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Form 990-EZ

Department of the Treasury
Internal Revenue Service

Short Form 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)

- Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions). All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form.
- The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-1150

2011

Open to Public
Inspection

A For the 2011 calendar year, or tax year beginning APRIL 01, 2011, and ending MARCH 31, 2012

B Check if applicable:
☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization
GILLETTE ELKS LODGE 2825

Number & street (or P O box, if mail is not delivered to street addr.) Room/suite
PO BOX 1358

City or town, state or country, and ZIP + 4
Gillette WY 82717-1358

D Employer identification number
47-0864008

E Telephone number
(307) 682-0333

F Group Exemption Number 1156

G Accounting Method ☒ Cash ☐ Accrual Other (specify) _____

H Check ☒ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

I Website: N/A

J Tax-exempt status (check only one) -- ☒ 501(c)(3) ☐ 501(c) _____ (insert no) ☐ 4947(a)(1) or ☐ 527

K Check ☒ if the organization is not a section 509(a)(3) supporting organization or a section 527 organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. \$ 13,860

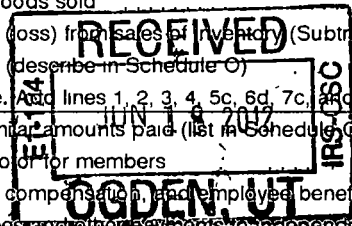
Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)Check if the organization used Schedule O to respond to any question in this Part I ☒

REVENUE	1	Contributions, gifts, grants, and similar amounts received	1	2,466
	2	Program service revenue including government fees and contracts.	2	
	3	Membership dues and assessments	3	6,803
	4	Investment income	4	137
	5a	Gross amount from sale of assets other than inventory	5a	
	b	Less cost or other basis and sales expenses	5b	
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6	Gaming and fundraising events		
	a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
	b	Gross income from fundraising events (not including \$ 2,466 of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	2,462
c	Less direct expenses from gaming and fundraising events	6c	3,046	
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	-584	
7a	Gross sales of inventory, less returns and allowances	7a		
b	Less cost of goods sold	7b		
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8	Other revenue (describe in Schedule O)	8	1,992	
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	10,814	
EXPENSES	10	Grants and similar amounts paid (list in Schedule O)	10	600
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	400
	14	Occupancy, rent, utilities, and maintenance	14	10,976
	15	Printing, publications, postage, and shipping	15	
	16	Other expenses (describe in Schedule O)	16	4,814
	17	Total expenses. Add lines 10 through 16	17	16,790
NET ASSETS	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-5,976
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	43,380
	20	Other changes in net assets or fund balances (explain in Schedule O)	20	-2,216
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	35,188

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2011)

SCANNED JUL 10 2012



Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V ☐

	Yes	No
33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O		X
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)		X
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?		X
b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O		X
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III		X
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		X
37a Enter amount of political expenditures, direct or indirect, as described in the instructions 37a		
b Did the organization file Form 1120-POL for this year?		X
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?		X
b If "Yes," complete Schedule L, Part II and enter the total amount involved 38b		
39 Section 501(c)(7) organizations Enter		
a Initiation fees and capital contributions included on line 9 39a		
b Gross receipts, included on line 9, for public use of club facilities 39b		
40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 40a , section 4912 40a , section 4955 40a		
b Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 40c		
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization 40d		
e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T 40e		X
41 List the states with which a copy of this return is filed. NONE		
42a The organization's books are in care of See attachment #4 Telephone no 42a Located at 42a ZIP + 4 42a		
b 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)? If "Yes," enter the name of the foreign country 42b See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts .		X
c At any time during the calendar year, did the organization maintain an office outside the U S ? If "Yes," enter the name of the foreign country 42c		X
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 -- Check here and enter the amount of tax-exempt interest received or accrued during the tax year 43		
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ 44a		X
b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ 44b		X
c Did the organization receive any payments for indoor tanning services during the year? 44c		X
d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 44d		
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 45a		X
45b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions) 45b		X

- 46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

	Yes	No
46		X

Part VI **Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 47-49b and 52, and complete the tables for lines 50 and 51

Check if the organization used Schedule O to respond to any question in this Part VI ☐

- 47 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

	Yes	No
47		X
48		X
49a		X
49b		X

- 48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

- 49a Did the organization make any transfers to an exempt non-charitable related organization?

- b If "Yes," was the related organization a section 527 organization?

