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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)

Open to Public

OMB No 1545-0047

Department of the Treasury

▶ The organization may have to use a copy of this return to satisfy state reporting requirements Inspection Internal Revenue Service For the 2011 calendar year, or tax year beginning 4/1/2011 and ending 3/31/2012 D Employer identification number C Name of organization Check if applicable **BPOE Jefferson Lodge 2306** Address change Doing Business As 42-0889496 Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number Name change Initial return 515 386 4125 City or town, state or country, and ZIP + 4 Terminated Jefferson 50129 G Gross receipts \$ Amended return 177,704 F Name and address of principal officer Application pending Yes X H(a) Is this a group return for affiliates? Jerry Roberts 506 S Walnut St, Jefferson, IA 50129 H(b) Are all affiliates included? If "No," attach a list (see instructions) 501(c)(3) X 501(c)) < (insert no) 4947(a)(1) or Tax-exempt status Website: ► N/A H(c) Group exemption number ► 1156 X Other ▶ Form of organization Corporation Trust Association L Year of formation M State of legal domicile 1964 IΑ Part I Summary Briefly describe the organization's mission or most significant activities. To support the principles of our Order, charity, justice, brother love and fidelity and to practice those principles as members of Activities & Governance the Lodge. To give support to our community with special concern to our youth and veterans. 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) 3 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) Total number of volunteers (estimate if necessary) 6 Total unrelated business revenue from Part VIII, column (C), line 12 7a Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) 0 63,520 171,122 26,212 9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 0 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 0 54.792 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 171,122 12 144,524 13 Grants and similar amounts pard (Part X) column (A), lines 1-3) 0 14 Benefits paid to br for members (Part IX, column (A), line 4) 0 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 25.746 28,437 Professional fundraising fees (Rant X, column (A), line 11e)
Total fundraising expenses (Part IX, column ⊕), line 25) ▶ 16a b Other expenses (PenuX, column A) lines 1 a-11d, 11f-24e) : 96,842 17 134,518 Total expenses Add lines (3) (2) (a) Fequal Part IX, column (A), line 25) 18 160,264 . . . 125,279 Revenue less expenses Subtract line 18 from line 12 19.245 19 10.858 **Beginning of Current Year** End of Year 84,292 20 Total assets (Part X, line 16). ---112,236 21 Total liabilities (Part X, line 26) 796 700 22 Net assets or fund balances Subtract line 21 from line 20 83,496 111,536 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 ٠.١٤ 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 Signature of officer أدسى Here eereta. Joyce Fister Type or print name and title Date Preparer's signature Print/Type preparer's name ::-Check X Paid self-employed 9/18/2012 T M Wittrock T M Wittrock P01231871 Preparer Firm's name ► TM Wittrock Mgmt Firm's EIN ► 42-1324268 **Use Only** Firm's address ▶ 702 Madison St, Scranton, IA 51462 712 652 3916 Phone no

For Paperwork Reduction Act Notice, see the separate instructions. (HTA)

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

Form 990 (2011

Yes -

	90 (2011)		42-0889496	, 1994	Page 2
Pa	rt III	Statement of Program Service Accomplishments			
		Check if Schedule O contains a response to any question in this Part III		. 37	
1	Briefly o	lescribe the organization's mission			
		ort the principles of our Order, charity, justice, brother love and fidelity and to			
	practice	those principles as members of the Lodge, to give support to our community with			
	special	concern to our yourth and veterans			
				- ,	
2		organization undertake any significant program services during the year which were not listed on			_
	•	r Form 990 or 990-EZ?	\\	∕es .∑	∐No
		describe these new services on Schedule O.			
3		organization cease conducting, or make significant changes in how it conducts, any program			٦.
	services		\ \	res X	.∐ No
		describe these changes on Schedule O		, , ,	
4		e the organization's program service accomplishments for each of its three largest program service		-	
	•	es. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to rep			
	grants a	and allocations to others, the total expenses, and revenue, if any, for each program service reporte	d	13 7 7	
	· · · ·	000		2 1000 111 1110	
4a) (Expenses \$ 238 including grants of \$ 0) (Revenue			<u>)</u>)
		n Services			
					-
					·
					·
				•	
				1.3	
4b	(Code.) (Expenses \$ 0 including grants of \$ 0) (Revenue	\$	ļ (C))
				-1	<i></i> .
				:-::::::::::::::::::::::::::::::::::::	
					- -
					
