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Department of the Treasury Internal Revenue Service 1

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)

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

OMB No 1545-0047 2011

Open to Public Inspection

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Raise money to support charities and do public good 2 Check this box	F	Part I	Sı			
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Here Bill Cook Coo	Si	an	🕨 🥫	Signature of officer	Date	11 1
Type or print name and title Print/Type preparer's name Preparer's septitive LEBRON CARNES Firm's name Probate & Carnes, CPA, P.C. Firm's name Probate & Carnes, CPA, P.C. Firm's elin Phone no 706-226-5507 May the IRS discuss this return with the preparer shown above? (see instructions) For Paperwork Reduction Act Notice, see the separate instructions. Firm's address Probate Check of PTIN Probate		_		Bill Cook Sul Carl Officer	•	0/26/12
Paid Preparer Use Only May the IRS discuss this return with the preparer shown above? (see instructions) LEBRON CARNES Firm's name PO Box 1405 Phone no 706-226-5507 May the IRS discuss this return with the preparer shown above? (see instructions) For Paperwork Reduction Act Notice, see the separate instructions.						
Preparer Use Only May the IRS discuss this return with the preparer shown above? (see instructions) LEBRON CARNES Firm's name Crowe & Carnes, CPA, P.C. Firm's EIN Phone no 706-226-5507 May the IRS discuss this return with the preparer shown above? (see instructions) For Paperwork Reduction Act Notice, see the separate instructions.	_		Print/Typ	e preparer's name Preparer's Separative Date	Check	if PTIN
Use Only PO Box 1405 Firm's address Dalton, GA 30722-1405 May the IRS discuss this return with the preparer shown above? (see instructions) For Paperwork Reduction Act Notice, see the separate instructions. Phone no 706-226-5507 Yes No Form 990 (2011)	Pa	id	LEBRO		6/12 self-em	ployed P00104006
Firm's address Dalton, GA 30722-1405 Phone no 706-226-5507	Pr	eparer	Firm's na		Firm's EIN	
May the IRS discuss this return with the preparer shown above? (see instructions) For Paperwork Reduction Act Notice, see the separate instructions. Yes No Form 990 (2011	Us	e Only				
For Paperwork Reduction Act Notice, see the separate instructions.				arose ,	Phone no	
a and a present the contract of the contract o						
			work Re	eduction Act Notice, see the separate instructions.		Form 990 (2011

	Benevolent & Pro		1467802	Page :
	tatement of Program Service if Schedule O contain	vice Accomplishments s a response to any question in this Par	+ III	X
	the the organization's mission	s a response to any question in this Far		
Raise mo	oney to support of	charities and do public g	rood	
Did the organ	nization undertake any significant	program services during the year which were not lis	sted on the	
-	90 or 990-EZ? cribe these new services on Schei	dule O		Yes X No
		e significant changes in how it conducts, any progr	am	
services?	cribe these changes on Schedule	0		Yes X No
Describe the	organization's program service a	ccomplishments for each of its three largest progra		
		anizations and section 4947(a)(1) trusts are requirences, and revenue, if any, for each program service		
la (Code) (Expenses \$	including grants of \$) (Revenue \$	
	to variuos chari		, .	
(Code) (Expenses \$	including grants of \$) (Revenue \$	
	•			
Code.) (Expenses \$	including grants of \$) (Revenue \$	
-				
d Other progra	am services (Describe in Schedul	e O.)		
(Expenses		cluding grants of \$	Revenue \$)
	am service expenses >	194,359		Form 990 (201
A				Form 99U (201

Pa	int 1V Checklist, of Required Schedules			
			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		X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
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		X
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		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part	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			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	<u> </u>		
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	Х	
b				v
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	44.		х
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
d		11d		х
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
e	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116		
f	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
120	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	<u> </u>		<u> </u>
124	Schedule D, Parts XI, XII, and XIII	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			T -
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
ь	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			1
	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		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	L	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	ļ	X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	 	X
_ b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u></u>

	990 (2011) Benevolent & Protective Order of 58-0467802		Р	age 4
_ <u>Pa</u>	art IV 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		res	NO
21	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			 -
22	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			
23	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
240	\$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		x
Ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		 -
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	245		
С	•	24c		l
d	to defease any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
_	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	240		
25a	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		l
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	200		\vdash
Þ	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?		i	
	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	120		
20	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
21	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		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	<u> </u>		
20	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
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			
	Schedule L. Part IV	28b		х
С	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		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		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	IV, and V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			

Form **990** (2011)