- 50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

(a) Name and title of each employee paid more than \$100,000	(b) Title and Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
NONE				

- f Total number of other employees paid over \$100,000

- 51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

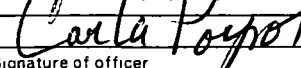
(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		

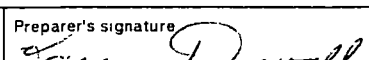
- d Total number of other independent contractors each receiving over \$100,000

- 52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A

☐ Yes ☒ No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here  Date 5-23-12
Signature of officer
CARLA POYNOR SECRETARY
Type or print name and title

Paid Preparer Use Only
Print/Type preparer's name Preparer's signature  Date
Firm's name H&R Block Firm's EIN
Firm's address 200 WEST LAKEWAY Phone no 307-682-2206

May the IRS discuss this return with the preparer shown above? See instructions

☐ Yes ☒ No

2011 DETAIL STATEMENTS

GILLETTE ELKS LODGE 2825
47-0864008

Page 1

STATEMENT #1 - Contributions from fundraising (990-EZ PG 1 Line 6).

FAIR BOARD.....	1,966
.....	500

TOTAL CARRIED TO 990-EZ PG 1 Line 6.....	2,466
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STATEMENT #2 - Gross income from fundraising (990-EZ PG 1 Line 6b)

ROPING.....	2,462
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TOTAL CARRIED TO 990-EZ PG 1 Line 6b.....	2,462
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STATEMENT #3 - Direct expenses from gaming (990-EZ PG 1 Line 6c)

ROPING EXPENSE.....	2,526
HOOP SHOOT.....	520

TOTAL CARRIED TO 990-EZ PG 1 Line 6c.....	3,046
---	-------

STATEMENT #4 - Other revenue (990-EZ PG 1 Line 8)

GL INSURANCE.....	330
GL PER CAPITA.....	1,210
STATE FEES.....	440
OTHER.....	2
SALE OF PINS AND BADGES.....	10

TOTAL CARRIED TO 990-EZ PG 1 Line 8.....	1,992
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STATEMENT #5 - Grants and similar amts paid (990-EZ PG 1 Line 10)

CHARITABLE DONATIONS.....	600
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TOTAL CARRIED TO 990-EZ PG 1 Line 10.....	600
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STATEMENT #6 - Professional Fees (990-EZ PG 1 Line 13)

TAX PREP.....	400
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TOTAL CARRIED TO 990-EZ PG 1 Line 13.....	400
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STATEMENT #7 - Other expenses (EOEZ Pg 1 Line 16)

PCBA.....	794
CHAMBER OF COMMERCE DUES.....	275
CONCESSION EXPENSE.....	686

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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.

OMB No. 1545-0047

2011

**Open to Public
Inspection**

Name of the organization

GILLETTE ELKS LODGE 2825

Employer identification number

47-0864008

OTHER EXPENSES

FUNERAL 78

CHARITABLE 457

CONVENTION 2065

DUES 265

FUNDRAISER EXPENSE 20

HOOP SHOOT 353

INSURANCE 1050

MEETING ROOM 500

MISC 3

OFFICE EXPENSE 706

TELEPHONE 317

DRUG AWARENESS 100

LIABILITIES

ELKS NATIONAL FOUNDATION 168

WEST STATE MAJOR PROJECT 193

BUILDING FUND 12197

ELKS ANGELS 23

OTHER 1389

990 CURRENT OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

Attachment 3: page 1 - 990-EZ Page 2, Part IV

Open to Public Inspection	For calendar year 2011 or tax period beginning	04-01-2011, and ending	03-31-2012
Name of Organization GILLETTE ELKS LODGE 2825			Employer Identification Number 47-0864008

(A) Name and Title	(B) Average hours per week devoted to position	(C) Compensation (Form W-2/1099-MISC) (if not paid, enter -0-)	(D) Cont to employee ben plans & def comp	(E) Expense account & other compensation
BILL CLIFTON 6803 ICABOD AVE GILLETTE, WY 82718	LEADING KNIGHT 1.90	0	0	0
JOHN POYNOR 5306 VAN RIPPER ST GILLETTE, WY 82718	LOYAL KNIGHT 1.50	0	0	0
RON HOLBROOK 1901 NEBRASKA ST Gillette, WY 82716	LECTURING KNIGHT 1.30	0	0	0
EDWARD COX PO BOX 1294 Gillette, WY 82717	1 YR TRUSTEE 0.50	0	0	0
DOUGLAS LEITZKE 333 ELK VALLEY RD Gillette, WY 82718	4 YR TRUSTEE 0.20	0	0	0
TYKE CONROY 2530 ANTLER RD Gillette, WY 82718	2 YR TRUSTEE 0.30	0	0	0
CARLA POYNOR 5306 VAN RIPPER ST GILLETTE, WY 82718	SECRETARY 6.00	0	0	0
RICK SHANK 1405 W 5TH STREET GILLETTE, WY 82716	TREASURER 0.50	0	0	0
KONNIE LOU WAYNE 1207 CEDAR CREEK CT GILLETTE, WY 82718	CHAPLAIN 0.90	0	0	0
JOHN WAYNE III 1207 CEDAR CREEK GILLETTE, WY 82718	EXALTED RULER 1.50	0	0	0
MYRNA MAE ADDISON PO BOX 336 GILLETTE, WY 82717	FIVE YR TRUSTEE 0.20	0	0	0
RODNEY C ADDISON 501 CLARION DR Gillette, WY 82718	0.50	0	0	0