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4c	(Code) (Expenses \$ 0 including grants of \$ 0) (Revenue	\$	i0	0)
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				Ų:	
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4d	•	rogram services. (Describe in Schedule O)	<u> </u>		-
	(Expens		0)		
4e	lotal p	rogram service expenses 238			

		-0889496	P	age 3
Par	t IV Checklist of Required Schedules		4	
	<u>.</u>		'Yès	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	ļ <u>. </u>	X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	-		<u> </u>
	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? <i>If "Yes," complete Schedule C, Part II</i>	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,		.	İ
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	5	 	_
U	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If		- 91	,
7	"Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space,	_6_	··· `	X
′	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	• ;	×
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			<u> </u>
_	complete Schedule D, Part III	8		×
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part		1,1	_
	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 temporarily restricted		٠,	
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	1	X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
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	X	
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	, i-	X
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		X
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	<u>.</u>	×
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part			X
	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		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," comp.	lete		
	Schedule D, Parts XI, XII, and XIII	12a	X	<u> </u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "You was the first transfer of the tax year? If "You was the first transfer of the tax year?"			l
40	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional		-	X
13 140	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13	 	X
	Did the organization maintain an office, employees, or agents outside of the office states? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	14a		 ^- -
	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		X
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		X
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	ľ ·	X
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		x
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		x
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		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	. 20a	,	X
	of If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
				

Part IV BPOE Jefferson Lodge 2306 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		_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		_X_
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		_X_
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		<u>X</u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		_X_
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	3		
انہ	to defease any tax-exempt bonds?	24c		$\frac{x}{x}$
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	:	
25a	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	25-	,1 1	
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a	25a	· -	
D	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	256		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	25b		
20	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	20		
	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		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions).		٦.	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	⁻	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete		1	
	Schedule L, Part IV	28b		Χ
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	i-	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29:	· -	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		_X_
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		<u> X</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?		<u>`</u>	
22	If "Yes," complete Schedule N, Part II	32		<u> </u>
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	,,	.	V
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	33		_X_
34	III, IV, and V, line 1	34		v
252	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		$\frac{x}{x}$
	Did the organization receive any payment from or engage in any transaction with a controlled entity within	33a		
~	the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	000		~~
-	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		<u> </u>	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part	1		
	V/	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	×	
		Form	990	(2011)

Form 990 (2011) Page 5 Statements Regarding Other IRS Filings and Tax Compliance Part V Check if Schedule O contains a response to any question in this Part V Yes Nο Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 0 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b ol Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c 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 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) Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a 3a If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b 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 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. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c 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? 6a 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). 7 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 If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c 7d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? е 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g q If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting 8 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 Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? 9a а h Did the organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter: 10a Initiation fees and capital contributions included on Part VIII, line 12 10b b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter. 11a Gross income from members or shareholders X Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 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. 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 Enter the amount of reserves on hand 13c Did the organization receive any payments for indoor tanning services during the tax year? 14a

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

14b

Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for 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.	a "No ee ins	o" structi	ons				
Sect	ion 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 7		**					
If there are material differences in voting rights among members of the governing body, or								
	if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.							
h								
ь 2								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?							
3	Did the organization delegate control over management duties customarily performed by or under the direct	2 :		X				
·	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3	1	Х				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X				
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	-	$\frac{\lambda}{X}$				
6	Did the organization have members or stockholders?	6	×					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint							
	one or more members of the governing body?	7a	.x					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,							
	stockholders, or persons other than the governing body?	7b	ⁱ 'X					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during							
	the year by the following:							
а	The governing body?	8a	Х					
ь	Each committee with authority to act on behalf of the governing body?	8b	X					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached	_	.	V				
Sact	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O ion B. Policies (This Section B requests information about policies not required by the Internal Revenue Co	9 '		X				
Ject	ion b. I oncies (This occitor b requests information about policies not required by the internal Nevenue of	/ue./	Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?	10a		X				
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,							
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?							
11a	a 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.							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		_X				
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	7.	X				
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		,					
42	describe in Schedule O how this was done .	12c	10.0%	X				
13 14	Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy?	13 14	, , , ,	X				
15	Did 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	14		_X_				
. •	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		- T-					
а	The organization's CEO, Executive Director, or top management official	15a	17.4	X				
b	Other officers or key employees of the organization	15b	7.7.1	X				
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		-7.					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement		ت- ت ن					
	with a taxable entity during the year?	16a		Х				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its		新加州					
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard							
0 1	the organization's exempt status with respect to such arrangements?	16b	h	_ X				
	List the states with which a copy of this Form 900 is required to be filed.		9 /					
17 18	List the states with which a copy of this Form 990 is required to be filed ► IA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(or 1024 if applicable)).	1/310	Oply					
. •	available for public inspection. Indicate how you made these available. Check all that apply	,,(3)3	Unity)	•				
	Own website Another's website X Upon request							
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest							
	policy, and financial statements available to the public.		<u> - دب</u>					
20	State the name, physical address, and telephone number of the person who possesses the books and records of the		, T.					
	organization. ► Joyce Fister 515 386 210	<u>6</u>	1 7	. 				
	103 W Harrison St, Jefferson, IA 50129		•					

