

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



Department of the Treasury Internal Revenue Service

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

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

OMB No 1545-0047 Open to Public Inspection

benefit trust or private foundation) ▶The organization may have to use a copy of this return to satisfy state reporting requirements

В		applicable	C Name of organization		3/1/2011		and c	nuing	D Employer	U/ZU IZ	tion number				
$\bar{\Box}$	Address		David Division A	NDARIN MO							don namber				
=	Name cha	•	Number and street (or P O box	ARIN MOOS			o uto		59-140099 E Telephon						
=		•		ii maii is not dein	rered to street ad	uress)  Room/	suite		E Telephoni	e number					
=	nitial retu		4450 LOSCO ROAD	<del></del>					(904) 268-	5614					
二	Terminate		City or town, state or country, ar	nd ZIP + 4											
=	Amended		JACKSONVILLE		FL	32	2257		G Gross rec	eipts \$		65	<u>58,578</u>		
<b>□</b>	Application	n pending	F Name and address of principal					H(a) is t	this a group ret	urn for affilia	ates?	Yes	X No		
			JONATHAN CASE 4450 L	OSCO RD JA	<u>ACKSONVILL</u>	E FL 32257	,	H(b) Are	e all affiliates in	cluded?		Yes	No		
i T	ax-exem	pt status	X 501(c)(3) 501(c) (	) <b>◀</b> (inse	ert no ) 494	47(a)(1) or	527	If "	'No," attach a li	st (see insi	tructions)				
JV	Vebsite	: ► N/A		<u> </u>				H(v) G	oup exemption	number 🏲					
		ganization		<del></del>			Τ								
				Association	Other ▶		L Yea	ar of form	ation	M Stat	e of legal don	nicile	<u>FL</u>		
	art I		mmary												
	1		lescribe the organization's r						DE FOR TH						
0			OVIDE TO THE CHILDREN				RLY A	T MOO	SEHAVEN.	WE ALS	0، PROV	IDE :	TO		
Š		LOCAL	CAHRITIES IN OUR COMM	MUNITY AND	THE NEEDY	·									
E E		<b></b>	<u></u>												
Activities & Governance	2	Check t	hıs box ▶ if the organizat	ion discontinued	its operations of	r disposed of m	nore tha	an 25% o	of its net assets	3					
•5	3	Number	of voting members of the g	overning bod	ly (Part VI, lin	e 1a)		•		3			741		
ties	4	Number	of independent voting men	nbers of the g	overning bod	y (Part VI, li	ne 1b	)		4	•		741		
Ş	5		imber of individuals employ			Part V, line 2	2a)		•	5	-		8		
Ā	6	Total nu	imber of volunteers (estima	te if necessar	y)			•		6			50		
	7a		irelated business revenue fi							7a			0		
	b	Net unre	elated business taxable inco	ome from For	m 990-T, line	34				7b			0		
									Prior Year		Current	Year			
9	8		utions and grants (Part VIII,						2	4,730		2	21,772		
eun	9		n service revenue (Part VIII,		•				54	7,200		63	<u>36,739</u>		
Revenue	10		ent income (Part VIII, colun							145			67		
_	11	Other re	venue (Part VIII), column (A	, lines 5, 6d,	8c, 9c, 10c,	and 11e) .							0		
	12	Total rev	enue add lines 8 through 11	(must equal Pa	art VIII, column	(A), line 12)	<u> </u>		57:	2,075		65	58,578		
	13	Grants a	and similar amounts paid (F	art ဩဝင်ဝlum	n (A), lines 1-	-3)							0		
	14	Benefits paid to or for members (Part IX Column (A), line 4)											0		
S	15	Salaries,	other compensation, employe	e benefits (Pa	rt IX, column (A	4), lines 5–10	)		12:	2,591	591 136,72				
Expenses	16a	Profess	ional fundraising fees (Part	IX, column (A	N), line 11e)								0		
ă	b	Total fur	ndraising-expenses (Partix	-column (D),	line 25) ▶		0								
ш	17	Other ex	xpenses (Part IX, column (A	), lines 11a-	11d, 11f–24e)			L	44	9,137		50	<u> 26,365</u>		
	18		penses Add lines 13-17 (n			(A), line 25)			57	1,728		64	13,087		
	19	Revenu	<u>e less expenses. Subtract l</u>	ne 18 from lir	ne 12					347		1	15,491		
Net Assets or								Beginn	ning of Curren	Year	End of	Year			
Sset	20		sets (Part X, line 16)					<u></u>	56	8,548		59	<u>95,249</u>		
a t	21	Total liabilities (Part X, line 26)					•	<u> </u>		0			<u>4,795</u>		
			ets or fund balances Subtra	act line 21 fro	m line 20 .	•		<u> </u>	56	8,548		59	90,454		
	rt II		nature Block												
Und:	er penalti belief it i	es of perjur	y, I declare that I have examined thi ect, and complete Declaration of pro	s return, including	accompanying s	schedules and si	tateme	nts, and to	o the best of my	/ knowledge	e				
		3 4 40, 60,11	sor, and complete Declaration of pri	sparer (other than	onicer) is based	on all imormatic	וא וט ווכ	псп ргера	alei lias aliy kii	owieuge					
Sig	jn		Signature of officer			<del></del>	<del></del>	<del></del>							
He	re		JONATHAN CASE	11/1		Admin	, eti	etic	Date	9-1-1	12				
			Type or print name and title			ACPIN	/ / / !			<i>, ,</i> , ,					
		Pon	t/Type preparer's name	Pren	arer's signature			Dat	<del></del>		PTIN				
Pa	id	' '''	- , po proporer a riginic	Fieb	aren a siyilatule			Dat	1	heck	] if				
	eparer				SELF-PREP	ARED RETU	JRN			elf-employe	4				
	•		s's name						Firm's EIN ▶						
US	e Only		's address		<del></del>					•					
Mar						A			Phone no				<u> </u>		
ivia	y the It	s alscus	ss this return with the prepa	rer shown ab	ove? (see ins	tructions) .				•	Ye	s L	X No		

