other compensation, e	mployee bene	efits (Part IX,	column (A), lines (	5–10)		2723 99			2335 50
nse	16a	Profession	onal fundraising fees (	Part IX, colur	nn (A), line 1	1e)				0		0
Expenses	Ь		draising expenses (Pa			•	0					
Щ	17		penses (Part IX, colun						60	770.46		71827 54
	18		penses. Add lines 13-			•	a			494.45		74163.04
	19		e less expenses. Subtr				-			059.52		23475.96)
		110 VOII GO	1033 expenses: oubli	act inte 10 in	OIII III E 12	<u></u>	• •	Beginnir	ng of Curr		End of Ye	
ets or	20	Total acc	cote (Port V. line 16)					203		728.31	ļ	87719.10
SSe Rats	20		sets (Part X, line 16)									
Net Asse Fund Bals	21		oilities (Part X, line 26)				• •			653.51		34120.26
			ets or fund balances. S	subtract line	21 from line	20			8//	074.80	8	53598.84
	art II		ture Block									
			ury, I declare that I have exa lete Declaration of preparer								my knowledge and	belief, it is
	e, conec	t, and comp	nete Declaration of preparer	(Other trial office	er) is based on	an imormation of whic			y Kilowiec	ye	1 1 1 0 2 15	<u> </u>
٥.			~ 10000	<u>u.                                    </u>						3/3	1 / 20 /2	
Sig		Sign	nature of officer		/				Date	/	/	
He	ere	<b>I L</b> _	VIONN	Janu		.=						
		14	e or print name and title	<u> </u>								
Pa	nid	Print/Ty	pe preparer's name	Pre	parer's signature	•		Date		Check	If PTIN	
	epare	r								self-em		
	se Onl		name 🕨						Firm's	EIN ▶		
08	JO OIII	עי 💳	address ▶						Phone			
Ma	y the IF		s this return with the p	oreparer sho	wn above? (s	see instructions)					Ye	s 🗍 No
_	•		ıction Act Notice, see t	<u> </u>	·	· ·	Cat	No 1128	2Y			990 (2011)

Part	
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
	To inculcate the principles of Charity, Justice, Brotherly Love and Fidelity; to promote the welfare and enhance the happiness of its members; to quicken the spirit of American patriotism; to cultivate good fellowship and to perpetuate itself as a fraternal
	organization
	Ulgarization
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	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
	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
	grants and anocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	The cardinal principles of the organization are Charity, Justice, Brotherly Love and Fidelity. These principles are exemplified at each
	of the 21 regular Lodge meetings and at various special meetings attended by the membership.
	***************************************
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$)
7.0	The welfare and happines of the members are promoted and enhanced through the social activities provided in the Lodge facilities.
40	(Code:) (Expenses \$including grants of \$) (Revenue \$)
4c	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )  Community service is provided by the membership to the local communities primarily by members donating their time. Additionally
	we provide various youth directed activities throughout the year including the nationally recognized "Hoop Shoot" and "Soccer
	Shoot Out" programs.
	Other and the second (December in School de C.)
4d	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )
	Total program service expenses
. •	

art	V Checklist of Required Schedules			<u> </u>
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		<b>√</b>
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		<b>/</b>
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		1
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 for which 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		<b>✓</b>
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	-	1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	<b>✓</b>	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	· · ·	1
С	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	11c		1
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	11d		1
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	✓	
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	11f		1
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		✓
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		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
14 a	э э э э э э э э э э э э э э э э э э э	14a		✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV.	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		<b>▼</b>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		<b>√</b>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  If "Yes," complete Schedule G, Part III	19	1	
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	۲	1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		† ·

Part	V Checklist of Required Schedules (continued)	•		
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
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	.,	1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		<b>√</b>
24a	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, 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		<b>√</b>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b	-	
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		
b	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		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		<b>√</b>
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):	ş4 ,		
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		<b>√</b>
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	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	29		<b>√</b>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	30		<i>y</i>
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		1
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		1
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		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<b>√</b>
36	meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		✓
37	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
<b>-</b> ,	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,  Part VI	37		/
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	1	·

Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	_		<u> </u>
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1c	✓	
Lu	Statements, filed for the calendar year ending with or within the year covered by this return 2a 5			l
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	/	<u> </u>
-	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)		<b>V</b>	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		7
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority		· .	
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			_
	account)?	4a		<b>/</b>
b	If "Yes," enter the name of the foreign country:			
_	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<b>√</b>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<b>-</b>
6a	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<del> </del>
	organization solicit any contributions that were not tax deductible?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			<del>                                     </del>
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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?	7a		<u>.</u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>-</b> -		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7c		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	<u> </u>	ļ
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	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_		-
9 a	Sponsoring organizations maintaining donor advised funds.  Did the organization make any taxable distributions under section 4966?		ļ	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
10	Section 501(c)(7) organizations. Enter:	35	ļ	
а	Initiation fees and capital contributions included on Part VIII, line 12			
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			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
100	against amounts due or received from them.)			
12a b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b	12a	<del> </del>	-
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
.о	Is the organization licensed to issue qualified health plans in more than one state?	13a	<del>                                     </del>	
_	Note. See the instructions for additional information the organization must report on Schedule O.	.56	<del> </del>	<u> </u>
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			
C	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	L	<b>√</b>
h	If "Ves " has it filed a Form 720 to report those payments? If "No " provide an evaluation in Schoolide O	1446	i	

	VI Courses Management and Birding Free 1 (0) / "			Page O
Part	, , , , , , , , , , , , , , , , , , , ,			
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S Check if Schedule O contains a response to any question in this Part VI			
Secti	on A. Governing Body and Management	<u> </u>	•	. 🗸
<u> </u>	on 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   1a   9	Γ	-	
	If there are material differences in voting rights among members of the governing body, or	1		
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 7			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	L		
	any other officer, director, trustee, or key employee?	2	✓	
3	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		<b>√</b>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		<b>V</b>
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		✓
6 7a	Did the organization have members or stockholders?	6	<b>V</b>	
14	one or more members of the governing body?	7a	1	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	/d	<u> </u>	
U	stockholders, or persons other than the governing body?	7b	✓	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			1
	the year by the following:			
а	The governing body?	8a	1	
b	Each committee with authority to act on behalf of the governing body?	8b	1	
9	Is there any officer, director, 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		✓
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever	ue C		
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	<u> </u>	1
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
110	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a b	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990.	11a		<b>/</b>
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		1
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		\ <u> </u>
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120		
_	describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		1
14	Did the organization have a written document retention and destruction policy?	14		1
15	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?		ļ	
а	The organization's CEO, Executive Director, or top management official	15a		<b>✓</b>
b	Other officers or key employees of the organization	15b		1
	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		<b>/</b>
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16h		ļ
Secti	on C. Disclosure	16b	<u> </u>	<u>L</u>
17	List the states with which a copy of this Form 990 is required to be filed ► N/A			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	n 501	(c)(3)s	only)
	available for public inspection. Indicate how you made these available. Check all that apply.	1	. ,,-,-	,
	☐ Own website ☐ Another's website ☑ Upon request			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of	of inte	rest p	oolicy,
	and financial statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records	of the	•	
	Organization: Industrial Industri			

Form	990	(201	1)

Page 7

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

### 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 no	r any relate	d org	anız	atic	n c	ompe	nsa	ated any currer	t officer, director	r, or trustee.
				((	C)					•
(A)	(B)	١			ition			(D)	(E)	(F)
Name and Title	Average					e than o		Reportable	Reportable	Estimated
	hours per					or/trust		compensation	compensation from	
	week (describe	익고	Ins	Ω	8	٩,Ę	77	from the	related organizations	other compensation
	hours for	dire	ğ	Officer	g.	p of the	Former	organization	(W-2/1099-MISC)	from the
	related organizations	Individual trustee or director	lon		Key employee	968		(W-2/1099-MISC)	1	organization and related
	ın Schedule	trus	al tru		) y	<u>ặ</u>				organizations
	O)	<b>6</b>	Institutional trustee		_	Highest compensated employee				-
		-				_				
(1) Michael Jaber	1									
Exalted Ruler	10	1		✓				0	0	0
(2) Randy Wallace	_						1			
Esteemed Leading Knight	6	✓		✓				0	0	0
(3) Suzanne Novaco	1			1				1		
Esteemed Loyal Knight	2	✓		✓				0	0	0
(4) Lisa Knapp					ĺ					
Esteemed Lecturing Knight	2	<b>✓</b>		✓				0	0	0
(5) Norm Figgs	]									
Chairman, Board of Trustees	8	✓		✓				430.50	0	0
(6) Debbi Kemlage	]			1						
Trustee	6	<b>✓</b>		✓				285.00	0	0
(7) Steven Parker	_									
Trustee	2	✓		✓	<u> </u>			0	0	0
(8) Brian McCullough										
Trustee	2	✓		✓				0	0	0
(9) Jack Knapp	]									!
Trustee	2	1		✓			ļ	717.50	0	0
(10) William Chinn										-
Secretary	8			✓				0	0	0
(11) John Tanner										-
Treasurer	6			✓				0	0	0
(12) George Haber										
Esquire	2			✓				0	0	o
(13) Robert Walsh										
Tiler	2			✓				0	О .	0
(14) John Wallace										
Chaplain	2			✓			L	0	0	0