Form 990 (2011)	BPOE Jefferson Lodge 2306	42-0889496	
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, H	ighest Compensated	36

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 granization'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 nor any related organization compensated any current officer, director, or trustee. (C) Position (B) (do not check more than one (D) (E) :(F) (A) Name and Title box, unless person is both an Reportable Reportable Estimated Average compensation compensation officer and a director/trustee) hours per amount of other from related week from Officer Highest compensated employee Individual trustee Institutional trustee Key employee compensation (describe the organizations (W-2/1099-MISC) organization hours for 1 from the (W-2/1099-MISC) related organization organizations and related in Schedule organizations , 0) がこうな (1) Joyce Fister 711 Х 1.200 5 00 0 Secretary 0 (2) Jerry Roberts 10.00 Х 0 0 Ruler 0 (3) Cliff Said 2.00 Χ 0 0 Lead Kn 0 (4) Hollie roberts Х Loval Kn 2.00 0 0 0 (5) Vacant 1 00 Lectruing 0 0 0 (6) Jonathon Smith -1 -4 ... 3 00 Х Treasurer 0 0 (7) Jim Speareman , A. . . . Х Chairman of Trustees 1.00 0 If(): -J. Hilliam j) r∈ 15 (9) ٠ کټـ (10)(14)

ar ar j , ar junar

Р	art VII Section A. Officers, Directors, T	ustees, Key E	mplo	yee	s, a	and	High	est	Compensated	Employees (co	ntınued)	_
		•			(C)						
	(A)	(B)	(do r	ot ch		sition more	e than	one	(D)	(E)	(F)	
	Name and title	Average hours per					is bot or/trus		Reportable compensation	Reportable compensation	Estimated amount of	
		week							from	from related	- ^{,)} 'other	
		(describe hours for	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization	organizations (W-2/1099-MISC)	compensation from the	
		related organizations	ictor tall	lona	ļ .	曺	yee g		(W-2/1099-MISC)		organization	
		ın Schedule	l ste	효		yee	nper				and related organizations	
		O)	ď	stee			nsate					
			<u> </u>		$ldsymbol{ldsymbol{ldsymbol{eta}}}$	<u> </u>	, a					
(15)												
(16)											-	
(17)					_						*	-
(18)											*597 (4	
(19)		i									31.	_
(20)											1 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	_
(21)						-					70 1 6 1 000 000 16 1 7 7 7	_
									-		n ligh	_
											ran di Diga	
(23)											. 1	
(24)												
(25)											*,7 **	_
1b	Sub-total						1	•	1,200	0		(
C	Total from continuation sheets to Part VII,	Section A						•	0			0
d_	Total (add lines 1b and 1c)	Unalka dika Abasa	Pata.	1 - 1-			L		1,200		·	_
2	Total number of individuals (including but not reportable compensation from the organization						no re	cei	/ed more than \$	100,000 of	.'	
	reportable compensation from the organization				<u> </u>						Ÿes No	_
3	Did the organization list any former officer, di	ector, or trustee	e, key	en	nplo	yee	e, or h	ngh	est compensate	ed		_
	employee on line 1a? If "Yes," complete Sche					•		_	•		3 X	
4	For any individual listed on line 1a, is the sum	of reportable c	ompe	nsa	tior	n an	d oth	er d	compensation from	om	- FIG.	
	the organization and related organizations gre	ater than \$150,	,000?	' If "	Yes	s," c	ompl	ete	Schedule J for	such		
	ındıvıdual .								•		4 ' X	_
5	Did any person listed on line 1a receive or acc for services rendered to the organization? If "									ndıvıdual	5 = X	
Sec	tion B. Independent Contractors											
1	Complete this table for your five highest comp compensation from the organization. Report of year.	•								•	n's tax	
	(A)						•		(B)		(C)	-
	Name and business add	ress							Description of sei	vices C	Compensation	_
		 										_(
								-		 		-(
												<u>-</u>
		·						<u> </u>				-
2	Total number of independent contractors (incl	-	nited	to t	hos	e lis	sted a	abo	ve) who receive	d		-
	more than \$100,000 of compensation from the	organization	•				n				1 -1	

