



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



Return of Organization Exempt From Income Tax

2011

Open to Public
InspectionDepartment of the Treasury
Internal Revenue ServiceUnder 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

A For the 2011 calendar year, or tax year beginning		June 01	, 2011, and ending	May 31	, 2012
B Check if applicable		C Name of organization		D Employer identification number	
<input type="checkbox"/> Address change		Fraternal Order of Eagles #4150		54-1382430	
<input type="checkbox"/> Name change		Doing Business As Same		E Telephone number	
<input type="checkbox"/> Initial return		Number and street (or P.O. box if mail is not delivered to street address)		540-433-7001	
<input type="checkbox"/> Terminated		1230 Old Furnace Road		F City or town, state or country, and ZIP + 4	
<input type="checkbox"/> Amended return		Harrisonburg, VA 22802-6011		G Gross receipts \$ 5,042,624	
<input type="checkbox"/> Application pending		F Name and address of principal officer Tony Campbell, Secretary 1230 Old Furnace Road, Harrisonburg, VA 22802		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
I Tax-exempt status. <input type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) (8) ► (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527				H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)	
J Website: ►				H(c) Group exemption number ► 0102	
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ►		L Year of formation 1986		M State of legal domicile VA	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: To provide services for Eagle Members and to raise funds for duly authorized Fraternal Order of Eagle Charities and to contribute to worthwhile charitable causes both Local and National.		
Revenue	2 Check this box ► <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
Expenses	3 Number of voting members of the governing body (Part VI, line 1a)	3	5
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	0
Net Assets or Fund Balances	5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	18
	6 Total number of volunteers (estimate if necessary)	6	15
Part II Signature Block	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	591
	b Net unrelated business taxable income from Form 990-T, line 34	7b	(409)
		Prior Year	Current Year
	8 Contributions and grants (Part VIII, line 1h)	30,502	46,933
	9 Program service revenue (Part VIII, line 2g)		
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	24,764	10,291
	11 Other revenue (Part VIII, column (A), lines 5, 6, 8, 9, 10, 11c, and 11e)	1,156,298	429,889
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,211,564	487,113
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	30,985	36,918
	14 Benefits paid to or for members (Part IX, column (A), line 4)	24,924	56,381
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	184,276	203,092
	16a Professional fundraising fees (Part IX, column (A), line 11)		
	b Total fundraising expenses (Part IX, column (D), line 25)		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	144,285	141,025
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	385,010	429,944
	19 Revenue less expenses. Subtract line 18 from line 12	826,554	57,170
		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	2,465,540	2,518,589
	21 Total liabilities (Part X, line 26)		
	22 Net assets or fund balances. Subtract line 21 from line 20	2,465,540	5,518,589

Part II Signature Block

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	<i>Tony Campbell</i>	<i>7/23/2012</i>			
	Signature of officer	Date			
	<i>Tony Campbell</i>	<i>Secretary</i>			
	Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	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

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2011)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response to any question in this Part III

1 Briefly describe the organization's mission:

To provide services for Eagle Members and to raise funds for duly authorized Fraternal Order of Eagle Charities and to contribute to worthwhile charitable causes both Local and National.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: _____) (Expenses \$ _____) including grants of \$ _____) (Revenue \$ _____)
SEE ATTACHMENTS

4b (Code: _____) (Expenses \$ _____) including grants of \$ _____) (Revenue \$ _____)

4c (Code: _____) (Expenses \$ _____) including grants of \$ _____) (Revenue \$ _____)

4d Other program services (Describe in Schedule O.)
(Expenses \$ _____) including grants of \$ _____) (Revenue \$ _____)

4e Total program service expenses ► 429,944

Part IV Checklist of Required Schedules

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A

2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?

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

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

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III

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

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

8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III

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? If "Yes," complete Schedule D, Part IV

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

11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.

- a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI
- 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
- c 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? If "Yes," complete Schedule D, Part VIII
- 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
- e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X
- 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

12 a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII

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

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

14 a Did the organization maintain an office, employees, or agents outside of the United States?