Part	VII Section A. Officers, Directors, Trust	ees, Key E	mplo	yees	s, ar	nd F	lighes	st C	ompensated E	mployees (co	ntinueo	)		
	(A) Name and title	(B) Average hours per week	box,	unles	Pos neck s pe	rson	than on the thick the thic	an (ee)	(D)  Reportable compensation from	(E) Reportable compensation fro	om	(F) Estima amoui	ated nt of	
		(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS	C)	compen from organiz and rel organiza	sation the ration lated	
(15) Le	slie Jaber													
Inner	Guard	2			✓			<u> </u>	0		0			0
(16)														
(17)					ŀ									
(18)		-												
(19)														
(20)										-				
(21)					-									
(22)														
(23)														
(24)														
(25)		-												
1b	Sub-total			•			•	<b>&gt;</b>	1433.00		0			0
c d	Total from continuation sheets to Part Total (add lines 1b and 1c)	=		٠	•	•	•		1433 00		0			0
2	Total number of individuals (including but reportable compensation from the organic	t not limited	to th					e) w	L	1		f		
	reportable compensation from the organi	ization - c			-			-					res N	No
3	Did the organization list any former of							emp	oloyee, or high	est compens	ated			
_	employee on line 1a? If "Yes," complete							•			•	3		<u>/</u>
4	For any individual listed on line 1a, is the organization and related organizations													
	individual					, , ,						4		/
5	Did any person listed on line 1a receive of for services rendered to the organization									zation or indiv		5		
Section	on B. Independent Contractors		•						•					
1	Complete this table for your five highest compensation from the organization. Repyear.												ı's tax	
	(A) Name and business add	tress							(B) Description of s	ervices	Co	(C) mpensat	tion	
N/A	7 7							-						
								<u> </u>						
	<del></del>							-						
2	Total number of independent contractor received more than \$100,000 of compen							o th	nose listed ab	ove) who				

	0 (2011 VIII	Statement of Revenue	<u> </u>					Page 9
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts	1a	Federated campaigns	. 1a	0				
and Other Similar Amounts	b	Membership dues	. 1b	0				
<u>ا</u> ڇ	С	Fundraising events	. 1c	0		1		
<u>a</u>	d	Related organizations	. 1d	0				
<u>Ē</u>	е	Government grants (contribution		0				
င္က	f	All other contributions, gifts, gra						
<b>ĕ</b>		and similar amounts not included a		2370 50				
필	g	Noncash contributions included in lir		0				
	<u>h</u>	Total. Add lines 1a-1f			2370.50			
riogiani seivice nevenue				Business Code				
	<b>2</b> a	Membership Dues & Fees		813410	16954.00	16954.00	0	0
ב	b	Member Rentals		813410	1140.00	1140.00	0	0
§	С	Contributions for Programs		813410	547.00	547.00	0	0
ן מ	d							
	е							
<u> </u>	f	All other program service re						<del> </del>
Ξ	_ <u>g</u>	Total. Add lines 2a-2f			18641.00			
	3	Investment income (include						
	_	and other similar amounts)		L	1639.10	0	0	1639.10
	4	Income from investment of tax	•	· .	0	0	0	0
ĺ	5	Royalties	i) Real		0	0	0	0
	•			(ii) Personal	j			
	6a	Gross rents	30535.30	0	ì			
	b	Less: rental expenses	0	0				
	C	Rental income or (loss)	30535.30	0	20525 20			
	d 70	Net rental income or (loss)  Gross amount from sales of (i) S		(ii) Other	30535.30	30535.30	0	0
	7a	assets other than inventory	0	14 03				
	b	Less: cost or other basis and sales expenses .	0	0				
	C	Gain or (loss)	0	14.03				
	d	Net gain or (loss)		▶	14.03	14.03	O	0
	8a	Gross income from fundrais events (not including \$ of contributions reported on I See Part IV, line 18	0 ine 1c).					
<u> </u>			-					
5		Less: direct expenses				-		·· · · · · · · · · · · · · · · ·
	C	Net income or (loss) from fu Gross income from gaming		events . >	0		0	
	Ja	See Part IV, line 19		404000.05				
	b	Less: direct expenses Net income or (loss) from g			2200 10		<del>-</del>	2200 10
	C 1∩a	Gross sales of invento		VILLES P	3209.19	0		3209.19
	104		· · · a	17619.01	j			
	b	Less: cost of goods sold .	-	<u> </u>	İ			
		Net income or (loss) from sa			(5722.04)	(5722.04)	o	
┢		Miscellaneous Revenue		Business Code	(3722.04)	(3722.04)		
İ	11a							
	b							
	C							
	d	All other revenue						
	е	Total. Add lines 11a-11d .		•	0			
		Total revenue. See instruc						