CLUMNEL OCT O

Form **990** (201

Form 9	90 (2011)	MANDARIN	MOOSE LODGE	#42				59-14 <u>00997</u>	Page 2
<u>P</u> a	rt III	Statement o	f Program Servicedule O contains	ce Accompli		ın this Part III			. 🗆
1	WE PR	describe the organ	nization's mission CHILDREN AT MINION OUR COMMUNIT	OOSEHEART	AND THE ELDE	RLY AT MOOS		SO, PROVIDE	
					·				
2	the prio	r Form 990 or 99			ervices during the			. Yes	X No
•			new services on Sc						
3	services	s <sup>?</sup>	se conducting, or n				ny program 	. Tes	X No
4	Describ expense	e the organization es Section 501(c	changes on Schedun's program service (c)(3) and 501(c)(4) of others, the total expenses (c)	e accomplishmorganizations	and section 4947	7(a)(1) trusts are	e required to repo	ort the amount o	
4a	(Code:	)	(Expenses \$	0 in	cluding grants of	 f \$	0 ) (Revenue	\$	0)
	`	-							
								·	
					· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·	
		<b></b>				. <b></b>			
					· · · · · · · · · · · · · · · · · · ·	. <b></b>			
4b	(Code	)	(Expenses \$	<u>0</u> in	cluding grants o	f\$	0 ) (Revenue	\$	0.)
	(Cada		<u></u>			-	0 ) (D		
4c	(Code:	)	(Expenses \$	<u>U</u> In	iciuding grants o	т <b>»</b>	0_) (Revenue	\$	()
						·			
							_		
						<del></del>			
4d			(Describe in Scher			0 \ (5)	•	0.	
40	(Expens		596,905 includin		96,905	0) (Revenue	, D		
<u>4e</u>	<u> тоші р</u>	rogram service	EAPENSES F	<u> </u>	<del>20,203</del>				