Par	t VIII	Statement of Revenue						
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Grants	1a	Federated campaigns .	1a	0		-		,
3rai our	b	Membership dues	1b	19,079				,
S, C	С	Fundraising events .	1c	14,798	:			
Gifts, ular An	d	Related organizations .	1d	0				4-4
is, e	е	Government grants (contributions)	1e	0				
tior sr S	f	All other contributions, gifts, grants, and						, ,
the the		similar amounts not included above.	1f	29,643				1
Contributions, Gifts, Grants and Other Simılar Amounts	g	Noncash contributions included in lines 1a-1f.	\$	0				Si
<u>S</u> =	h	Total. Add lines 1a-1f		▶	63,520			. ity:
ne				Business Code				
ven	2a	Dances		900099	2,430	2,430		
å		Dinners		900099	10,502	10,502		
Š	С	Advertising		900099	940	940		
Ser	d	Donations		900099	4,770	4,770		
Tam	е	Other		900099	7,570	7,570		
Program Service Revenue	f	All other program service revenue			0			+ ' · · · · · · · · · · · · · · · · · ·
	g	Total. Add lines 2a–2f		•	26,212			
	3	Investment income (including dividends, int	eres	t, and				201
	_	other similar amounts)	_	▶	0			
	4	Income from investment of tax-exempt bond	d pro	ceeds ►	0			-
	5	Royalties		(v) Percent	0			
	_	(ı) Real		(II) Personal				
	6a		,235					
	b	Less rental expenses .	005					•
	C .	` '	,235	0	7.005			
	d	Net rental income or (loss) Gross amount from sales of (i) Security		(II) Other	7,235			
	7a	Ologo amount nom balos of						
		assets other than inventory	0	0				7
	O	Less' cost or other basis	0					~
	_	and sales expenses	0 0	0				·-
	۲ C	Gain or (loss)			0			
	d	Net gain or (loss) .				-		-
Other Revenue	8a	Gross income from fundraising		1				₩ ,
ě		events (not including \$ 0						+1 h.e.
፳		of contributions reported on line 1c)	_	ا				3 (4)
the		See Part IV, line 18 .	a b	0				
Ò		Less direct expenses Net income or (loss) from fundraising event	_	<u> </u>	0			
		Gross income from gaming activities.	.5		0			
	Ja	See Part IV, line 19	а	l				
	b	Less direct expenses .	b	Ö				
	1	Net income or (loss) from gaming activities			0			
		Gross sales of inventory, less	•					
	.00	returns and allowances	а	80,737		1		
	ь	Less. cost of goods sold .	b	33,180				4,50
	c	Net income or (loss) from sales of inventory	, ~	>	47,557			₹* -
		Miscellaneous Revenue		Business Code	,,			
	11a				0			
	b				0			
	С				0			
	d	All other revenue			0			
	е	Total. Add lines 11a-11d		. •	0			
	12	Total revenue. See instructions		•	144,524	26,212	0	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)	