37

38

X

37

38

Part VI

related organization? If "Yes," complete Schedule R, Part V, line 2

19? Note. All Form 990 filers are required to complete Schedule O

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,

Form 990 (2011) Benevolent & Protective Order of 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 No Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and X 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) X Did the organization have unrelated business gross income of \$1,000 or more during the year? За X 3b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 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 X 4a account)? 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 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the X organization solicit any contributions that were not tax deductible? b If "Yes," did the organization include with every solicitation an express statement that such contributions or 6b gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 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 7c required to file Form 8282? 7d If "Yes," indicate the number of Forms 8282 filed during the year 7е Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g g 7h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 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 8 organization, have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. 9a Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person? 9b h Section 501(c)(7) organizations. Enter: 10a Initiation fees and capital contributions included on Part VIII, line 12 10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter 11a Gross income from members or shareholders Gloss income from other sources (Do not net amounts due or paid to other sources 11b against amounts due or received from them.) 12a 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers. 13a a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. **b** Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13c Enter the amount of reserves on hand 14a Did the organization receive any payments for indoor tanning services during the tax year?

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

14b

Form 990 (2011) Benevolent & Protective Order of 58-0467802 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI Section 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 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. Enter the number of voting members included in line 1a, above, who are independent 1b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X 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 X supervision of officers, directors, or trustees, or key employees to a management company or other person? X 4 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint X 7a one or more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, X 7b stockholders, or persons other than the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following. 8a The governing body? X 8b **b** Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at X the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes X 10a Did the organization have local chapters, branches, or affiliates? 10a b 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? 10b X Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 X Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c 13 Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? 14 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? The organization's CEO, Executive Director, or top management official 15a 15b Other officers or key employees of the organization 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 X with a taxable entity during the year? 16a 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 16b organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website | Another's website | Upon request 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 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:

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58-0467802

Page 7

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

Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(A) Name and Title	(B) Average hours per week (describe	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Former Highest compensated employee	organization (W-2/1099-MISC)	(W-2/1099-MISC)	organization and related organizations
(1) BILL LARIMER									
TRUSTEE	0.00	<u> </u>	ļ				0	0	C
(2) GEORGE MCARTHUR SEC	0.00			x				o	C
(3)	0.00			_				,	
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)	<u> </u>	\vdash							

Par		, Directors, Trus	stee	s, Ke	y Er	nplo	yees	, an	nd Highest Compensated I	Employees (continued)	•		
	(A) Name and title	(B) Average hours per week (describe	bo	x, unle	Pos check ess pe	more rson ::	than o s both r/truste	an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations (W-2/1099-MISC)	ar	(F) stimated nount of other pensation rom the	
		hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2 1099-MISC)	org an	anization d related anizations	
(15)	····	_											
(16)		_						-					
(17)	 -		_										
(18)											·		
(19)							-		,				
(20)													
(21)	-4-												
(22)							-						
(23)		-,	-										
(24)													
(25)													
1b c	Sub-total Total from continuation shee	ets to Part VII, S	ectio	on A	•	•	•	>					
<u>d</u>	Total (add lines 1b and 1c) Total number of individuals (ind	cluding but not lin	nited	to th	ose	liste	d abo	ve)	who received more than \$1	00.000 in			
	reportable compensation from			0								Ye	s No
3	Did the organization list any for employee on line 1a? If "Yes," o								ee, or highest compensated			3	X
4	For any individual listed on line organization and related organi	1a, is the sum o	f rep	ortab	le co	ompe	ensat	ion a	and other compensation from mplete Schedule J for such	n the			
5	individual Did any person listed on line 1a for services rendered to the org									fividual		5	X
Sec	tion B. Independent Contract	ors											
1	Complete this table for your five compensation from the organization	ation. Report co	nsate mper	ed inc	depe	nder r the	nt cor cale	ntrac nda	r year ending with or within t	he organization's tax year.			
	Name and	(A) business address						ļ	Descrip	(B) tion of services		(C Comper	sation
								ļ .				····	
							_						
													
	Total number of independent c	ontractors (include	dina	but n	ot lin	nited	to th	lose	listed above) who				
DAA	received more than \$100,000 c								, -	0		Form 9	90 (2011)