	•		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		х
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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	4		^
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If</i> "Yes,"			
40	complete Schedule D, Part IV	9		Х
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	w . 46.5	X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Х	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If</i> "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12a		х
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a		14a		X
_	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	140		
	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	146		~
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	14b		X
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
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? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		Х
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		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  If "Yes," complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

	'		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization		$\dashv$	
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
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		Х
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	1 1		
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than		į	
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines		İ	
	24b through 24d and complete Schedule K If "No," go to line 25	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	ا ا		
	to defease any tax-exempt bonds?	24c	-	
	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	05-		v
h	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or	}		
	990-EZ? If "Yes," complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	230		
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		Χ
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	-		
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		Х
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			v
20	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?  If "Yes," complete Schedule N, Part II.	22		v
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		Х
33	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I.	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	33		
<b>0</b> 4	III, IV, and V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	Did the organization receive any payment from or engage in any transaction with a controlled entity within	1		
	the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
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		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	192 Note, All Form 990 filers are required to complete Schedule O	38	l x	ŀ

Pai	t V Statements Regarding Other IRS Filings and Tax Compliance			-5-
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . 1b			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			ļ. <u>.</u>
	gaming (gambling) winnings to prize winners?	1c	X	
2a	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  2a 8			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			ļ
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		LX.
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		ļ
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	1		i
	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:			
F.,	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.			ļ
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		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		
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?	١_		
b		<u>6a</u>		X
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	AL.		
7	Organizations that may receive deductible contributions under section 170(c).	6b	<u>.</u>	X
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	i		
_	and services provided to the payor?	70		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a 7b	-	^
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	75	-	
_	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	10		<b></b>
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	·	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	<del>                                     </del>	<u> </u>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	<b></b>	<del> </del>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	<u> </u>		
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			1
	organization, have excess business holdings at any time during the year?	8		X
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	]		
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
Ь	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	ļ		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u> </u>		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
L.	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		1	
_	the organization is licensed to issue qualified health plans	ł		
с 14а	Enter the amount of reserves on hand	-	├	
b b	Did the organization receive any payments for indoor tanning services during the tax year?  If "Yes " has it filed a Form 720 to report those payments? If "No." provide an exploration in Schodule O	14a	<u> </u>	X
<u>~</u> ~	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		X

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI 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 No 1a Enter the number of voting members of the governing body at the end of the tax year . 741 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 . . . 741 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? Х . . . Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? . . . Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . . 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body?... 8a **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 the organization's mailing address? If "Yes," provide the names and addresses in Schedule O . . . 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code ) Yes No **10a** Did the organization have local chapters, branches, or affiliates? Х 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 11a 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 12a 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? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done. 12c Did the organization have a written whistleblower policy?. 13 13 Χ Did the organization have a written document retention and destruction policy? Χ 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? a The organization's CEO, Executive Director, or top management official Х 15a **b** Other officers or key employees of the organization . Χ 15b . . . . . If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . 16a Х . . . If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? . \_\_\_\_ . . . . . . . . . . . . Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed 18 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 Upon request Own website Another's website 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► JONATHAN CASE 4450 LOSCO ROAD, JACKSONVILLE, FL 32257

