



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



Form **990-EZ****Short Form
Return of Organization Exempt From Income Tax**

OMB No 1545-1150

2011**Open to Public
Inspection**Department of the Treasury
Internal Revenue Service

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

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

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

A For the 2011 calendar year, or tax year beginning May 1, 2011, and ending April 30, 20 12**B** Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization**Loyal Order of Moose International #1106****KLAM**

Number and street (or P.O. box, if mail is not delivered to street address)

1577 Oak Avenue

Room/suite

City or town, state or country, and ZIP + 4

Klamath Falls, Or 97601**D** Employer identification number**93-016838 93-0160838****E** Telephone number**541-883-3762****F** Group ExemptionNumber ► **000203****G** Accounting Method: ☒ Cash ☐ Accrual Other (specify) ►**I** Website: ►**J** Tax-exempt status (check only one) ☒ 501(c)(3) ☒ 501(c)(8) (insert no.) ☐ 4947(a)(1) or ☐ 527**H** Check ☒ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).**K** Check ☒ if the organization is not a section 509(a)(3) supporting organization or a section 527 organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.**L** Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. ► \$**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (see the instructions for Part I.)Check if the organization used Schedule O to respond to any question in this Part I. ☐

1	Contributions, gifts, grants, and similar amounts received	1	
2	Program service revenue including government fees and contracts	2	41838
3	Membership dues and assessments	3	1815
4	Investment income	4	
5a	Gross amount from sale of assets other than inventory	5a	
b	Less: cost or other basis and sales expenses	5b	
c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
6	Gaming and fundraising events		
a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
b	Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	
c	Less: direct expenses from gaming and fundraising events	6c	
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	
7a	Gross sales of inventory, less returns and allowances	7a	
b	Less: cost of goods sold	7b	
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
8	Other revenue (describe in Schedule O)	8	
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	43653
10	Grants and similar amounts paid (list in Schedule O)	10	
11	Benefits paid to or for members	11	
12	Salaries, other compensation, and employee benefits	12	
13	Professional fees and other payments to independent contractors	13	
14	Occupancy, rent, utilities, and maintenance	14	12229
15	Printing, publications, postage, and shipping	15	432
16	Other expenses (describe in Schedule O)	16	33086
17	Total expenses. Add lines 10 through 16	17	45747
18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	(2094)
19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	94731
20	Other changes in net assets or fund balances (explain in Schedule O)	20	69
21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	92568

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 106421

Form **990-EZ** (2011)

P 21



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

	Yes	No
33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	✓
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34	✓
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a	✓
b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b	
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c	✓
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36	✓
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a N/A		
b Did the organization file Form 1120-POL for this year?	37b	✓
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a	✓
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b N/A	
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9	39a N/A	
b Gross receipts, included on line 9, for public use of club facilities	39b N/A	
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ N/A ; section 4912 ▶ N/A ; section 4955 ▶ N/A		
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	✓
c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ N/A		
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ▶ N/A		
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.	40e	✓
41 List the states with which a copy of this return is filed. ▶ Oregon		
42a The organization's books are in care of ▶ Garry Lane Telephone no. ▶ 541-883-3762 Located at ▶ 1577 Oak Avenue, Klamath Falls, OR ZIP + 4 ▶ 97601		
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	✓
If "Yes," enter the name of the foreign country: ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts .		
c At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c	✓
If "Yes," enter the name of the foreign country: ▶		
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43		
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	✓
b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b	✓
c Did the organization receive any payments for indoor tanning services during the year?	44c	✓
d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d	✓
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	✓
45b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b	✓

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

	Yes	No
46		<input checked="" type="checkbox"/>

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

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

47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II

	Yes	No
47		<input checked="" type="checkbox"/>

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

	Yes	No
48		<input checked="" type="checkbox"/>

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

	Yes	No
49a		<input checked="" type="checkbox"/>

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

	Yes	No
49b		<input checked="" type="checkbox"/>

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

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
N/A				

f Total number of other employees paid over \$100,000 **0.00**


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

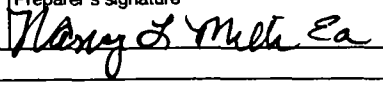
(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
N/A		

d Total number of other independent contractors each receiving over \$100,000 **N/A**

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A ☐ Yes ☒ No

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

Sign Here		12-7-12
	Signature of officer	Date
	Garry Lane Administrator	
	Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name Nancy L Miller EA	Preparer's signature 	Date 12/7/12	Check <input checked="" type="checkbox"/> if self-employed	PTIN P00446503
	Firm's name ▶	Firm's EIN ▶			
	Firm's address ▶	Phone no ▶			

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

	A	B	C	E
1	KLAMATH FALLS LOYAL ORDER OF MOOSE LODGE #1106			
2	FYE 4-30-12			
3				
4				
5				
6	OFFICERS			
7				
8	NAME	TITLE	HOURS	COMPENSATION
9	Steve Warner	Governor	10	0
10	Dick Milburn	Past Governor	8	0
11	Phil Plumondore	Jr. Governor	5	0
12	Mike Patti	Prelate	2	0
13	Garry Lane	Administrator	15	0
14	Bob McClallen	Treasurer	8	0
15	Leland Koepke	Trustee 1 yr	2	0
16	Ernie Johnson	Trustee 2 yr	2	0
17	Tom Keen	Trustee 3 yr	2	0