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

15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV

16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV

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)

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

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

20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

	Yes	No
1	✓	
2	✓	
3	✓	
4	N/A	
5	✓	
6	✓	
7	✓	
8	✓	
9	✓	
10	✓	
11a	✓	
11b	✓	
11c	✓	
11d	✓	
11e	✓	
11f	✓	
12a	✓	
12b	✓	
13	✓	
14a	✓	
14b	✓	
15	✓	
16	✓	
17	✓	
18	✓	
19	✓	
20a	✓	
20b	N/A	

Part IV Checklist of Required Schedules (continued)

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

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

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? If "Yes," complete Schedule J

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$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

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?

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

b 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

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

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

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):

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV

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

29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M

30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M

31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II

33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I

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

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

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

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

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

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

	Yes	No
21	✓	
22	✓	
23	✓	
24a	✓	
24b	✓	
24c	✓	
24d	✓	
25a	✓	
25b	✓	
26	✓	
27	✓	
28a	✓	
28b	✓	
28c	✓	
29	✓	
30	✓	
31	✓	
32	✓	
33	✓	
34	✓	
35a	✓	
35b	✓	
36	N/A	
37	✓	
38	✓	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response to any question in this Part V

1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable **1a** 2

b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable **1b** 0

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? **1c** ✓

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** 17

b 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)

3a Did the organization have unrelated business gross income of \$1,000 or more during the year? **3a** ✓

b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O **3b** ✓

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 account)? **4a** ✓

b If "Yes," enter the name of the foreign country: ► **N/A**
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? **5a** ✓

b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? **5b** ✓

c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? **5c** N/A

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** ✓

b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? **6b** N/A

7 **Organizations that may receive deductible contributions under section 170(c).**

a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? **7a** N/A

b If "Yes," did the organization notify the donor of the value of the goods or services provided? **7b** N/A

c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? **7c** N/A

d If "Yes," indicate the number of Forms 8282 filed during the year **7d** N/A

e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? **7e** N/A

f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? **7f** N/A

g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? **7g** N/A

h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? **7h** N/A

8 **Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? **8** N/A

9 **Sponsoring organizations maintaining donor advised funds.**

a Did the organization make any taxable distributions under section 4966? **9a** N/A

b Did the organization make a distribution to a donor, donor advisor, or related person? **9b** N/A

10 **Section 501(c)(7) organizations.** Enter:

a Initiation fees and capital contributions included on Part VIII, line 12 **10a** N/A

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities **10b** N/A

11 **Section 501(c)(12) organizations.** Enter:

a Gross income from members or shareholders **11a** N/A

b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) **11b** N/A

12a **Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041? **12a** N/A

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year **12b** N/A

13 **Section 501(c)(29) qualified nonprofit health insurance issuers.**

a Is the organization licensed to issue qualified health plans in more than one state? **13a** N/A

Note. See the instructions for additional information the organization must report on Schedule O.

b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans **13b** N/A

c Enter the amount of reserves on hand **13c** N/A

14a Did the organization receive any payments for indoor tanning services during the tax year? **14a** ✓

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O **14b** N/A

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

	1a	5	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
1b	Enter the number of voting members included in line 1a, above, who are independent	0		
2	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?		✓	
3	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?		✓	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		✓	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		✓	
6	Did the organization have members or stockholders?		✓	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		✓	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body		✓	
b	Each committee with authority to act on behalf of the governing body?		✓	
9	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.			✓

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?	✓
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?	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	✓
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	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	✓
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	
13	Did the organization have a written whistleblower policy?	
14	Did the organization have a written document retention and destruction policy?	
15	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	
b	Other officers or key employees of the organization	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	
16b		✓

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► Virginia

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.

Own website Another's website Upon request

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 during the tax year.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► Tony Campbell, 1230 Old Furnace Road, Harrisonburg, VA 22802

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.

 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)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		or director or individual trustee	Institutional trustee	Officer	Key employee	Employee highest compensated	Former			
(1) Fred Olson				✓						
President	4			✓				0	0	0
(2) Ray Life				✓						
Vice-President	4			✓				0	0	0
(3) Chris Harbin				✓						
Chaplain	4			✓				0	0	0
(4) Ron Cote				✓						
Conductor	4			✓				0	0	0
(5) William Smith				✓				24,122	0	0
Secretary	40			✓						
(6) Garry Hassett				✓						
Treasurer	4			✓				0	0	0
(7) Maynard Sites				✓				0	0	0
Guard	4			✓						
(8) Eric Marcus				✓				0	0	0
Trustee	8			✓						
(9) Bill Bost				✓				0	0	0
Trustee	8			✓						
(10) Bob Halosky				✓				0	0	0
(11)										
(12)										
(13)										
(14)										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(15)									
(16)									
(17)									
(18)									
(19)									
(20)									
(21)									
(22)									
(23)									
(24)									
(25)									

