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Form 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)

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

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury

3/31/2012 For the 2011 calendar year, or tax year beginning 4/1/2011 and ending D Employer identification number C Name of organization Check if applicable BENEVOLENT & PROTECTIVE ORDER OF #1825 B. Doing Business As Address change E Telephone number Number and street (or P O box if mail is not delivered to street address) Name change Initial return (208) 983-1761 111 S MEADOW STREET Terminated City or town, state or country, and ZIP + 4 83530-1902 G Gross receipts \$ 50,138 GRANGEVILLE Amended return F Name and address of principal officer Yes X Application pending H(a) is this a group return for affiliates? Nancy Asker 123 W South Second Street, Grangeville, ID 83530 H(b) Are all affiliates included? If "No," attach a list. (see instructions) 501(c)(3) X 501(c) 8 ) **◄** (insert no ) ( 4947(a)(1) or Tax-exempt status Website: ► N/A H(c) Group exemption number ► 1156 X Corporation K Form of organization Trust Association Other ▶ L Year of formation M State of legal domicile. 1961 ID Part I Summarv Briefly describe the organization's mission or most significant activities: Promote and financially support: the Elks Rehabilitation Hospital with dues and Lodge donations; the Elks National Scholarship Program; Local area Youth Activities; the awarding of college scholarships to area high school graduates, and the distribution of dictionaries to elementary (3d Grade) schools 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) . . . . . . . . . . . . . . . . . Number of independent voting members of the governing body (Part VI, line 1b)... 4 9 Total number of individuals employed in calendar year 2011 (Part V, line 2a) . . . 5 0 Total number of volunteers (estimate if necessary) . . . . . . 6 17 Total unrelated business revenue from Part VIII, column (C), line 12. 7a 0 Net unrelated business taxable income from Form 990-T. line 34--1,109 RECEIVED **Current Year** Contributions and grants (Part VIII, line 1h) 33.058 25,257 Program service revenue (Part VIII, line 2g). Investment income (Part VIII, column (A) lines 3,4, and 7d) 10 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 1 11 -2,713 2,031 12 Total revenue—add lines 8 through 11 (must equal Part VIII, icolumn TA), line 12) 30.347 27,290 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4). Ó 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10). 15 0 0 16a Professional fundraising fees (Part IX, column (A), line 11e) . . . ol 0 b Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e). 30,087 19,202 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) . . 18 30.087 19.202 19 Revenue less expenses. Subtract line 18 from line 12. 260 8,088 **Beginning of Current Year** End of Year 20 Total assets (Part X, line 16) . . . . 66,606 73,234 21 Total liabilities (Part X, line 26) . . . . . . . . . . . . 5.461 2,719 22 Net assets or fund balances. Subtract line 21 from line 20 61.145 70,515 Signature Block Cluder penalties of penury, 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 Signature-of officer Date Here -14-12 Type or print name and title easure Print/Type preparer's name Preparer's signature Date Raid Check SELF-PREPARED RETURN self-employed Preparer Firm's name Firm's EIN ▶ Use Only Firm's address Phone no 

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

Form 990 (2011)