Form 990 (2011)	MANDARIN MOOSE LODGE #42									59-14009	97 <u>r</u>	age <b>7</b>
Part VII	Compensation of Officers, Direct	•	s, K	еу	Em	plo	yees	s, H	ighest Comp	ensated		
	Employees, and Independent C			ctic	n i	a th	ıc Da	ا	/II		Г	_
Section A.	Check if Schedule O contains a re Officers, Directors, Trustees, Key E	<u> </u>									·	
	this table for all persons required to be									na with or within	the	
organization's		motod ttopolit	.ср	00				-	J. 100. 700.	.9		
of compensat  List all  List the who received organization a  List all  \$100,000 of r	of the organization's current officers, of the organization's current key employed from the organization's current key employed from the organization's five current highest concept and any related organizations.  Of the organization's former officers, key eportable compensation from the organ of the organization's former directors.	(F) if no compe oyees, if any. S mpensated emp rm W-2 and/or ey employees, a nization and an	nsations in the second	on v strues ( of of oted	vas ctio othe For est e	paid ns for the m 1 com	d or de nan ai 099-N npens zation	finit n of MIS ate	ion of "key empl ficer, director, tr C) of more than d employees wh	loyee." ustee, or key en \$100,000 from to no received more	nployee) the e than	
	more than \$10,000 of reportable comp			-				-	_			
	n the following order. individual trustee l employees; and former such persons	es or directors; ii	nstitu	tion	al tı	rust	ees; o	offic	ers; key employ	ees; highest		
_	is box if neither the organization nor ar	nv related organ	izatıc	on c	omi	ens	sated	an	v current officer.	director, or trus	tee.	
<del></del>		,				<b>C)</b>						
	(A) Name and Title	(B) Average hours per week (describe	box,	unles er and	eck s pe	rson rect	than on the state of the state	an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimate amount other compense	of ation
		hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	ær	employee	Highest compensated employee	ner	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from th organiza and rela organizat	tion ted
(1) ED HIL												
ADMINISTRA	TOR	40 00	ļ	<u> </u>	X		ļ		42,900	0		0
(2)												
(3)		<del></del>										
(4)												
(5)												
(6)												
.(7)											-	
_(8)										_		
(9)												
(10)												
(11)												
(12)										=		
(40)	<del></del>		<del>                                     </del>	<del>                                     </del>	-	$\vdash$	-	<del></del>	1			

-	990 (2011) MANDARIN MOOSE LODGE							_				997		age 8
Pa	art VII Section A. Officers, Directors, Tr	ustees, Key Er	nplo	yee		nd ( >)	Highe	est	Compensated	∟mployees	(cor	ntınue	a)	
	(A) Name and title	(B) Average hours per	box,	unles	Posi eck s pe	ition more	than o	an	(D) Reportable compensation	(E) Reportable compensatio			(F) timate	
		week (describe hours for related organizations in Schedule O)	Individual trustee or director		Officer		Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organization (W-2/1099-MIS	s	com fro orga	other pensation the anization direlate inization	e on ed
(15)												_		
<u>(16)</u>		· -									1	-		
(17)														
(18)				-									-	
(19)									-					
(20)														
(21)									_					
(22)		<del></del>						_						
(23)														
(24)								_						
(25)														
1b	Sub-total		•	٠.				<b>•</b>	42,900		0			0
	Total from continuation sheets to Part VII,	Section A						▶	0		0			0
						<del></del>		<u> </u>	42,900		0			0
2	Total number of individuals (including but not reportable compensation from the organizatio		listed		ove 0	) wr	no red	ceiv	ed more than \$	100,000 of				
	repertable compensation from the organization				<u> </u>						_	П	Yes	No
3	Did the organization list any former officer, die employee on line 1a? If "Yes," complete Sche					yee	or h	igh	est compensate	ed	[	3		X
4	For any individual listed on line 1a, is the sum	of reportable c	ompe	ensa	tior				•					
	the organization and related organizations greindividual	eater than \$150,					omple	ete	Schedule J for s	such 		4		Х
5	Did any person listed on line 1a receive or according services rendered to the organization? If "	•			•				•			5		X
Sec	tion B. Independent Contractors			-										
1	Complete this table for your five highest comp compensation from the organization. Report of year.											n's tax	<	
	(A) Name and business add	ress							(B) Description of ser	vices	С	(C ompen		
														0
		<del></del>							<del></del>					0
		<del></del>						_	<u> </u>					0 0
								_						0
2	Total number of independent contractors (incl more than \$100,000 of compensation from the	-	nited ►	to t	hos	e lis	sted a	bo	ve) who receive	d				