	III Statement of Reve			(A)	(B) Related or	(C) Unrelated	(D) Revenue
				Total revenue	exempt function	business revenue	excluded from tax under sections
	<u> </u>				revenue	10100	512, 513, ur 514
	Federated campaigns	1a	F0 100				
	Membership dues	1b	52,128				
	Fundraising events	1c	12,998				
	Related organizations	1d					
	Government grants (contributions)	1e					
T	All other contributions, grits, grants, and similar amounts not included above	1					
_		1f					
_	Noncash contributions included in lines 1a Total . Add lines 1a–1f	-1f \$.	65,126			
	Total: Add lilles 1a-11		Busn. Code	00,220			
2a							
b					-		
С							
d							
e							
f	All other program service reve	nue					
_ 9						, 	
3	Investment income (including	dıvıdends, ıı					
	and other similar amounts)		▶	32,133		32,133	
4	Income from investment of tax	exempt bo				-	
5	Royalties					-	
	(i) Real		(II) Personal				
_	Gross rents						
þ	Less rental exps			1			
d 7a	Net rental income or (loss) Gross amount from (i) Securitie	.	(u) Other				
	sales of assets	<u> </u>	(ii) Other				
h	other than inventory Less cost or other						
	basis & sales exps						
c	Gain or (loss)						
	Net gain or (loss)		•				
	Gross income from fundraising eve	ents					
	(not including \$	Ì					
	of contributions reported on line 10	;)					
	See Part IV, line 18	a					
Þ	Less direct expenses	ь					
С	Net income or (loss) from fund	fraising <u>eve</u>	nts >				
9a	Gross income from gaming activities	es					
	See Part IV, line 19	a					
	Less direct expenses	b <u></u>	<u> </u>				
	Net income or (loss) from gan		s 🕨			 	•
10a	Gross sales of inventory, less						
_	returns and allowances	a		1			
	Less cost of goods sold	d				1	
<u>_</u>	Net income or (loss) from sale Miscellaneous Revenue		Busn Code			 	
44-			900099	102,424		102,424	
11a b	Club revenue Miscellaneous		900099	15,798		15,798	
C			30003	23,133		-3,,,,,	
d	All other revenue		 		· ·	 	
			•	118,222		† · · · · · · †	
_	Total revenue. See instruction			215,481		150,355	

Form 990 (2011) **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 I	X		
	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		·		
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in			_	
	the U.S See Part IV, line 22				
3	Grants and other assistance to governments,	- //		1"	
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	84,287	28,096	28,096	28,095
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	7,886	2,629	2,629	2,628
11	Fees for services (non-employees)				
а	Management				
b	Legal	0.500	4 0 6 1	4 0.50	
C	Accounting	8,523	4,261	4,262	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				.
f	Investment management fees	101 535	100 415	F2 120	
g	Other	181,535	129,415	52,120	
12	Advertising and promotion				
13	Office expenses	· · · · ·			
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
19	for any federal, state, or local public officials Conferences, conventions, and meetings				
					·
20 21	Interest Payments to affiliates				2.78
22	Depreciation, depletion, and amortization				
23	Insurance				<u>.</u>
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)				
а	Depreciation	29,958	29,958		
b	-	•			
C					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	312,189	194,359	87,107	30,723
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)				

Pa	art X	Balance Sheet						
		, , =,				(A)		(B)
						Beginning of year		End of year
	1	Cash—non-interest bearing				48,598		38,127
	2	Savings and temporary cash investments				1,361,845	2	1,306,915
	3	Pledges and grants receivable, net			L		3	
1	4	Accounts receivable, net			4			
	5	Receivables from current and former officers, directors, tr	ustees,	key				
		employees, and highest compensated employees. Compl						
		Schedule L				i	5	
	6	Receivables from other disqualified persons (as defined to	ınder se	ection	į			
		4958(f)(1)), persons described in section 4958(c)(3)(B), a	ind conti	ributing				
		employers and sponsoring organizations of section 501(c)(9) volu	ıntary				
ß		employees' beneficiary organizations (see instructions)	L		6			
Assets	7	Notes and loans receivable, net			L		7	
Ž	8	Inventories for sale or use			L	18,153	8	16,803
	9	Prepaid expenses and deferred charges		_	L		9	
	10a	Land, buildings, and equipment, cost or	1 1		j			
		other basis Complete Part VI of Schedule D	10a		449,363			
	b	Less accumulated depreciation	10b		209,706	269,612	10c	239,657
	11	Investments—publicly traded securities			L		11	
	12	Investments—other securities See Part IV, line 11					12	
	13	Investments—program-related. See Part IV, line 11			<u>[</u>		13	
	14	Intangible assets			L		14	
	15	Other assets See Part IV, line 11			L		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)			1,698,208	16	1,601,502
	17	Accounts payable and accrued expenses			L	4,847	17	4,849
	18	Grants payable			Ĺ		18	
	19	Deferred revenue			1		19	
	20	Tax-exempt bond liabilities			1		20	
	21	Escrow or custodial account liability Complete Part IV of	Schedu	le D			21	
S	22	Payables to current and former officers, directors, trustee	s, key					
Liabilities		employees, highest compensated employees, and disqua	alified pe	ersons				
abi		Complete Part II of Schedule L				·	22	
3	23	Secured mortgages and notes payable to unrelated third	parties				23	
	24	Unsecured notes and loans payable to unrelated third pa	rties		Į		24	
	25	Other liabilities (including federal income tax, payables to	related	third				
		parties, and other liabilities not included on lines 17-24) (Complet	e Part X				
		of Schedule D			1		25	
	26	Total liabilities. Add lines 17 through 25				4,847	26	4,849
	İ	Organizations that follow SFAS 117, check here ▶	and	complete			İ	
ės		lines 27 through 29, and lines 33 and 34.						
Ë	27	Unrestricted net assets			ļ		27	
Ba	28	Temporarily restricted net assets					28	
힏	29	Permanently restricted net assets	_	_			29	
Net Assets or Fund Balances	1	Organizations that do not follow SFAS 117, check he			1			
ō		complete lines 30 through 34.						
šets	30	Capital stock or trust principal, or current funds				30	.—.—	
ASS	31	Paid-in or capital surplus, or land, building, or equipment	fund				31	
ĕ	32	Retained earnings, endowment, accumulated income, or	other fu	ınds		1,693,361	32	1,596,653
Z	33	Total net assets or fund balances				1,693,361		1,596,653
	34	Total liabilities and net assets/fund balances				1,698,208	34	1,601,502