Form 9	990 (2011) BENEVOLENT & PROTECTIVE ORDER OF #1825 B.P.O E.	_ 82-0203288	Page 2
Pa	rt III Statement of Program Service Accomplishments	ř	4
	Check if Schedule O contains a response to any question in this Part III		. X
1	Briefly describe the organization's mission:		
	Promote and financially supports the Elke Rehabilitation Hospital with dues and Lodge		
	donations; the Elks National Scholarship Program; Local area Youth Activities; the awarding	*	
	of college scholarching to group high school graduates, and the distribution of distinguise		
	to elementary (3d Grade) schools.		
2	Did the organization undertake any significant program services during the year which were not li	sted on	
	the prior Form 990 or 990-EZ?		X No
	If "Yes," describe these new services on Schedule O.		٠٠٠ اين
3	Did the organization cease conducting, or make significant changes in how it conducts, any progr	ram	
-	services?		X No
	If "Yes," describe these changes on Schedule O.		<u>~</u> 110
4	Describe the organization's program service accomplishments for each of its three largest program	m convices as measured	hv
•	expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are require	ed to report the amount of	:
	grants and allocations to others, the total expenses, and revenue, if any, for each program service		
	grame and another to delete, the total expenses, and foreitte, it dry, for each program octate	o reported.	
	(Code: ) (Expenses \$ 745 including grants of \$ 0 ) (	Payanua \$ 1	006 /
Tu	Award and presentation of college scholarships to area high school graduates	Kevende \$	900)
	Award and presentation of college scholarships to area high school graduates		
	••••••		
	••••••		
	•••••••••••••••••••••••••••••••••••••••		
	••••••		
	••••••		
	••••••		·
4b	(Code: ) (Expenses \$ 710 including grants of \$ 0 ) (	Revenue \$	0.)
	Promoting Youth Activities involving grades 3-12		·
		•••••	
4c	(Code: ) (Expenses \$ 378 including grants of \$ 0 ) (	Revenue \$	0.)
	Provide and distribute dictionaries to 3rd grade students at area schools		
	•••••		
4d	Other program services. (Describe in Schedule O.)	<del></del>	
	(Expenses \$ 1,553 including grants of \$ 0 ) (Revenue \$	1,132)	
4e	Total program service expenses ► 3,386	1,102)	
70	i ami bi adi ani ani ani ani ani ani ani ani ani an		

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Part IV **Checklist of Required Schedules** Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . . . . . Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 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, 5 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 6 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II . . . . . . . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," 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 . . . 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. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete 11a b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more 11b c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more Χ d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. 11e f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D. Part X..... Χ 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII. Х 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional. Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E....... 13 **b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV . . . . . . . . . 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 . . . . . . . . Χ 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance Х 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 Χ Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?....

Part 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 in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		×
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		<u> </u>
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? <i>If "Yes," complete Schedule J</i>	23		×
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			<del>  ^-</del>
470	\$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>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	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	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a	200		<del>                                     </del>
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		<del> </del>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	]		1
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	****	<u> </u>
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):			CANAL PROPERTY.
	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? <i>If "Yes," complete</i> Schedule L, Part IV	28b		×
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		Х
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	1	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	Ì	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			T,
•	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	<del> </del>	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 related			
	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			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	37	<del>                                     </del>	<u>X</u>
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	X	<u> </u>

Part	0 (2011) BENEVOLENT & PROTECTIVE ORDER OF #1825 B.P.O.E. 82-020  V Statements Regarding Other IRS Filings and Tax Compliance	<u></u>		age t
ı ure	Check if Schedule O contains a response to any question in this Part V		. [	$\neg$
	Check is conclude a contained a response to any queetter in the race v	<del>`</del>	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		163	
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1 1	J	
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	X	
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		<b>.</b>	114.
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 0			
	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)	F		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Х	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	1		
	account)?	4a		X
b	If "Yes," enter the name of the foreign country: >			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5a</u>		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
6a	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		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		, , , , ,	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
ā	and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	l _		١.,
	required to file Form 8282?	7c	-	X
	If "Yes," indicate the number of Forms 8282 filed during the year		÷	_
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?.	7e		X
T	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		X
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		1	
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring		15-17-A	10.36
_	organization, have excess business holdings at any time during the year?	8		4 × 8
9	Sponsoring organizations maintaining donor advised funds.			
a b	Did the organization make any taxable distributions under section 4966?	9a		
10	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12			173
a b	· · · · · · · · · · · · · · · · · · ·	2		1
11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
a				
	Gross income from members or shareholders			
D				
12a	against amounts due or received from them.)	425		
		12a	ارتها	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			

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. Enter the amount of reserves the organization is required to maintain by the states in which 