See Part IV, line 18. **b** Less direct expenses . . . c Net income or (loss) from fundraising events 9a Gross income from gaming activities. See Part IV, line 19. . . . . . c Net income or (loss) from gaming activities . 10a Gross sales of inventory, less returns and allowances

**b** Less cost of goods sold . . . . . . . . c Net income or (loss) from sales of inventory .

Miscellaneous Revenue

events (not including \$ \_\_\_\_\_0 of contributions reported on line 1c)

**Business Code** 

0

0

0

# Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organization	ns must complete all columns.	All other organizations r	must complete columi	n (A) but are
not required to complete columns (B), (C), a				

	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		-,								
	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,										
	organizations, and individuals outside the										
	United States See Part IV, lines 15 and 16	0		<u></u>							
4	Benefits paid to or for members	0			<u> </u>						
5	Compensation of current officers, directors,										
6	trustees, and key employees	122,695	79,795	42,900							
O	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and										
	persons described in section 4958(c)(3)(B)	ا									
7	Other salaries and wages	0									
8	Pension plan accruals and contributions (include	<u>0</u>									
_	section 401(k) and 403(b) employer contributions).	o									
9	Other employee benefits	0									
10	Payroll taxes	14,027	10,745	3,282							
11	Fees for services (non-employees)	11,027	10,110	0,202							
а	Management	0									
b	Legal	0	-								
С	Accounting .	0									
d	Lobbying	0									
е	Professional fundraising services. See Part IV, line 17 .	0									
f	Investment management fees	0									
g	Other	0									
12	Advertising and promotion	1,442	1,442	0	0						
13	Office expenses	8,783	8,783	0	0						
14	Information technology	0									
15	Royalties	0									
16	Occupancy	141,135	141,135	0	0						
17	Travel	0									
18	Payments of travel or entertainment expenses		Ì								
19	for any federal, state, or local public officials  Conferences, conventions, and meetings.	0 400	0.400								
20	Interest .	2,429	2,429	0	0						
21	Payments to affiliates	0			-						
22	Depreciation, depletion, and amortization	0	0	0	0						
23	Insurance	11,310	11,310	0	0						
24	Other expenses Itemize expenses not covered	11,510	11,510	0	<u>_</u>						
	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	SUPPLIES	276,917	276,917	0	0						
b	SPECIAL PROJECTS	3,459	3,459	0	0						
С	DONATIONS	19,092	19,092	0	0						
d	SALES TAX	41,798	41,798	_0	0						
е	All other expenses	0									
25	Total functional expenses. Add lines 1 through 24e	643,087	596,905	46,182	0						
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) .										