1b Sub-total	►	24,122	0	0
c Total from continuation sheets to Part VII, Section A	►	0	0	0
d Total (add lines 1b and 1c)	►	24,122	0	0

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► **NONE**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3	✓
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	✓
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5	✓

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► **0**

Part VIII Statement of Revenue

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns 1b Membership dues 1c Fundraising events 1d Related organizations 1e Government grants (contributions) 1f All other contributions, gifts, grants, and similar amounts not included above 1g Noncash contributions included in lines 1a-1f \$ 1h Total. Add lines 1a-1f ►	1a 1b 12,177 1c 9,510 1d 1e 1f 25,245 1g 1h 46,933			
Program Service Revenue	2a b c d e f All other program service revenue g Total. Add lines 2a-2f ►	Business Code			
	3 Investment income (including dividends, interest, and other similar amounts) ► 4 Income from investment of tax-exempt bond proceeds ► 5 Royalties ►		10,291	10,291	
	6a Gross rents 6b Less: rental expenses 6c Rental income or (loss) 6d Net rental income or (loss) ►	(i) Real 19,545 (ii) Personal 18,954 591		591	591
	7a Gross amount from sales of assets other than inventory 7b Less: cost or other basis and sales expenses 7c Gain or (loss) 7d Net gain or (loss) ►	(i) Securities (ii) Other			
Other Revenue	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 8b Less: direct expenses 8c Net income or (loss) from fundraising events . . . ► 9a Gross income from gaming activities. See Part IV, line 19 9b Less: direct expenses 9c Net income or (loss) from gaming activities . . . ► 10a Gross sales of inventory, less returns and allowances 10b Less: cost of goods sold 10c Net income or (loss) from sales of inventory . . . ►	a b a 4,745,051 b 4,357,014 388,037		388,037	
	Miscellaneous Revenue	Business Code			
	11a Vending Machines 11b Locker Space 11c State Convention 11d All other revenue 11e Total. Add lines 11a-11d ►		3,462 395 1,908 5,765	3,462 395 1,908	
	12 Total revenue. See instructions. ►		487,113	439,590	591

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

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

Do not include amounts reported on lines 6b, 7b, 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	27,065	27,065		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	9,853	9,853		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members	56,381	56,381		
5	Compensation of current officers, directors, trustees, and key employees	24,122	24,122		
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	162,610	162,610		
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	16,360	16,360		
11	Fees for services (non-employees):				
a	Management				
b	Legal				
c	Accounting	16,635	16,635		
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion	4,299	4,299		
13	Office expenses	5,066	5,066		
14	Information technology				
15	Royalties				
16	Occupancy	87,729	87,729		
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	6,042	6,042		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	6,308	6,308		
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.)				
a	License Fees	1,110	1,110		
b	State Convention Expense	6,363	6,363		
c					
d					
e	All other expenses	7,473	7,473		
25	Total functional expenses. Add lines 1 through 24e	429,944	429,944		
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 ► <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	75,247	1	50,923
	2 Savings and temporary cash investments	71,652	2	121,705
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	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 contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	5,415	8	5,416
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a		
	b Less: accumulated depreciation	10b	10c	1,740,207
	11 Investments—publicly traded securities		11	
	12 Investments—other securities. See Part IV, line 11	590,292	12	600,338
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
	16 Total assets. Add lines 1 through 15 (must equal line 34)	2,465,540	16	2,518,589
Liabilities	17 Accounts payable and accrued expenses		17	
	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 D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25		26	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	2,455,981	27	2,510,654
	28 Temporarily restricted net assets	9,559	28	7,935
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	2,465,540	33	2,518,589
	34 Total liabilities and net assets/fund balances	2,465,540	34	2,518,589

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	487,113
2	Total expenses (must equal Part IX, column (A), line 25)	2	429,944
3	Revenue less expenses. Subtract line 2 from line 1	3	57,170
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,465,540
5	Other changes in net assets or fund balances (explain in Schedule O)	5	(4,121)
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	2,518,589

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII

1 Accounting method used to prepare the Form 990: Cash Accrual Other
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.