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

13a

14a

14b

13b

13c

Part VI

Sect	ion A. Governing Body and Management				
_		1		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 9			
	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	1			-
_	committee, explain in Schedule O.	l			
þ	Enter the number of voting members included in line 1a, above, who are independent	1b 9			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relation business relationship or a business relation business	ionship with			
•	any other officer, director, trustee, or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or un				1
_	supervision of officers, directors, or trustees, or key employees to a management company or		3_		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 v		4		X
5	Did the organization become aware during the year of a significant diversion of the organization	n's assets?	5_		X
6	Did the organization have members or stockholders?		6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elec				
_	one or more members of the governing body?		7a	X	<u> </u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) memi		1	!	
	stockholders, or persons other than the governing body?		7b	<u> X</u>	
8	Did the organization contemporaneously document the meetings held or written actions undert	aken during			
	the year by the following:				\$
a	The governing body?		8a	_ X	
b	Each committee with authority to act on behalf of the governing body?		8b	_X_	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot		i '		
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule		9		<u> </u>
Sect	ion B. Policies (This Section B requests information about policies not required by the	<u>Internal Revenue C</u>	ode.)		<del></del> –
400	Did the ergenization have legal chanters, branches, or efflicted		400	Yes	No
	Did the organization have local chapters, branches, or affiliates?		10a		<u> </u>
b	affiliates, and branches to ensure their operations are consistent with the organization's exemp		406		
440		• •	10b 11a	$\overline{}$	
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	iore ming are form?.	1 la	^	1,5
b	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>		420		Х
12a b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could		12a 12b		<del>  ^</del> -
C	Did the organization regularly and consistently monitor and enforce compliance with the policy		120		<del></del>
C	describe in Schedule O how this was done	: 11 1 <del>0</del> 3,	12c		
13	Did the organization have a written whistleblower policy?		13		X
14	Did the organization have a written document retention and destruction policy?		14		x
15	Did the process for determining compensation of the following persons include a review and appropriate the compensation of the following persons include a review and approximately the compensation of the following persons include a review and approximately the compensation of the following persons include a review and approximately the compensation of the following persons include a review and approximately the compensation of the following persons include a review and approximately the compensation of the following persons include a review and approximately the compensation of the following persons include a review and approximately the compensation of the following persons include a review and approximately the compensation of the following persons include a review and approximately the compensation of the following persons include a review and approximately the compensation of the following persons include a review and approximately the compensation of the following persons include a review and approximately the compensation of the following persons include a review and approximately the compensation of the following persons include a review and approximately the compensation of the following persons include a review and approximately the compensation of the following persons in the compensation of the				
13	independent persons, comparability data, and contemporaneous substantiation of the deliberar				
а	The organization's CEO, Executive Director, or top management official.		15a		Х
b			15b		$\frac{1}{x}$
D	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		130		^
46-	·	rangomon <del>t</del>	5 4	. 4.,	-5
108	Did the organization invest in, contribute assets to, or participate in a joint venture or similar and with a taxable entity during the year?		460		Х
	· · · · · · · · · · · · · · · · · · ·		16a		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to e participation in joint venture arrangements under applicable federal tax law, and take steps to s				
	the organization's exempt status with respect to such arrangements?		16b		
Foot	ion C. Disclosure	<u> </u>	I IOD		
17	List the states with which a copy of this Form 990 is required to be filed ► ID				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and	1990-T (Section 501/	c)(3)e	only	
10	available for public inspection. Indicate how you made these available Check all that apply.	, coo i (occilon oo i(	J)(J)3	Or my,	,
	Own website Another's website X Upon request				
19	Describe in Schedule O whether (and if so, how), the organization made its governing docume	nts conflict of interes	t		
13	policy, and financial statements available to the public.	ino, cominci di linteres	•		
20	State the name, physical address, and telephone number of the person who possesses the bo	oks and records of th	e		
40	organization:   B.P.O.E. #1825	(208) 983-1			
	111 S MEADOW STREET, GRANGEVILLE, ID 83530-1902	1200,000-1	: <u>~</u> !	••••	

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Form	990	(2011)

BENEVOLENT & PROTECTIVE ORDER OF #1825 B.P.O.E.

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.