990 BOOKS ARE IN CARE OF

Attachment 4 - 990-EZ Page 3, Part V, Line 42a

Open to Public Inspection	For calendar year 2011 or tax period beginning	04-01	, and ending	03-31-2012
Name of Organization GILLETTE ELKS LODGE 2825				Employer Identification Number 47-0864008
Part V - Line 42a				

Individual Name
or
Business Name

CARLA POYNOR

Street Address

5306 VAN RIPPER ST

U S Address

Zip code 82718

City GILLETTE

State WY

Foreign Address

City

Province or State

Country

Postal code

Phone Number

(307) 682-3229

Fax Number

990 PRIMARY EXEMPT PURPOSE

Attachment 1: page 1 - 990-EZ Page 2, Part III

Open to Public Inspection	For calendar year 2011 or tax period beginning 04-01, and ending 03-31-2012,
Name of Organization GILLETTE ELKS LODGE 2825	Employer Identification Number 47-0864008
Primary Purpose	
THE ELKS PRIMARY EXEMPT PURPOSE IS TO HELP YOUTH, VETERANS AND OTHER CIVIC ORGANIZATIONS	

990 PROGRAM SERVICE ACCOMPLISHMENT

Attachment 2: page 1 - 990-EZ Page 3, Part III

Open to Public			
Inspection	For calendar year 2011 or tax period beginning	04-01-2011, and ending	03-31-2012
Name of Organization GILLETTE ELKS LODGE 2825			Employer Identification Number 47-0864008

Part III - Statement of Program Service Accomplishments

Grants and allocations	1,967	Amount includes foreign grants	Program service expenses	2,526
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Exempt Purpose Achievements

ROPING EVENT TO RAISE MONEY FOR LOCAL CHARITIES AND HOOP SHOOT TO HELP YOUTH ORGANIZATIONS.

990 PROGRAM SERVICE ACCOMPLISHMENT

Attachment 2: page 2 - 990-EZ Page 3, Part III

Open to Public Inspection	For calendar year 2011 or tax period beginning	04-01-2011, and ending	03-31-2012,
Name of Organization GILLETTE ELKS LODGE 2825			Employer Identification Number 47-0864008

Part III - Statement of Program Service Accomplishments

Grants and allocations	500	Amount includes foreign grants	Program service expenses	520
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Exempt Purpose Achievements

HOOP SHOOT TO BENEFIT YOUTH ORGANIZATIONS IN COMMUNITY

2011 DETAIL STATEMENTS

GILLETTE ELKS LODGE 2825
47-0864008

Page 2

CONVENTION EXPENSE.....	1,094
INSURANCE.....	767
OFFICE EXPENSE.....	885
TELEPHONE.....	313

TOTAL CARRIED TO EOEZ Pg 1 Line 16.....	4,814
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STATEMENT #8 - End of Year - Cash (990-EZ PG 1 Line 22)

CAMPCO BASE SHARE.....	10,257
CAMPCO SHARE DRAFT.....	25,735
BANK OF GILLETTE BUILDING FUND.....	11,332

TOTAL CARRIED TO 990-EZ PG 1 Line 22.....	47,324
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STATEMENT #9 - Other assets end yr (EOEZ PG 2 Line 24)

STORAGE BUILDING.....	1,800
BARBEQUE.....	300
3 ON 3 BACKBOARD.....	1,135
SOUND EQUIPMENT.....	1,000
COMPUTER.....	866

TOTAL CARRIED TO EOEZ PG 2 Line 24.....	5,101
---	-------

STATEMENT #10 - Total liabilities end yr (EOEZ Pg 2 Line 26)

ELKS FOUNDATION.....	192
WEST STATE MAJOR PROJECT.....	155
OTHER RESTRICTED BUILDING CD.....	15,478
OTHER.....	1,389
ELKS ANGELS.....	23

TOTAL CARRIED TO EOEZ Pg 2 Line 26.....	17,237
---	--------

STATEMENT #11 - Assets included (SCH D, PG 1 Line 2b)

BEGINNING BALANCE RST FUNDS CORRECTION.....	-2,215
ROUNDING.....	-1

TOTAL CARRIED TO SCH D, PG 1 Line 2b.....	-2,216
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