2a Were the organization's financial statements compiled or reviewed by an independent accountant?
b Were the organization's financial statements audited by an independent accountant?
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
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

	Yes	No
2a		✓
2b		✓
2c		u/a
3a		✓
3b		u/a

Supplemental Financial Statements

Name of the organization

Fraternal Order of Eagles #4150

Employer identification number

54-1382430

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
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 donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).										
<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education) <input type="checkbox"/> Preservation of an historically important land area										
<input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of a certified historic structure										
<input type="checkbox"/> Preservation of open space										
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.										
<table border="1"><thead><tr><th></th><th>Held at the End of the Tax Year</th></tr></thead><tbody><tr><td>2a</td><td></td></tr><tr><td>2b</td><td></td></tr><tr><td>2c</td><td></td></tr><tr><td>2d</td><td></td></tr></tbody></table>		Held at the End of the Tax Year	2a		2b		2c		2d	
	Held at the End of the Tax Year									
2a										
2b										
2c										
2d										
a Total number of conservation easements										
b Total acreage restricted by conservation easements										
c Number of conservation easements on a certified historic structure included in (a)										
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register										
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►										
4 Number of states where property subject to conservation easement is located ►										
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?										
6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ►										
7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$										
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)?										
9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.										

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.
(i)	Revenues included in Form 990, Part VIII, line 1 ► \$
(ii)	Assets included in Form 990, Part X ► \$
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items.
a	Revenues included in Form 990, Part VIII, line 1 ► \$
b	Assets included in Form 990, Part X ► \$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

a Public exhibition
 b Scholarly research
 c Preservation for future generations
 d Loan or exchange programs
 e Other _____

4 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 included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

	Amount
1c	
1d	
1e	
1f	

c Beginning balance
 d Additions during the year
 e Distributions during the year
 f Ending balance

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b 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) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ► %
 b Permanent endowment ► %
 c Temporarily restricted endowment ► %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) unrelated organizations
 (ii) related organizations

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Yes	No
3a(i)	
3a(ii)	
3b	

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land	413,174			799,839
b	Buildings	482,086			818,300
c	Leasehold improvements				
d	Equipment	107,794			122,068
e	Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c.)) ► 1,740,207

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation. Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ►		

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Mutual Fund Acct #1	515,202	End-of-Year Market Value
(2) Franklin Strategic Ser Inc C	31,940	End-of-Year Market Value
(3) Mutual Fund Acct #3	52,588	End-of-Year Market Value
(4) Metropolitan Shares	608	End-of-Year Market Value
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ►	600,338	

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ►	

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ►	

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

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1 Total revenue (Form 990, Part VIII, column (A), line 12)	1
2 Total expenses (Form 990, Part IX, column (A), line 25)	2
3 Excess or (deficit) for the year. Subtract line 2 from line 1	3
4 Net unrealized gains (losses) on investments	4
5 Donated services and use of facilities	5
6 Investment expenses	6
7 Prior period adjustments	7
8 Other (Describe in Part XIV.)	8
9 Total adjustments (net). Add lines 4 through 8	9
10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1 Total revenue, gains, and other support per audited financial statements	1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
a Net unrealized gains on investments	2a
b Donated services and use of facilities	2b
c Recoveries of prior year grants	2c
d Other (Describe in Part XIV.)	2d
e Add lines 2a through 2d	2e
3 Subtract line 2e from line 1	3
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
a Investment expenses not included on Form 990, Part VIII, line 7b	4a
b Other (Describe in Part XIV.)	4b
c Add lines 4a and 4b	4c
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1 Total expenses and losses per audited financial statements	1
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	
a Donated services and use of facilities	2a
b Prior year adjustments	2b
c Other losses	2c
d Other (Describe in Part XIV.)	2d
e Add lines 2a through 2d	2e
3 Subtract line 2e from line 1	3
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a Investment expenses not included on Form 990, Part VIII, line 7b	4a
b Other (Describe in Part XIV.)	4b
c Add lines 4a and 4b	4c
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5

Part XIV Supplemental Information

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

SCHEDULE G
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Supplemental Information Regarding
Fundraising or Gaming Activities**

OMB No 1545-0047

2011Open to Public
InspectionComplete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Name of the organization