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	box, i	unles	s pe	ition more	n of st an botal Highest compensated is of employee	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Gil Bates TRUSTEE, CHAIRMAN	1.00	Х						0	0	0
(2) Bruce Walkere TRUSTEE	1.00	X						0	0	0
(3) Jay Hinterlong TRUSTEE	1.00	X						0	0	0
(4) John Urbahn TRUSTEE	1 00	X						0	0	0
(5) Dan Tackett EXALTED RULER	1.00			х				0	0	0
(6) Ryan Robinson EXALTED KNIGHT	1.00			X				0	0	0
(7) Debra Graham SECRETARY	1.00			х				0	0	0
(8) Nancy Asker TREASURER	10.00			х				0	0	0
(9) Kevin Asker ESQUIRE	1.00			x				0	o	0
(10)										
(11)										
(12)										
(13)										
(14)										

_	BENEVOLENT & PROTECTIV										2-0203		Page 8
	Section A. Officers, Directors, Tr  (A)  Name and title	(B) Average hours per	(do n	ot ch unles	Posi eck i s per	ition more	than o	ne an	(D) Reportable	(E) Reporta	ble	(F Estimation	) ated
		week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from rela organizat (W-2/1099-	ited ions	oth compen from organiz and re organiz	sation the ation lated
(15)												, ,	
(16)													
(17)													
(18)					_								
(19)										<del> </del>			
(20)					_				<del></del>				<del></del> _
(21)			<del>                                     </del>										
(22)													
(23)													
(24)		Land of the A									-	-	
(25)													
1b c d	Sub-total							<b>&gt; &gt; &gt;</b>	0		0 0		0
2	Total number of individuals (including but not reportable compensation from the organization		listed		ove	) wi	no red	ceiv	ved more than \$	100,000 c	of		
3	Did the organization list any former officer, die employee on line 1a? If "Yes," complete Sche	rector, or truste		, em	nplo	yee		_	est compensate				s No
4	For any individual listed on line 1a, is the sum the organization and related organizations greindividual	of reportable c	ompe	nsa	tior		d oth	er o	compensation fr	om		3 4	X
5	Did any person listed on line 1a receive or acc for services rendered to the organization? If "	•			•				•			5	X
	tion B. Independent Contractors	onested indone					45-		- animad mara th	on \$100 C	100 of		
1	Complete this table for your five highest comp compensation from the organization. Report c year.											n's tax	
	(A) Name and business add	ress							(B) Description of se	rvices	C	(C) ompensat	ion
													0
								-					<u>0</u> 0
													0
2	Total number of independent contractors (incl	-	nited	to t	hos	e lis		bo	ve) who receive	d			0
	more than \$100,000 of compensation from the	e organization	<u> </u>				0				4	rgere e jafat akab <del>aba ma</del> kab	

0

27,290

Total. Add lines 11a-11d . . . . . . . . . . . . . . . .

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns	s. 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			1		
_	organizations in the United States. See Part IV, line 21	0				
2	Grants and other assistance to individuals in the			-		
•	United States. See Part IV, line 22	0				
3	Grants and other assistance to governments,				A PLAN PLAN P	
	organizations, and individuals outside the					
4	United States. See Part IV, lines 15 and 16	0	<del></del>			
4 5	Benefits paid to or for members	0	<u> </u>		<u></u>	
ð	trustees, and key employees					
6	Compensation not included above, to disqualified	0				
0	persons (as defined under section 4958(f)(1)) and					
	persons described in section 4958(c)(3)(B)	О				
7	Other salaries and wages	0				
8	Pension plan accruals and contributions (include		<del></del>		<del></del>	
•	section 401(k) and 403(b) employer contributions)	o				
9	Other employee benefits	0				
10	Payroll taxes	0				
11	Fees for services (non-employees):			<del></del>		
	Management	o				
b	Legal	0		<del></del>		
C	Accounting	775	<del></del>	<del></del>	<del></del>	
d	Lobbying	7.10	-		<del></del>	
e	Professional fundraising services. See Part IV, line 17	0		¥		
f	Investment management fees	0		"		
g	Other	0				
12	Advertising and promotion	276				
13	Office expenses	563				
14	Information technology	0				
15	Royalties	0			<del></del>	
16	Occupancy	0				
17	Travel	0				
18	Payments of travel or entertainment expenses					
	for any federal, state, or local public officials	o				
19	Conferences, conventions, and meetings	0				
20	Interest	0				
21	Payments to affiliates	0				
22	Depreciation, depletion, and amortization	7,168	0	0	0	
23	Insurance	0				
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.)		The state of the state of	1.4	E	
а	SUPPLIES	1,583				
b	GRAND LODGE & STATE DUES	4,152				
С	REPAIRS & MAINTENANCE	551				
d	TELEPHONE	1,369				
е	All other expenses	2,765			2,157	
25	Total functional expenses. Add lines 1 through 24e.	19,202	3,386	0	2,157	
26	Joint costs. Complete this line only if the			,		
	organization reported in column (B) joint costs	]			1	
	from a combined educational campaign and				<b>\</b>	
	fundraising solicitation. Check here ▶ if					
	following SOP 98-2 (ASC 958-720)		<u></u>			