## 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).

	Check if Schedule O contains a respon-	se to any question i	n this Part IX	<u> </u>	<u> </u>
	t include amounts reported on lines 6b, 7b, , 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 United States. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22	0			
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
_	United States. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,				
^	trustees, and key employees	2335.50	<del></del>		
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	o			
7	Other salaries and wages	0			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	o			
9	Other employee benefits	0			
10	Payroll taxes	243 13			
11	Fees for services (non-employees):				
а	Management	0			
b	Legal	5722.00			
C	Accounting	0			
d	Lobbying	0			
e	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees	0			
g 12	Other	(60 00)			
12 13	Advertising and promotion	3312.17			
14	Information technology	0			
15	Royalties	0			
16	Occupancy	31484.98			
17	Travel	0	•		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
19	Conferences, conventions, and meetings .	2816 84			
20	Interest	621.12			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization .	1109.28 1717.00			
23 24	Insurance	1717.00			
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)	ĺ			}
а	Taxes	17345 84			,
b	State & National per capita fees	3091.20			
С	Donations	963.10			
d	Supplies	3257 63			
е	All other expenses Dignitary Visitations	203.25	· -		
25	Total functional expenses. Add lines 1 through 24e	74163.04	-		
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here   If following SOP 98-2 (ASC 958-720)				
				L	

P	art X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	18735.81	1	28999.97
	2	Savings and temporary cash investments	789538.65	2	6 86
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	0	4	363.60
	5	Receivables from current and former officers, directors, trustees, key	-		
		employees, and highest compensated employees. Complete Part II of Schedule L			
			0	5	0
	6	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			
ets		employees' beneficiary organizations (see instructions)	0	6	0
Assets	7	Notes and loans receivable, net	0	7	0
⋖	8	Inventories for sale or use	6004 08		630.25
	9	Prepaid expenses and deferred charges	74832.22	9	46128.16
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a 841243.02			
	b	Less: accumulated depreciation 10b 29652.76	<b>.</b>		811590 26
	11	Investments—publicly traded securities	0		0
	12	Investments—other securities. See Part IV, line 11		12	0
	13	Investments—program-related. See Part IV, line 11	<b></b>	13	0
	14	Intangible assets		14	0
	15	Other assets. See Part IV, line 11		15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	892728.31		887719 10
	17	Accounts payable and accrued expenses	3110.36		22558 16
	18	Grants payable	0	-	0
	19	Deferred revenue	11417.95	_	9598 90
	20	Tax-exempt bond liabilities	0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .	0	21	0
es	22	Payables to current and former officers, directors, trustees, key			
Liabilities		employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			
įä		·	0		0
_	23	Secured mortgages and notes payable to unrelated third parties	0		0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X	4405.00		4052.00
		of Schedule D	1125.20		1963 20
			45050 54	25	24420.20
_	26	Total liabilities. Add lines 17 through 25	15653.51	26	34120.26
Ses		lines 27 through 29, and lines 33 and 34.			
аŭ	27	Unrestricted net assets		27	
Bal	28	Temporarily restricted net assets		28	
ᅙ	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34.			
S O	30	Capital stock or trust principal, or current funds	3579 25	30	1883 03
šet	31	Paid-in or capital surplus, or land, building, or equipment fund	3373 23	<del>                                     </del>	1883 03
ASS	32	Retained earnings, endowment, accumulated income, or other funds	873495.55	+	851715 81
et.	33	Total net assets or fund balances	877074.80		853598.84
Ż	34	Total liabilities and net assets/fund balances	892728.31	-	887719.10
	1 0-4	Total natimites and het assets/fully baldifices	052/20.31	<u> </u>	Form <b>990</b> (2011)

_	-	_
Page	7	~
ı ayç		٠.