Fraternal Order of Eagles #4150

Employer identification number

54-1382430

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a <input type="checkbox"/> Mail solicitations	e <input type="checkbox"/> Solicitation of non-government grants
b <input type="checkbox"/> Internet and email solicitations	f <input type="checkbox"/> Solicitation of government grants
c <input type="checkbox"/> Phone solicitations	g <input type="checkbox"/> Special fundraising events
d <input type="checkbox"/> In-person solicitations	

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
1	NONE		Yes	No			
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total							

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

NONE

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

Revenue		(a) Event #1 (event type)	(b) Event #2 (event type)	(c) Other events (total number)	(d) Total events (add col (a) through col (c))
	1 Gross receipts				
	2 Less: Charitable contributions				
	3 Gross income (line 1 minus line 2)				
	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d) ►				()
	11 Net income summary. Combine line 3, column (d), and line 10 ►				

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

Revenue		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
	1 Gross revenue		4,724,699	20352	4,745,051
	2 Cash prizes		4,324,160	1,419	4,325,579
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses		24,634	6,801	31,435
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) ►				(4,357,014)
	8 Net gaming income summary. Combine line 1, column d, and line 7 ►				388,037

9 Enter the state(s) in which the organization operates gaming activities: **Virginia**

a Is the organization licensed to operate gaming activities in each of these states? Yes No
b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If "Yes," explain: _____

11 Does the organization operate gaming activities with nonmembers? Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity operated in:

13a	100 %
13b	0 %

a The organization's facility

b An outside facility

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ► Tony Campbell

Address ► 1230 Old Furnace Road, Harrisonburg, VA 22802-6011

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____

c If "Yes," enter name and address of the third party:

Name ► N/A

Address ►

16 Gaming manager information:

Name ► N/A

Gaming manager compensation ► \$ _____ N/A

Description of services provided ► N/A

Director/officer Employee Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____ Non Stipulated

Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

SCHEDULE I
(Form 990)**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**Department of the Treasury
Internal Revenue Service
Name of the organization**Fraternal Order of Eagles #4150**

OMB No 1545-0047
2011
Open to Public
Inspection

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
► Attach to Form 990.

Name of the organization		Employer identification number	
Fraternal Order of Eagles #4150		54-1382430	
Part I General Information on Grants and Assistance			
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.			
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000.			
Part II can be duplicated if additional space is needed			
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant
(1) <u>SEE ATTACHMENTS</u>			
(2) _____			
(3) _____			
(4) _____			
(5) _____			
(6) _____			
(7) _____			
(8) _____			
(9) _____			
(10) _____			
(11) _____			
(12) _____			

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat No 50055P

Schedule I (Form 990) (2011)

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 SEE ATTACHMENTS					
2					
3					
4					
5					
6					
7					

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

2011

Open to Public
Inspection

Name of the organization

Fraternal Order of Eagles #4150

Employer identification number

54-1382430

Part VI---Line 6- The Fraternal Order of Eagles #4150 is a Social Club and raises money for charities and is made up of 579 Members.

Line 7a- The members hold elections annually and elect officers who maintain the operation of the Club within the guidelines of its By-Laws.

Line 7b- Decisions made by the governing body are brought to a Bi-Monthly Meeting and either approved or denied.

Line 8a- The Bi-Monthly proceedings are recorded by the Secretary and reviewed by the body at the next meeting.

Line 8b- Each Committee needs to report it's activities at the Bi-Monthly meetings and have to to be approved by the Body.

Line 11b- The 990 is reviewed by the governing body and presented at a Bi-Monthly Meeting and a copy is made available for review upon request.

Section C:

Line 19- A copy of the 990 and it's financial Statements are made available upon request to the Public and a copy of the Internal Audit and Treasurers report of Finances, and 990 are sent to the Grand Aerie Fraternal Order of Eagles, in Ohio for there review and acceptance.

PARY XI---Line 11d- This is a number is an adjustment to retained earnings to balance the Balance sheet.