Pa	art X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	. 24,461	1	38,257
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	0
	4	Accounts receivable, net		4	0
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributin employers and sponsoring organizations of section 501(c)(9) voluntary	ng '		
ets		employees' beneficiary organizations (see instructions)		_6_	` · · · · · · · · · · · · · · · · · · ·
Assets	7	Notes and loans receivable, net			0
⋖	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or			
			,031		*
	b		,054 42,145	10c	34,977
	11	Investments—publicly traded securities			0
	12	Investments—other securities. See Part IV, line 11			0
	13	Investments—program-related. See Part IV, line 11			0
	14	Intangible assets			0
	15	Other assets. See Part IV, line 11	0		0
	16	Total assets. Add lines 1 through 15 (must equal line 34)			73,234
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	2,719
	20	Tax-exempt bond liabilities		~20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .	·	21	
es	22	Payables to current and former officers, directors, trustees, key			
Liabilities		employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
Ξ	23	Secured mortgages and notes payable to unrelated third parties	. 0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	. 0	24	0
	25	Other liabilities (including federal income tax, payables to related third			
	1	parties, and other liabilities not included on lines 17-24). Complete			
	1	Part X of Schedule D	. ) 0	25	0
	26	Total liabilities. Add lines 17 through 25	. 5,461	26	2,719
ses		Organizations that follow SFAS 117, check here ► X and complete lines 27 through 29, and lines 33 and 34.			
ä	27	Unrestricted net assets	51,267	27	56,213
ä	28	Temporarily restricted net assets			14,302
펄	29	Permanently restricted net assets		29	14,302
5				2.5	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34.			
set	30	Capital stock or trust principal, or current funds		30	
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
et.	32	Retained earnings, endowment, accumulated income, or other funds .		32	
Ž	33	Total net assets or fund balances		33	70,515
	34	Total liabilities and net assets/fund balances	. 66,606		73,234

-omn 9	20 (2011) BENEVOLENT & PROTECTIVE ORDER OF #1825 B.P.O.E.	<u> </u>	<u> </u>	Page	9 1 <u>Z</u>
Part	XI Reconciliation of Net Assets			r	
	Check if Schedule O contains a response to any question in this Part XI	<u> </u>	<u></u>	<u>. [</u>	<u>x</u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1		27,	<u> 290</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2		19,	202
3	Revenue less expenses. Subtract line 2 from line 1	3			880,
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			145
5	Other changes in net assets or fund balances (explain in Schedule O)	5		1,	282
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,				
	column (B))	6		70	<u>,515</u>
Part				-	_
	Check if Schedule O contains a response to any question in this Part XII	<u> </u>		. <u>L</u>	
				Yes	No
1	Accounting method used to prepare the Form 990:				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				zi.
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X	
b	Were the organization's financial statements audited by an independent accountant?		2b	<u> </u>	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight	of	1		
	the audit, review, or compilation of its financial statements and selection of an independent accountant? $\cdot$		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in		9	2.1	
	Schedule O.			1	
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:				
	X 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	_{	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b		
		•	Form	990 (	2011)

### SCHEDULE D (Form 990)

## **Supplemental Financial Statements**

OMB No 1545-0047 2011

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization 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.