KLAMATH FALLS LOYAL ORDER OF MOOSE LODGE #1106

FYE 4-30-12

Form 990 – ez Line 20: Prior year adjustments

LOYAL ORDER OF MOOSE					
FORM 990-EZ WORKSHEETS					
BALANCE SHEET (PART 1)					
		EMPLOYER IDENTIFICATION			
		93-016838			
Cash Savings and Investments			Beg Yr	End Yr	
Actual cash in checking			1312	448	
Actual cash in savings			5700	3701	
Petty cash			350	350	
		Total (to part II line 22)	7362	4499	
Land and Buildings					
Amount invested in Lodge home & other Real Estate			74499	74499	
Furniture and Fixtures, Paaraphanalialia			11342	12042	
		Total (to part II line 23)	85841	86541	
Other Assets:					
Inventory Social Quarters Merchandise			1207	1207	
Inventory Kitchen Merchandise			321	321	
Inventory Lodge Merchandise					
Emblems					
NSF checks					
		Total (to part II Line 24)	1528	1528	
Total Liabilities:					
First Mortgage indebtedness on Real Estate					
Other Mortgage indebedness					
Notes Payable					
Indebtedness on Furniture & Fixtures					
Compensation due Administrator					
Other lodge bills					
Indebtedness House Committee Merchandise					
Other Unpaid House Committee Bills					
Moose International indebtedmess					
		Total (to part II Line 26)	0	0	

LOYAL ORDER OF MOOSE			
FORM 990-EZ WORKSHEETS			
BALANCE SHEET (PART 2)			
		EMPLOYER IDENTIFICATION	
		93-016838	
Actual Cash-General Checking	448		
Actual Cash-Other Auth. Checking			
Escrow			
Petty Cash	350		
N S F Checks			
Inventory-Social Quarters	1207		
Inventory-Food Services	321		
Inventory-Other			
Lodge Home/Building	74499		
Other Property/Real Estate			
Furniture & Fixtures	12042		
Leasehold/Bldg. Improvements			
Other Receivables			
Security Deposits			
CD's Savings etc	3701		
TOTAL ASSETS (Sum of Lines 1-21)	92568		
Accounts Payable			
Notes Payable			
Indebtedness on Furniture & Fixtures			
Moose International Indebtedness			
Life Membership			
Endowment Fund			
Compensation due Administrator			
Monies Due to Other Units			
Unpaid Interest			
Real Estate Tax			
First Mortgage Indebtedness on Real Estate			
Other Mortgage Indebtedness			
Certificate of Indebtedness			
TOTAL LIABILITIES (Sum of Lines 1-19)	0		
NET ASSETS (Total Asseets less Total Liabilities)	92568		
TOTAL (Must be same as TOTAL ASSETS)	92568		

LOYAL ORDER OF MOOSE			
FORM 990-EZ WORKSHEETS			
Receipts			
	EMPLOYER IDENTIFICATION		
	93-016838		
DESCRIPTION			
	A. Collections for Mooseheart or Moosehaven		
	the Endowment Fund, Lodge Building fund,		
	Charities, etc.		
	TOTAL (To Part 1, Line 1)		
	B. Entertainment		
	Merchandise Sales	23356	
	Member Gaming		
	Other Fund Raisers (List separately)	18482	
	TOTAL (To Part 1, Line 2)	41838	
	C. Membership Dues	1815	
	Enrollment and Other Fees		
	Life Membership Fees		
	TOTAL (To Part 1, Line 3)	1815	
	D. Interest on Investments-including savings accounts		
	TOTAL (To Part 1, Line 4)		
	E. Income from Sales of Assets (other than inventory)		
	Gross Sales Price		
	Less: Cost or other basis and sales expenses		
	Gain (Loss) (To Part 1, Lines 5 a,b, & c		
	Net Income or (Loss) (To part 1, Lines 6 a,b, & C	43653	

LOYAL ORDER OF MOOSE							
FORM 990-EZ WORKSHEETS							
Expenses							
		EMPLOYER IDENTIFICATION					
		93-016838					
DESCRIPTION			AMOUNT		DESCRIPTION		AMOUNT
	F Moose International				K Printing & Publications		122
	Mht/Mhn Endowment Fund				Shipping & Postage		310
	Life Membership Fee						
	Donations				TOTAL (To Line 15)		432
	Miscellaneous Donations						
					L Other Expenses		
	TOTAL (To Line 10)				Conferences/Conventions & Meetings		3000
					Interest on Indebtedness		
	G Sick Benefits				Repairs		474
	Funerals				Entertainment		931
					State Association Dues		618
	TOTAL (To Line 13)				Advertising		
					State Tax		
	J Bar, Office, & Other expenses		990		Other Taxes		
	Telephone				Flowers		
	Other Utilities		7457		Prizes		
	Other Insurance		2388		Bank Charges		23
	Equipment Rental & Maintenance		1394		Licenses		288
	Rents				Paid for Merchandise		14851
	Real Estate Taxes				Other (List)		
					Internet		215
	TOTAL (To Line 14)		12229		Cash over/short		71
					Fund Raising Expenses		12615
					TOTAL (To Line 16)		33086