FRATERNAL ORDER OF EAGLES #4150
Transaction Detail By Account
June 2011 through May 2012

Type	Date	Num	Name	Memo	Amount
FORM 990 PART IX EXPENSES					
Grants & Assistance					
1.1-Grants & Other Grp Assist					
Donations to Grand Aerie					
Check	8/19/2011	23354	DIABETES RESEARCH CENT	DIABETES FUND (2011 GRANT)	3,000.00
Check	10/3/2011	23591	BOB HANSEN DIABETES	DONATION IN HONOR OF GRAN	250.00
Check	1/30/2012	24201	ALZHEIMER'S FUND	DONATION	500.00
Check	1/30/2012	24202	BOB HANSEN DIABETES	DONATION	500.00
Check	1/30/2012	24203	MEMORIAL FOUNDATION	DONATION	500.00
Check	1/30/2012	24204	MAX BAER HEART FUND	DONATION	500.00
Check	1/30/2012	24205	ART EHRLMAN CANCER FUND	DONATION	500.00
Check	1/30/2012	24206	JIMMY DURANTE CHILDREN'	DONATION	500.00
Total Donations to Grand Aerie					
6,250.00					
Donations to Local Gps.					
Check	6/4/2011	23010	JEROME LANE	INSTALLATION OF OFFICERS	100.00
Check	6/13/2011	23168	BOY SCOUT TROOP #124	SPONSOR 1 RACE IN THE DUCK	125.00
Check	7/4/2011	23151	BOY SCOUT TROOP #124	SPONSOR 1 RACE IN THE DUCK	125.00
Check	7/28/2011	23251	MDA	DONATIONS RECEIVED FROM R	231.00
Check	7/28/2011	23251	MDA	AERIE DONATION	200.00
Check	8/27/2011	23382	LAKEVIEW GOLF CLUB	VICTORY FOR VETS GOLF TOUR	1,000.00
Check	9/6/2011	23447	THE COLLINS CENTER	DONATION	500.00
Check	9/6/2011	23448	VFW POST 632	DONATION FOR VETERANS' DAY	100.00
Check	9/8/2011	23460	LAKEVIEW GOLF CLUB	VICTORY FOR VETS GOLF TOUR	1,000.00
Check	9/16/2011	23492	CAT'S CRADLE	MEMORIAL DONATION IN HONO	85.00
Check	9/20/2011	23514	SPECIAL OLYMPICS	DONATION FOR 2011	250.00
Check	9/30/2011	23563	AMERICAN CANCER SOCIETY	DONATION TO RELAY FOR LIFE	100.00
Check	9/30/2011	23564	EAST ROCKINGHAM HIGH S	DONATION TO ART CLASS	100.00
Check	9/30/2011	spec	Massanutton Tech Collage	SCHORSHIPS	5,000.00
Check	10/3/2011	23592	THE WILDLIFE CENTER OF VI	DONATION IN HONOR OF PAST	250.00
Check	11/23/2011	Card	Exchange Catalog	Calling Cards for the Troops	764.95
Check	11/23/2011	Card	Our Lady of Seven Dolors	Calling Cards for the Troops	204.95
Check	1/12/2012	24114	HARRISONBURG TURKS	DONATION PART OF FRANK TR	300.00
Check	1/21/2012	24149	THE FIRST TEE OF HARRISO	PROGRAM AD	200.00
Check	1/30/2012	24207	EAGLE VILLAGE, INC	1/2 \$250.00 TO THE FIRST TEE P	500.00
Check	2/9/2012	24259	BROADWAY BRUINS BASEB	DONATION	100.00
Check	3/15/2012	24446	Tim Turner, Team Coach	BASEBALL PROGRAM	200.00
Check	3/29/2012	24532	Bombers Baseball	Bombers Baseball	50.00
Check	3/29/2012	24536	SPECIAL OLYMPICS	DONATION FOR 2012	250.00
Check	3/30/2012	24539	Harrisonburg Little League Ass	DONATION	150.00
Check	4/2/2012	24559	OUR LADY OF SEVEN DOLORS	DONATION PART OF FRANK TR	300.00
Check	4/13/2012	24635	HARRISONBURG RESCUE S	AWARDS & BANQUET FUND DO	500.00
Check	4/13/2012	24636	HARRISONBURG FIRE DEPA	AWARDS & BANQUET FUND DO	500.00
Check	4/13/2012	24637	ROCKINGHAM COUNTY SHE	AWARDS & BANQUET FUND DO	500.00
Check	4/13/2012	24638	HARRISONBURG POLICE DE	AWARDS & BANQUET FUND DO	500.00
Check	4/13/2012	24639	Harrisonburg Police Dept Color	For Start up needs	500.00
Check	4/16/2012	24654	OUR LADY OF SEVEN DOLORS	DONATION PART OF FRANK TR	300.00
Check	4/26/2012	24697	BROADWAY BRUINS BASEB	BASEBALL PROGRAM	600.00
Check	5/1/2012	24731	FOE 4123	(1) HOLE SPONSORSHIP MAY 1	100.00