Inspection Employer Identification number

BENE	VOLENT & PROTECTIVE ORDER OF #182	25 B.P.O.E.	82-0203288
Part			
	the organization answered "Yes" t	o Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and d	lonor advisors in writing that the assets held	d in donor advised
	funds are the organization's property, subje	ct to the organization's exclusive legal contr	rol? Yes . No
6	Did the organization inform all grantees, do	nors, and donor advisors in writing that grar	nt funds can be
	used only for charitable purposes and not for	or the benefit of the donor or donor advisor,	or for any other
	purpose conferring impermissible private be	enefit?	Yes No
Part	Conservation Easements, Comp	olete if the organization answered "Yes"	to Form 990 Part IV line 7
	Purpose(s) of conservation easements held		
1			of an historically important land area
	Preservation of land for public use (e.g., rec		of an historically important land area
	Protection of natural habitat	Preservation	of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organiz	ation held a qualified conservation contribut	tion in the form of a conservation
	easement on the last day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements .		. 2a
b	Total acreage restricted by conservation ea	sements	. 2b
C		ertified historic structure included in (a)	
d	Number of conservation easements include	ed in (c) acquired after 8/17/06, and not on a	3
	historic structure listed in the National Regis	ster	. 2d
3	Number of conservation easements modifie	ed, transferred, released, extinguished, or te	erminated by the organization
	during the tax year		
4	Number of states where property subject to	conservation easement is located	
5		regarding the periodic monitoring, inspection	
		ation easements it holds?	
6	Staff and volunteer hours devoted to monitor	oring, inspecting, and enforcing conservatio	n easements during the year
	<b>•</b>		
7	Amount of expenses incurred in monitoring	, inspecting, and enforcing conservation ea	sements during the year
	▶ \$		
8		d on line 2(d) above satisfy the requirement	s of section
	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?		
9		reports conservation easements in its reven	
		e text of the footnote to the organization's fi	inancial statements that describes
	the organization's accounting for conservat		
Par		ons of Art, Historical Treasures, or Othe	r Similar Assets.
	Complete if the organization answere	ed "Yes" to Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted und	der SFAS 116 (ASC 958), not to report in its	s revenue statement and balance sheet
	works of art, historical treasures, or other si		
	of public service, provide, in Part XIV, the te	ext of the footnote to its financial statements	s that describes these items.
b	If the organization elected, as permitted und	der SFAS 116 (ASC 958), to report in its rev	venue statement and balance sheet
	works of art, historical treasures, or other si	milar assets held for public exhibition, educ	cation, or research in furtherance
	of public service, provide the following amo	unts relating to these items:	
	(i) Revenues included in Form 990, Part VI	II, line 1	▶ \$
	(ii) Assets included in Form 990. Part X		▶ \$
2	If the organization received or held works or	f art, historical treasures, or other similar as	ssets for financial gain, provide the
	following amounts required to be reported a	under SFAS 116 (ASC 958) relating to these	e items:
а	Revenues included in Form 990, Part VIII, I	ine 1	<b>▶ €</b>
b	Assets included in Form 990, Part X		• \$
			· · · · · · · · · · · · · · · · · · ·

Schedule D (Form 990) 2011 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) Using the organization's acquisition, accession, and other records, check any of the following that are a significant 3 use of its collection items (check all that apply); Public exhibition а Loan or exchange programs b Scholarly research Other C Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in 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 IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990. Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not Yes If "Yes," explain the arrangement in Part XIV and complete the following table: Amount C 1c d 1d е 1e f 1f 0 2a If "Yes," explain the arrangement in Part XIV. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. (a) Current year (b) Pnor year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance . . . . 0 0 b Contributions . . . . . . . . . . . . Net investment earnings, gains, Grants or scholarships . . . . . d Other expenditures for facilities and programs . . . . . . . . . . f Administrative expenses . . . . . End of year balance . . . . . 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: Board designated or quasi-endowment а Permanent endowment b Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c should equal 100%. Are there endowment funds not in the possession of the organization that are held and administered for the 3a Yes No organization by: 3a(i) 3a(ii) Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. (b) Cost or other Description of property (a) Cost or other basis (c) Accumulated (d) Book value (investment) basis (other) depreciation 0 15.000 15.000 0 254,845 234.868 19,977 Buildings . . . . . . . . . . . . 0 0 d 135,186 135,186 0 0 Total, Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . . . . 34.977