Check if Schedule O contains a response to any question in this Part IX						
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) ⁻ Fundraising expenses	
1	Grants and other assistance to governments and				diese	
_	organizations in the United States. See Part IV, line 21	0			केदलं +	
2	Grants and other assistance to individuals in the					
_	United States See Part IV, line 22	0			******	
3	Grants and other assistance to governments,				14 50	
	organizations, and individuals outside the				٠.	
	United States See Part IV, lines 15 and 16	0				
4	Benefits paid to or for members .					
5	Compensation of current officers, directors,	4 900		4 000	- 4-	
6	trustees, and key employees . Compensation not included above, to disqualified	1,800		1,800		
0	persons (as defined under section 4958(f)(1)) and				ghospe a man	
	persons described in section 4958(c)(3)(B)	ا			1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
7	Other salaries and wages	24,467		24,467	- 44	
8	Pension plan accruals and contributions (include	24,407		24,407	1 911	
U	section 401(k) and 403(b) employer contributions)	0	:			
9	Other employee benefits	0				
10	Payroll taxes .	2,170		2,170	• 1	
11	Fees for services (non-employees).	2,110		2,170	بارلي	
''а	Management	ا ا			<i>t</i> ¥ ≃	
b	Legal .	0			1	
C	Accounting	1,500		1,500	13.1 K	
d	Lobbying	0		1,000	•	
e	Professional fundraising services See Part IV, line 17	0			,,,,,	
f	Investment management fees	0			-,	
g	Other	Ö				
12	Advertising and promotion	238	238		-~	
13	Office expenses .	2,530		2,530	-	
14	Information technology	0				
15	Royalties	0			,,,,,,,,	
16	Occupancy .	0			· · · ·	
17	Travel .	0	- <u>.</u>		1.1.	
18	Payments of travel or entertainment expenses					
	for any federal, state, or local public officials	0			र्गाल	
19	Conferences, conventions, and meetings .	5,033		5,033	<u> </u>	
20	Interest .	0			·	
21	Payments to affiliates	0			14	
22	Depreciation, depletion, and amortization	5,935	0	5,935	0	
23	Insurance .	4,609		4,609	4,7	
24	Other expenses. Itemize expenses not covered	[
	above (List miscellaneous expenses in line 24e. If				144 miles 14 miles 14 miles	
	line 24e amount exceeds 10% of line 25, column				*_£	
_	(A) amount, list line 24e expenses on Schedule O.)	5 670		E 670	Br. Ca	
a	Nat'l & State Dues	5,678 1,321	-	5,678 1,321		
D C	Licenses Repairs	7,424		7,424		
d	Workman's Comp	1,512		1,512	- <u></u>	
e	All other expenses	61,062		1,012		
25	Total functional expenses. Add lines 1 through 24e	125,279	238	63,979	0	
26	Joint costs. Complete this line only if the	120,219	230	00,919		
	organization reported in column (B) joint costs					
	from a combined educational campaign and				444	
	fundraising solicitation. Check here ▶ if					
	following SOP 98-2 (ASC 958-720)					

Balance Sheet

(A) (B) Beginning of year End of year 1 Cash-non-interest-bearing 3,593 1 2,208 2 Savings and temporary cash investments 53,202 2 81,157 3 Pledges and grants receivable, net 0 3 0 4 Accounts receivable, net ol 4 0 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 6 Notes and loans receivable, net 0 7 8 Inventories for sale or use 6,094 8 6,767 9 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment, cost or other basis Complete Part VI of Schedule D 10a 191.847 Less accumulated depreciation 10b 169,743 21,403 10c 11 11 Investments—publicly traded securities ol 0 Investments—other securities See Part IV, line 11 0 12 0 12 Investments—program-related See Part IV, line 11 0 13 0 13 14 Intangible assets ol 14 0 15 Other assets See Part IV, line 11. 0 15 0 84.292 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 112,236 796l 17 17 Accounts payable and accrued expenses 18 Grants payable 18 19 19 Deferred revenue 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 - - -Payables to current and former officers, directors, trustees, key Liabilities employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 0 23 0 24 Unsecured notes and loans payable to unrelated third parties ol 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 of Schedule D. 25 Total liabilities. Add lines 17 through 25 796 26 700 Organizations that follow SFAS 117, check here Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets 27 27 28 28 Temporarily restricted net assets 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ X and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund8,795 Retained earnings, endowment, accumulated income, or other funds 32 83.496 32 102,741 33 Total net assets or fund balances. 83,496 33 111,536 34 Total liabilities and net assets/fund balances 84,292 34 - 112,236