Part	XI Reconciliation of Net Assets			
	Check if Schedule O contains a response to any question in this Part XI			
1	Total revenue (must equal Part VIII, column (A), line 12)		506	87.08
2	Total expenses (must equal Part IX, column (A), line 25)		741	63 04
3	Revenue less expenses. Subtract line 2 from line 1		(2347	75.96)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		8770	74 80
5	Other changes in net assets or fund balances (explain in Schedule O)			0
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,			
	column (B))		8535	98.84
Part				
	Check if Schedule O contains a response to any question in this Part XII			. 🗆
			Yes	No
1	Accounting method used to prepare the Form 990:  Cash Accrual Other			
	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	1	
b	Were the organization's financial statements audited by an independent accountant?	2b	<u> </u>	1
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	1	•
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:			
	☐ 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 Single Audit Act and OMB Circular A-133?	За		1
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		
		Fon	n <b>99</b> 0	(2011)

#### **SCHEDULE D** (Form 990)

# **Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. OMB No 1545-0047 201

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury ▶ Attach to Form 990. ▶ See separate instructions. Employer identification number

B.P O. Elks, Danbury Lodge No. 120, Inc. 06-0258842 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. Total number at end of year . . . . . 2 Aggregate contributions to (during year) . Aggregate grants from (during year) . . 3 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 ☐ Yes ☐ No Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Total number of conservation easements . . 2a Total acreage restricted by conservation easements . . . . . . . . 2b Number of conservation easements on a certified historic structure included in (a) . . . . Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? . . . . . . . . . . . . . . . . Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) 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. 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. 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: 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: Assets included in Form 990, Part X .

Pa	ae	2

Part	III Organizations Maintaining	Collections of	of Art, His	torical 1	Treasures,	or Ot	ner Similar As	sets (continued)
3	Using the organization's acquisition, collection items (check all that apply):	accession, and	other reco	rds, chec	k any of the	e follow	ring that are a s	significant use of its
а	☐ Public exhibition		d	☐ Loan	or exchange	e progr	ams	
b	☐ Scholarly research							
С	☐ Preservation for future generations							
4	Provide a description of the organizat XIV.	ion's collection	s and expl	aın how t	hey further t	the org	anızatıon's exer	mpt purpose in Part
5	During the year, did the organization assets to be sold to raise funds rather							
Dart	IV Escrow and Custodial Arra							
Ган	line 9, or reported an amoun				janization a	ai iSWEi	ed les lore	onn 990, Fartiv,
	Is the organization an agent, trustee,				or contributi	ons or	other assets n	ot
	included on Form 990, Part X?							□ Yes □ No
b	If "Yes," explain the arrangement in Pa							
				<b>.</b>			Α	mount
С	Beginning balance					1c		
d	Additions during the year					1d		·
е	Distributions during the year					1e		<u> </u>
f	Ending balance					1f		
2a	Did the organization include an amour	nt on Form 990,	Part X, line	21? .				☐ Yes ☐ No
	If "Yes," explain the arrangement in Pa							
Par	V Endowment Funds. Comple							
		(a) Current year	(b) Pr	or year	(c) Two years	s back	(d) Three years bac	k (e) Four years back
1a	Beginning of year balance							
b	Contributions							
С	Net investment earnings, gains, and							
_	losses	· · · · · · · · · · · · · · · · · · ·					<del>_</del>	
	Grants or scholarships							
е	Other expenditures for facilities and programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of t			ce (line 1g	g, column (a)	)) held a	as:	
a	Board designated or quasi-endowmer		%					
b	Permanent endowment ▶	%						
С	Temporarily restricted endowment ▶		10004					
20	The percentages in lines 2a, 2b, and 2 Are there endowment funds not in the	•		ration th	at are hold (	and ad	ministered for th	
Ja	organization by:	e possession of	the organ	ization in	at are neid a	and au	ministered for ti	Yes No
	(i) unrelated organizations							3a(i)
	(ii) related organizations							3a(ii)
b	If "Yes" to 3a(ii), are the related organi		s required (	n Sched	 Jule R?			3b
4	Describe in Part XIV the intended uses							
Part						,·-		
	Description of property	(a) Cost o	r other basis stment)	(b) Cost	or other basis other)		Accumulated epreciation	(d) Book value
1a	Land				699066.31			699066.31
b	Buildings		0	+	108373.00		0	108373 00
c	Leasehold improvements		0	1	2548.66		31.92	2516 74
d	Equipment		0	1	31255.05		29620 84	1634 21
е	Other		C	)	0		0	0
Total.	Add lines 1a through 1e. (Column (d) n	nust equal Form	990, Part	X, columi	n (B), line 10	(c).)	•	811590.26