Page 3

Schedule D (Form 990) 2011

Part VII Investments—Other Securities	es. See Form 990, Part	X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value		Method of valuation end-of-year market value
(1) Financial derivatives		0	
(2) Closely-held equity interests		0	
(3) Other		0	
<u>(A)</u>		0	
(B)		0	
(C)	<del></del>	0	
(D)		0	
( <u>E</u> )		0	
(G)	<del> </del>	0	
(H)		0	
/I)		0	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		O Ratio State Control	
Part VIII Investments—Program Relati	ted. See Form 990, Part	X, line 13.	
(a) Description of investment type	(b) Book value		Method of valuation end-of-year market value
(1)		0	
(2)		0	
(3)		0	
(4)	<u> </u>	0	
(5)	<u> </u>	0	
(6)		0	
(7) (8)	<del> </del>	0	
(9)	<del></del>	0	
(10)		0	<del></del>
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		0	The second second
Part IX Other Assets. See Form 990,	Part X, line 15.		
	(a) Description		(b) Book value
(1)			0
			0
(3)			0
(4)			0
(5)	<del></del>		0
			0
(8)	<del></del>		0 0
(9)			0
(10)	<del></del>		0
Total. (Column (b) must equal Form 990, Part X,	col. (B) line 15.)	<del> </del>	▶ 0
Part X Other Liabilities. See Form 9			
1. (a) Description of liability	(b) Book value		er green van de gegen van de geg De gegen van de geg
(1) Federal income taxes		0	
(2)		0	물건물 등 기계 등 지수는 기가 보다.
(3)	<del></del>		
448		0	الحرار المراجع المراجع والمراجع المراجع المر
(4)		00	
(5)		<del>-</del>	
(5) (6)		000	
(5) (6) (7)		0000	
(5) (6) (7) (8)		00000	
(5) (6) (7) (8) (9)			
(5) (6) (7) (8) (9) (10)			
(5) (6) (7) (8) (9)			

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).

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

# 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.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization Attach to Form 990 or 990-EZ.

Employer identification number

BENEVOLENT & PROTECTIVE ORDER OF #1825 B.P.O.E.	82-0203288
Form 990 Part III Line 4e Other program services include financial support to the Elks	
Rehabilitation Hospital and Building Upkeep	
Form 990 Part VI Section A Line 7b Major policy revisions or adoptions, and like matters	
approved by the Board are presented to the voting membership for approval. Normal operation	nal
procedures are set by the Board	
Form 990 Part VI Section B Line 11a A copy of Form 990 for 2011 is made available to each	
Board Member at a regularly scheduled board meeting for review, discussion and acceptance	. Any
necessary inquiries can be made through the preparer of the tax return. Upon acceptance, Fo	rm
990 is signed by an approved official and mailed to meet filing requirements. A copy of Form	
990 and related necessary tax forms are made available to the Grand Lodge Auditor annually	
Form 990 Part VI Section B Line 15b Board Members are not compensated in any way	
Form 990 Part VI Section C Line 19 The organization makes any necessry or appropriate	,
governing documents and financial statements available to public review by posting them at the	ne
Lodge Building	
Form 990 Part IX Line 24f Other Expenses consist of: Fund Raising (2157), Donations for	
Community Support (200) Other Taxes (23), Gifts and Recognitions (120), Bank and Credit Ca	ard
Charges/Fees (265)	
Form 990 Part XI Line 5 Failed to record reported adjustment of Return 2010 c/f Inventory	
Purchases in calculation of Gross Profit	