FRATERNAL ORDER OF EAGLES #4150
Transaction Detail By Account
June 2011 through May 2012

Type	Date	Num	Name	Memo	Amount
Check	5/1/2012	24732	HARRISONBURG WOMENS S	(1) HOLE SPONSORSHIP MAY 11	150.00
Check	5/1/2012	24733	Harrisonburg Little League Ass	H'BURG LITTLE LEAGUE GIRL P	200.00
Check	5/19/2012	24818	HEMLOCK SPRINGS TROUT	FISHING RODEO FUND 2012	1,189.47
Check	5/24/2012	24847	BLUE RIDGE TROPHIES	FISHING RODEO FUND	759.68
Total Donations to Local Grps					17,985.05
State Aerie/Aerie/ Aux. Donati.					
General Journal	10/12/2011	413	LADIES AUXILIARY #4150	State President's Fund Voted at Ju	1,000.00
Check	10/25/2011	23703	VIRGINIA STATE J O E	DONATION FOR KID'S CHRISTM	800.00
Check	2/9/2012	24260	VIRGINIA STATE F O E AUXI	DONATION 10 DRAW DOWN TI	250.00
Check	3/12/2012	24565	AUXILIARY #4150	VOTED ON 03/28/2012	500.00
Check	3/27/2012	24521	AERIE #680	FOR CHILDRENS EASTER EGG	80.00
Check	3/30/2012	24540	S M L FRATERNAL ORDER E	Hole Sponsorship	100.00
Check	5/8/2012	24765		HOLE SPONSORSHIP DONATION	100.00
Total State Aerie/Aerie/Aux. Donati					2,830.00
L1-Grants & Other Grp Assist - Other					
Check	4/22/2012	24674	VOID		
Check	4/22/2012	24679	VOID		
Check	4/22/2012	24680	VOID		
Total L1-Grants & Other Grp Assist - Other					0.00
Total L1-Grants & Other Grp Assist					
Total Grants & Assistance					
Total FORM 990 PART IX EXPENSES					
TOTAL					27,065.05

FRATERNAL ORDER OF EAGLES #4150
Transaction Detail By Account
June 2011 through May 2012

FORM 990 PART IX EXPENSES				Amount
Type	Date	Num	Name	Memo
Grants & Assistance				
L2-Grants to Individuals				
Check	6/4/2011	23009	LANE, GARY VOID WRONG NAME	installation of officers
Check	6/7/2011	23032	BB&T	DONATION FOR KEVIN BAIL
Check	6/16/2011	23071	ANDREW MORRIS	AWARDS & BANQUET FUND
Check	6/23/2011	23096	COLTON PUCKETT	COLLEGE AID
Check	6/30/2011	23131	AMY HALOSKEY	AWARDS & BANQUET FUND
Check	7/22/2011	23227	DONTE FITZ-SLOAN	AWARDS & BANQUET FUND
Check	9/19/2011	23508	OLETA MILLER	DONATIONS RECEIVED TO
Check	9/19/2011	23508	OLETA MILLER	DONATION FROM AERIE IN
Check	9/20/2011	23516	DAMIAN D NESELRODT	AWARDS & BANQUET FUND
Check	9/30/2011	23562	OLETA MILLER	DONATION BY AERIE #4150
Check	11/8/2011	23771	CASH	CASH FOR GAS CARD FOR
Deposit	11/8/2011		VICKIE D SWARTZ	CHARGE FOR CHECK CARD
Check	11/14/2011	23793	YAGER MARKS	LYNN McDONALDSON'S RENT
Check	5/1/2012	24734	SHOWCASE	AWARDS & BANQUET FUND
Check	5/1/2012	24736	EMELIE TRABER	SCHOLARSHIP AWARD
Check	5/28/2012	24884	MEAGAN GRUBBS	SCHOLARSHIP AWARD REC
Total L2-Grants to Individuals				9,852.57
Total Grants & Assistance				9,852.57
Total FORM 990 PART IX EXPENSES				9,852.57
TOTAL				9,852.57