Form **990** (2011)

	1 990 (2011) Benevolent & Protective Order of 58-0467802			Pag	ge 12
Pa	ırt XI Reconciliation of Net Assets				_
	Check if Schedule O contains a response to any question in this Part XI				1
1	Total revenue (must equal Part VIII. selumn (A) line 12)	141	21	5	481
	Total revenue (must equal Part VIII, column (A), line 12)	2			189
2	Total expenses (must equal Part IX, column (A), line 25)	3			708
3	Revenue less expenses. Subtract line 2 from line 1		1,69		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,03	,,,	20 <u>T</u>
5	Other changes in net assets or fund balances (explain in Schedule O)	5			
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33,		1 5/		CF 2
_	column (B))	6	1,59	, o	<u>653</u>
Pa	art XII Financial Statements and Reporting				
	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 X 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		<u>X</u>
ь	Were the organization's financial statements audited by an independent accountant?		2b		X
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		
	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?		3a		
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		3ь		
			For	_n 990	(2011)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

2011 Open to Public

Inspection

Employer Identification number Name of the organization Benevolent & Protective Order of 58-0467802 Elks Lodge No. 1267 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (dunng year) Aggregate value at end of year 5 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? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? 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 Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a Total number of conservation easements 2b b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 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 No 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 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) Yes No (i) and section 170(h)(4)(B)(ii)? 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. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items. (I) Revenues included in Form 990, Part VIII, line 1 (li) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

(10) (11)

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

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

Sche	dule D (Form 990) 2011 Benevolent & Protective Order	r of	58-046780	2	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to	o Audit	ed Financial Statem	ents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1_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 lines 3 and 9			10	
Pa	rt XII Reconciliation of Revenue per Audited Financial Statem	ents W	ith Revenue per Ret	urn	
1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			1	
а	Net unrealized gains on investments	2a]	
b	Donated services and use of facilities	2b			
C	Recoveries of prior year grants	2c			
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	4a		1	
b	Other (Describe in Part XIV.)	4b		1	
С	Add lines 4a and 4b			4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	<u> </u>
Pa	rt XIII Reconciliation of Expenses per Audited Financial Stater	nents V	Vith Expenses per R	etur	<u>n</u>
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				
а	Donated services and use of facilities	2a		_	
b	Prior year adjustments	2b]	
C	Other losses	2c]	
d	Other (Describe in Part XIV.)	2d		_	
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1		1	3	·
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		1	
b	Other (Describe in Part XIV)	4b		1	
c	Add lines 4a and 4b			4c	
5	Total expenses, Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	1

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Schedule D (Form 990) 2011 Benevolent & Protective Order of

58-0467802

Page 5

Part XIV Supplemental Information (continued)

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.

ic questions on ormation. 2011
Open to Public Inspection

Name of the organization

Benevolent & Protective Order of Elks Lodge No. 1267

Employer Identification number 58-0467802

OMB No 1545-0047

Form 990, Part III, Line 4d - All Other Accomplishment Donated to various charities.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 No review was or will be conducted.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public