				·	
	•				
				,	
Form	990 (2011) BPOE Jefferson Lodge 2306	42	-0889496	. Da	12
Par				::3:	ge 12
	Check if Schedule O contains a response to any question in this Part XI				
	Chook ii Concadio o Containo a responso to any question in this i are xi			<u> </u>	
1	Total revenue (must equal Part VIII. column (A), lung 12)	111			E04
2	Total revenue (must equal Part VIII, column (A), line 12) Total expenses (must equal Part IX, column (A), line 25)	2			5,524 5,279
3	Revenue less expenses Subtract line 2 from line 1	3), <u>279</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			
5	Other changes in net assets or fund balances (explain in Schedule O)	5			3,496
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,	3		<u> 0</u>	3 <u>,795</u>
O	column (B))	6		.111	E26
Pari	t XII Financial Statements and Reporting				,330
· ui	Check if Schedule O contains a response to any question in this Part XII			~ř, [
	Check it concedure a contains a response to any question in this r are All			, I	No
4	Accounting method used to prepare the Form 990: X Cash Accrual Other			Yes	NO
1	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 -	-X·	
Za b	Were the organization's financial statements compiled of reviewed by an independent accountant?		2a 2b	X	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversign	tht of	20	1 1-04	
·	the audit, review, or compilation of its financial statements and selection of an independent accountant		2c	ν ,ξ X	
	If the organization changed either its oversight process or selection process during the tax year, explain		20	1,177	
	Schedule O			13.	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year we	æ		-1,	
•	issued on a separate basis, consolidated basis, or both	•			
	X Separate basis Consolidated basis Both consolidated and separate basis				
٥-	<u> </u>	_		_ t =	
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? .	a	2-	21/2	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	20	3a	H-,-	<u> </u>
D	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audit		3b	^.±£;:	
	Toganiou duality of duality, explain they in estimate a and accompany steps tallot to all accepts again			990	(2011)
					(==,,,
				1.	
			,	1	
			3_	4	
			12-		
			-	1.2%	
				(**,*,3	
				'	
				.:	
				3 -	

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,

► Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► See separate instructions.

	Jefferson Lodge 2306				42-0889496	
Par		or Advised Funds or Other Similar	Funds	or Ac	counts. Comp	lete if
	the organization answered "Yes" t	· · · · · · · · · · · · · · · · · · ·	r		- <u></u>	
		(a) Donor advised funds		(b) Fu	ınds and other accou	ints ======
1	Total number at end of year		-			
2	Aggregate contributions to (during year)					
3	Aggregate grants from (during year) .					. 11
4	Aggregate value at end of year Did the organization inform all donors and d	oner advisers in writing that the assets h	old in do	201.00	luiood	
5	funds are the organization's property, subject			nor ac	ivised ☐ Y∈	s Mo
6	Did the organization inform all grantees, dor			s can		:5 140
Ü	used only for charitable purposes and not for					<u></u>
	purpose conferring impermissible private be		, oo.	uny o	T	s No
Pari		lete if the organization answered "Ye	s" to Fo	rm 90		<u> </u>
				1111 00	70, 1 dit 10, mile	4
1	Purpose(s) of conservation easements held Preservation of land for public use (e g , recr			hıstorı	cally important I	and area
	Protection of natural habitat	Preservation	on of a c	ertified	d historic structu	re
	Preservation of open space					11.5°
2	Complete lines 2a through 2d if the organiza	ation held a qualified conservation contrib	oution in	the fo	rm of a conserva	ation
	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 ease Number of conservation easements on a ce		-	2b 2c		
c d	Number of conservation easements include		,	20		1 5004 44
u	historic structure listed in the National Regis		'a	2d		
3	Number of conservation easements modifie		terminat		the organization	<u> </u>
	during the tax year	-,,,,		,		
4	Number of states where property subject to	conservation easement is located				_;
5	Does the organization have a written policy	regarding the periodic monitoring, inspec	ction, har	ndling	of	
	violations, and enforcement of the conserva				Ye	
6	Staff and volunteer hours devoted to monitor	ring, inspecting, and enforcing conservat	tion ease	ements	s during the yea	r 🚓
	•					(<u></u>
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing conservation e	easemen	ts dur	ing the year	The state of the s
		and line O(d) above antick the requiremen		-4:		
8	Does each conservation easement reported	on line 2(d) above satisfy the requireme	nts or se	cuon	□ v _*	s Tino
9	170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)? In Part XIV, describe how the organization r	anorte consanyation easements in its rev	enue an	d avne	Ye	
3	balance sheet, and include, if applicable, the	•		-		
	the organization's accounting for conservati		, mandi	0.0	omorno mar doo	5115 GG 21
Part		ons of Art, Historical Treasures, or Oth	ner Simil	ar As	sets.	13.77.
	Complete if the organization answere	d "Yes" to Form 990, Part IV, line 8.				
1a	If the organization elected, as permitted und	ler SFAS 116 (ASC 958), not to report in	ıts rever	iue sta	atement and bal	ance sheet
	works of art, historical treasures, or other su					
	of public service, provide, in Part XIV, the te					
b	If the organization elected, as permitted und					
	works of art, historical treasures, or other si	mılar assets held for public exhibition, ed	ucation,	or res	earch in furthera	ance 🏋
	of public service, provide the following amount					į
	(i) Revenues included in Form 990, Part VI	I, line 1			\$	
_	(ii) Assets included in Form 990, Part X			-	\$	
2	If the organization received or held works of				ncial gain, provi	de the : .
_	following amounts required to be reported u	, , , , , , , , , , , , , , , , , , , ,	ese items	S:	~ ¢	
a	Revenues included in Form 990, Part VIII, II Assets included in Form 990, Part X	ile i			• • • • • • • • • • • • • • • • • • •	<u>්පී</u> ුලු
b	Assets included in FOITH 330, Fall A .				- ψ	₽ 157