Part VII	Investments—Other Securities.	See Form 990, Part X, I	ine 12.	r age o
	a) Description of security or category (including name of security)	(b) Book value	(c) Method of val Cost or end-of-year n	
(1) Financia	I derivatives			
	held equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)	•			
(F)				
(G) (H)	•			-
(l)				
	(b) must equal Form 990, Part X, col. (B) line 12)			
Part VIII	Investments—Program Related	L See Form 990 Part X	line 13	
	(a) Description of investment type	(b) Book value	(c) Method of va	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)			<u> </u>	
(8)		-		
(9)				
(10) Total, (Column	(b) must equal Form 990, Part X, col. (B) line 13.) ▶			
Part IX	Other Assets. See Form 990, Pa	rt X. line 15	<u> </u>	
		) Description	•	(b) Book value
(1)	·			
(2)				
(3)				
(4)				
_(5)				
(6)				
(7)				
(8)	<del>-</del>			<del> </del>
<u>(9)</u> (10)				
	umn (b) must equal Form 990, Part X, co	ol. (B) line 15.)		
Part X	Other Liabilities. See Form 990,			
1.	(a) Description of liability	(b) Book value		
(1) Federal	Income taxes		]	
	ational Foundation Contributions	1963.20	]	
(3)				
(4)				
(5)				
(6)	<del></del>		-	
(7)			-	
(9)			1	
(10)			1	
(11)	<del></del>		1	
	(b) must equal Form 990, Part X, col. (B) line 25.)	1963.20	1	
	ASC 740) Footnote. In Part XIV. provide			ments that reports the

Schedu	le D (Form 990) 2011		Page <b>4</b>
Par	XI Reconciliation of Change in Net Assets from Form 990 to A	Audited Financial Staten	nents
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1
2	Total expenses (Form 990, Part IX, column (A), line 25)		2
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3
4	Net unrealized gains (losses) on investments		4
5	Donated services and use of facilities		5
6	Investment expenses		6
7	Prior period adjustments		7
8	Other (Describe in Part XIV.)		8
9	Total adjustments (net). Add lines 4 through 8		9
10	Excess or (deficit) for the year per audited financial statements. Combine	e lines 3 and 9	10
Part	XII Reconciliation of Revenue per Audited Financial Statem	nents With Revenue per	r Return
1	Total revenue, gains, and other support per audited financial statements	3	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments		<u> </u>
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV.)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		_
b	Other (Describe in Part XIV )	4b	
c	Add lines 4a and 4b		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		
Part			
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 - 1	
а	Donated services and use of facilities		_
b	Prior year adjustments		_
С	Other losses	<del>-  </del>	_
d	Other (Describe in Part XIV.)		
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b		-
b	Other (Describe in Part XIV.)	<u> </u>	<del>- </del>
с 5	Add lines <b>4a</b> and <b>4b</b>		4c
		irie 10.)	5
Part		d O Dark III to a da a and da	Dat N/ Page 45 and 61
Part \	elete this part to provide the descriptions required for Part II, lines 3, 5, and fines 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XII diditional information.		

chedule D (Form 990) 2011 Page 5 Part XIV Supplemental Information (continued)					
art XIV	Supplemental Information (continued)				
		, ,			
	••••••				
		•			
		•			
+					
		•••••			
		·			

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

1

2

3

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

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. Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. Name of the organization Employer identification number B P O. Elks, Danbury lodge No. 120, Inc. 06-0258842 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Part I 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. 1 а ☐ Mail solicitations e Solicitation of non-government grants b ☐ Internet and email solicitations f Solicitation of government grants ☐ Phone solicitations g 