m 990 (2 Part X	011) MANDARIN MOOSE LODGE #42  Balance Sheet				9-1400997	Page <b>11</b>
			(A)		(B)	
			Beginning of year		End of y	ear
1	Cash—non-interest-bearing	. L	13,264	1		30,349
2	Savings and temporary cash investments		42,814	2		33,687
3	Pledges and grants receivable, net		0	3		
4	Accounts receivable, net		0	4		(
5	Receivables from current and former officers, directors, trustees, ke					
	employees, and highest compensated employees Complete Part I	of				
	Schedule L			5		
6	Receivables from other disqualified persons (as defined under sect					
	4958(f)(1)), persons described in section 4958(c)(3)(B), and contrib					
.	employers and sponsoring organizations of section 501(c)(9) volun					
	employees' beneficiary organizations (see instructions)	[		6		
7	Notes and loans receivable, net	[	0	7		(
8   3	Inventories for sale or use	[	16,588	8		16,588
9	Prepaid expenses and deferred charges	[		9		
10a	Land, buildings, and equipment cost or					
	other basis. Complete Part VI of Schedule D 10a 5	14,625				
b	Less accumulated depreciation 10b	0	495,882	10c		514,62
11	Investments—publicly traded securities		0	11		(
12	Investments—other securities See Part IV, line 11	. Г	0	12		
13	Investments—program-related See Part IV, line 11	. Г	0	13		
14	Intangible assets	[	0	14		
15	Other assets See Part IV, line 11	. [	0	15		i
16	Total assets. Add lines 1 through 15 (must equal line 34)		568,548	16		595,24
17	Accounts payable and accrued expenses		·	17		1,83
18	Grants payable			18		
19	Deferred revenue			19		
20	Tax-exempt bond liabilities	[		20		
21	Escrow or custodial account liability Complete Part IV of Schedule			21		
22	Payables to current and former officers, directors, trustees, key					
<b>≧</b>	employees, highest compensated employees, and disqualified					
22	persons Complete Part II of Schedule L			22		
23	Secured mortgages and notes payable to unrelated third parties .	. [	0	23		
24	Unsecured notes and loans payable to unrelated third parties	. [	0			
25	Other liabilities (including federal income tax, payables to related th	urd				
	parties, and other liabilities not included on lines 17-24) Complete					
ļ	Part X of Schedule D		0	25		2,96
26	Total liabilities. Add lines 17 through 25		0	26		4,79
	Organizations that follow SFAS 117, check here ► X and					
3	complete lines 27 through 29, and lines 33 and 34.					
27		-	F60 F40	27		E00 4E
28		·  -	568,548	27 28		590,45
2 29	Temporarily restricted net assets			29		
;   -0		·		29		
-	Organizations that do not follow SFAS 117, check here ▶					
	and complete lines 30 through 34.	_				
30	Capital stock or trust principal, or current funds	[		30		
ž 31	Paid-in or capital surplus, or land, building, or equipment fund	. [		31		
27 28 29 29 30 31 32 33	Retained earnings, endowment, accumulated income, or other fund	ds. [		32		
33	Total net assets or fund balances		568,548	33		590,454
34	Total liabilities and net assets/fund balances	[	568,548	34		595,249

Form 9	990 (2011) MANDARIN MOOSE LODGE #42	59-140	0997	Pag	<sub>je</sub> 12
Part	XI , Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				X
		. 1			
1	Total revenue (must equal Part VIII, column (A), inne 12)				<u>,578</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2			,087
3	Revenue less expenses Subtract line 2 from line 1	3			<u>,491</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			<u>,548</u>
5	Other changes in net assets or fund balances (explain in Schedule O)	5		6	<u>,415</u>
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		<u>590</u>	<u>,454</u>
Part	XII Financial Statements and Reporting				_
	Check if Schedule O contains a response to any question in this Part XII			. <u> </u>	
				Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other		,	,	29
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		7, *	3.	
	Schedule O.		*	Ť.	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Χ
b	Were the organization's financial statements audited by an independent accountant?	•	2b		X
С	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		i
	If the organization changed either its oversight process or selection process during the tax year, explain in		* .	. 1	17%
	Schedule O.			38.13	-17
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were		: 8		
	issued on a separate basis, consolidated basis, or both:			,	
	X Separate basis Consolidated basis Both consolidated and separate basis			1	
3a					
Ja	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		х
b	•		) Ja		
D	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3ь		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.			990	(0044)
			⊦om	<b>プラリ</b>	(2011)

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

# Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

0-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

| Employer identification number

MANDARIN MOOSE LODGE #42	59-1400997
Form 990 Part VI Section A Line 6 THE ORGANIZATION HAS MEMBERS	
Form 990 Part VI Section A Line 7B THE ORGANIZATION HAS ITS MEMBERS VOTE ON ALL	DECISIONS
APPROVED BT THE BOARD OF OFFICERS	
Form 990 Part VI Section B Line 11A THE ORGANIZATION REVIEWS THE REPORTS WITH	ITS GOVERNING
BODY IN ORDER FOR THE 990 TO BE COMPLETED.	
Form 990 Part XI Line 5 FUND BALANCE WAS ADJUSTED DUE TO CORRECTONS FOR AN	ACCOUNT
***************************************	

Name of the organization	Page 2
	Employer identification number
MANDARIN MOOSE LODGE #42	59-1400997
*	

Schedule O (Form 990 or 990-EZ) (2011)