Part	rt III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)							
3	Using the organization's acquisition, accession, and other records, check any of the following that are a significant							
	use of its collection items (check all that apply).							
а	Public exhibition	d 🗌	Loan	or exchange	programs	5		· - 41. €
b	Scholarly research	е	Other					۲ "
С	Preservation for future generations							
4	Provide a description of the organization's	collections and explain	how they	further the c	rganızati	on's exempt p	urpose i	n ,
_	Part XIV.							
5	During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No							
Part	V Escrow and Custodial Arranger	ments. Complete if the	ne organi	ization ansv	vered "Y	es" to Form	990, Pa	rt
	IV, line 9, or reported an amount on Form 990, Part X, line 21.						-	
1a	Is the organization an agent, trustee, custo	dian or other intermedi	ary for cor	ntributions oi	other as	sets not		-
	included on Form 990, Part X?		•				Ye	es 🗄 No
b	If "Yes," explain the arrangement in Part XI	V and complete the fol	lowing tab	ole:				70.5
							Amount	ê)
С	Beginning balance				1c			0
d	Additions during the year				1d			
е	Distributions during the year .				1e			777 (F
f	Ending balance				1f			0
2a	Did the organization include an amount on	Form 990, Part X, line	21?				Ye	es X No
b_	If "Yes," explain the arrangement in Part XI							
Part				es" to Form	<u>1 990, Pa</u>	art IV, line 10		
		Current year (b) Price		(c) Two years) Three years back	k (e) Fo	our years back
1a	Beginning of year balance .	0	0		0		_	• "
b	Contributions							- ,
С	Net investment earnings, gains, and losses							
d	Grants or scholarships							
e	Other expenditures for facilities							
	and programs						_ 	
f	Administrative expenses							
g	End of year balance	0	0		0		0	6.
2	Provide the estimated percentage of the cu		(line 1g,	column (a)) i	neid as:			_
a	Board designated or quasi-endowment	• <u>%</u>						
b	Permanent endowment	%						20 300
С	Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c sho							1
3a	Are there endowment funds not in the poss		tion that a	re held and :	administe	red for the		-Tr. 7
Ju	organization by:	coolon or the organiza	don mar a	io nola ana i	20111111010		-	Yes No
	(i) unrelated organizations						3a(i)	
	(ii) related organizations						3a(ii)	
b	If "Yes" to 3a(II), are the related organization	ns listed as required or	n Schedul	le R?			3b	ء آد
4	Describe in Part XIV the intended uses of the	he organization's endo	wment fur	nds.				<u> </u>
Part	VI Land, Buildings, and Equipmer	it. See Form 990, Pa	art X, line	10.				•
	Description of property	(a) Cost or other basis		st or other		ccumulated	(d) B	ook value
		(investment)	Dasis	s (other)	uep	reciation		40.000
1a	Land	0		10,000		74.007		10,000
b	Buildings .	0		71,097 0		71,097		<u> </u>
C C	Leasehold improvements	0		110,750		98,646		<u></u> 0 12,104
d e	Equipment	0		110,730	·	90,040		12,104
	. Add lines 1a through 1e. (Column (d) musi				(c))	▶		22,104
	11 12 11 12 12 12 13 14 14 15 15 15 15 15 15 15 15 15 15 15 15 15							