Special fundraising events ☐ In-person solicitations 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 have (vi) Amount paid to (i) Name and address of individual (iv) Gross receipts from activity (or retained by) fundraiser listed in custody or control of contributions? (or retained by) organization (ii) Activity or entity (fundraiser) col (i) Yes No

4							
5							
6							
7							
8							
9		-					
10			_	<del>                                     </del>			
Total 3	List all states in which the registration or licensing.	organization is re	gistered or li	► censed to s	colicit contribution	ons or has been notifi	ed it is exempt from
	•						

Pa	rt II	Fundraising Events. Con than \$15,000 of fundraisingross receipts greater tha	ng event contributions			
		<u> </u>	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through
ø.			(event type)	(event type)	(total number)	col (c)).
Revenue	1 2	Gross receipts Less: Charitable				
	3	contributions				
	4	Cash prizes				
	5	Noncash prizes				
enses	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
Direc	8	Entertainment				
	9	Other direct expenses .				
	10 11	Direct expense summary. Ad Net income summary. Comb	ld lines 4 through 9 in co	olumn (d) nd line 10		( )
Pa	rt III	Gaming. Complete if the than \$15,000 on Form 9	e organization answer	red "Yes" to Form 99	0, Part IV, line 19, or	reported more
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
<u>~</u>	1	Gross revenue	123612.05	450 00	0	124062.05
ses	2	Cash prizes	104276 30	150.00	0	104426.30
rect Expenses	3	Noncash prizes	0	0	0	0
Direct	4	Rent/facility costs	12475.00	0	0	12475 00
	5	Other direct expenses .	3876.56	75.00	0	3951 56
	6	Volunteer labor	<ul><li>✓ Yes 100 %</li><li>☐ No</li></ul>	<ul><li>✓ Yes 100 %</li><li>☐ No</li></ul>	☐ Yes%	
	7	Direct expense summary. Ac	ld lines 2 through 5 in c	olumn (d)		( 120852.86 )
	8	Net gaming income summar	y. Combine line 1, colur	nn d, and line 7		3209.19
g	a Is	nter the state(s) in which the or the organization licensed to o "No," explain:		in each of these states	?	
10		ere any of the organization's g "Yes," explain:	aming licenses revoked	· •	• •	

schedu	ile G (Form 990 or 990-E∠) 2011	age 🍑
11 12	Does the organization operate gaming activities with nonmembers?	
13	Indicate the percentage of gaming activity operated in:	140
а		%
b	An outside facility	
14	Enter the name and address of the person who prepares the organization's gaming/special events books and	
	records:	
	Name ► John Tanner, Lodge Treasurer	<b>-</b>
	Address ► 42 Driftway Road, Danbury, CT 06810-7043	
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	No
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the	
	amount of gaming revenue retained by the third party ▶ \$	
С	If "Yes," enter name and address of the third party:	
	Name ►	
	Address ▶	
16	Gaming manager information:	
	Name ► Celine Hanna (Bingo and member of Organization) and William Chinn (Sealed Tickets and Officer of Organization)	
	Gaming manager compensation ▶ \$ 0.00	
	Description of services provided   Members in Charge per State Statutes	
	☐ Director/officer ☐ Employee ☐ Independent contractor	
17	Mandatory distributions:	
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$	
Part	Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).	

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

# Supplemental Information to Form 990 or 990-EZ

20**11** 

Employer identification number

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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.

B.P.O. Elks, Danbury Lodge No. 120, Inc.	06-0258842
Form 990, Part VI, Line 2 - Exalted Ruler Michael Jaber is the husband of Inner Guard Leslie Jaber, Ch	naplaın John Wallace is the son of
Esteemed Leading Knight Randy Wallace. Trustee Jack Knapp is the husband of Esteemed Lecturing	Knight Lisa Knapp.
Form 990, Part VI, Line 6 - The organization has 228 members st the start of the fiscal year and 201 at	its end.
Form 990, Part VI, Line 7a & b - All currently paid members have the right to elect members of the gov	erning body at the annual election of
officers Any currently paid member is entitled to participate in all Regular and Special meetings of the	e Lodge and at such meetings can
ratify, change, modify or override the decisions of the governing body (composed of the Trustees and	d Exalted Ruler, Esteemed Leading
Knight, Esteemed Loyal Knight and Esteemed Lecturing Knight) of the Lodge.	
Form 990, Part VI, Line 11b - No review was or will be conducted.	
Form 990, Part VI Section C Disclosure, Line 19 = No documents made available to the public.	
	, 