Part VII	Investments—Other Securiti	és. See Form 990, Part X,	line 12.	Fi '		
(;	a) Description of security or category (including name of security)	(b) Book value	(c) Method of v Cost or end-of-year	aluation 1		
(1) Financia	Il derivatives .	0				
	held equity interests	0				
(3) Other	**	0		•		
(A)		0		1-		
				.1		
(Ċ)		0				
{Ō}		0		-		
15 \		0				
(G)		0	-	· r		
(H)		0		***		
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	o) must equal Form 990, Part X, col (B) line 12)	0				
Part VIII	Investments—Program Rela	ted. See Form 990, Part X	, line 13.	:		
(a) Description of investment type (b) Book value			(c) Method of v	(c) Method of valuation Cost or end-of-year market value		
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	p) must equal Form 990, Part X, col. (B) line 13.)	0		-		
Part IX	Other Assets. See Form 990,	Part X. line 15		, 12.		
		(a) Description		(b) Book value		
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Part X	Other Liabilities. See Form 9					
1.	(a) Description of liability	(b) Book value		at .		
(1) Federa	Il income taxes	0		nt.		
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	o) must equal Form 990, Part X, col (B) line 25)	1 n				
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Part XIV	Supplemental Information (continued)	
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SCHEDULE O

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury

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. Internal Revenue Service Name of the organization Employer identification number 42-0889496 **BPOE Jefferson Lodge 2306** Form 990 Part I No data - 4 - -\$ 661. 1/20-2-0 10-2-0-0

1. 11

Schedule O (Form 990 or 990-EZ) (2011)		Page 2
Name of the organization	Employer identification number	
BPOE Jefferson Lodge 2306	42-0889496	
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Form **4562**

Depreciation and Amortization

(Including Information on Listed Property)

OMB No 1545-0172

Attachment

Department of the Treasury Internal Revenue Service

(99)

► See separate instructions.

Attach to your tax return.

Sequence No 179

Name(s) shown on return Business or activity to which this form relates Identifying number BPOE Jefferson Lodge 2306 42-0889496 **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I Maximum amount (see instructions) 500,000 Total cost of section 179 property placed in service (see instructions) 2 3,441 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 2,000,000 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5 500,000 6 (a) Description of property (c) Elected cost (b) Cost (business use only) 7 Listed property Enter the amount from line 29 7 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 0 9 Tentative deduction. Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2010 Form 4562 10 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2012 Add lines 9 and 10, less line 12 ▶ 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 3.441 15 Property subject to section 168(f)(1) election 15 16 Other depreciation (including ACRS) 16 MACRS Depreciation (Do not include listed property) (See instructions.) Part III Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2011 17 2,494 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2011 Tax Year Using the General Depreciation System (b) Month and (c) Basis for depreciation (d) Recovery year placed (business/investment use (a) Classification of property (e) Convention (f) Method (g) Depreciation deduction period in service only—see instructions) 19 a 3-year property -- 7 5-year property 200DB HY 7-year property d 10-year property e 15-year property f 20-year property - " S/L 25 yrs. g 25-year property MM S/L h Residential rental 27 5 yrs 27.5 yrs MM S/L property i Nonresidential real 39 vrs. MM S/L MM S/L Section C - Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System 20 a Class life S/L b 12-year 12 yrs S/L MM S/L 40 yrs. c 40-year Part IV Summary (See instructions.) 21 Listed property Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return Partnerships and S corporations - see instructions ··· 5,935 23 For assets shown above and placed in service during the current year, enter the portion -y~ of the basis attributable to section 263A costs 23