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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

Department of the Treasury

benefit trust or private foundation)

		the Treasu: ue Service	The organization may have to use a copy of this return to satisfy state re	porting requiremen	ts.	Inspection
_			alendar year, or tax year beginning 10/1/2011 , and er	nding 9/	30/2012	
B (Check if	applicable	C Name of organization Benevolent and Protective Order of Elks of the U	JSA D Employ	er Identific	ation number
	Address	change	Doing Business As Colorado Elks Association Charities, Inc.	84-12439	37	
\Box	Name ch	ange	Number and street (or P O box if mail is not delivered to street address) Room/suite	E Telepho	ne numbe	•
二	nitial reti	•	4101 West 4th Street Road	(970) 302	-9536	
=	Terminat		City or town, state or country, and ZIP + 4	(0/0/002	-0000	
\equiv	Amended		Greeley CO 80634-1	438 G Gross re	eceipts \$	245,835
=				H(a) Is this a group re		
Ш′	Application	on pendin	·	.,		= =
			John D. Amen , Sr. 15128 Wagon Wheel Drive, Brighton, CO 80603	H(b) Are all affiliates		
ı T	ax-exem	npt status	X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527	If "No," attach a	list. (see i	nstructions)
JV	Vebsite	: ► w	ww.coloraduelks.org	H(c) Group exemption	n number	▶ 1156
KF	orm of o	rganizatio	n X Corporation	r of formation 199	ຊ İMIS	tate of legal domicile CO
	art I	<u> </u>	ummary	100	<u> </u>	- 00
	1			spense funds re	reived re	eceived from
	'		em Audin Memorial Fund, the Dr. Nuckoll's Schpolarship Fund and the Eli	~ <i>-</i>	Seile d'il	SOCIACO IIOIII
	ł		ation of the B.P.O. Elks of the USA for Charitable and Educational activiti			
auc			rted by the Colorado Elks Association, Inc.	<u> </u>		
Activities & Governance					. -	
ģ	2		this box if the organization discontinued its operations or disposed of more than			40
•	3		er of voting members of the governing body (Part VI, line 1a)		3	13
豐	4		er of independent voting members of the governing body (Part VI, line 1b)		4	300
흊	5		number of individuals employed in calendar year 2011 (Part V, line 2a) .		5	0
ĕ	6		number of volunteers (estimate if necessary)		6	300
	7a		unrelated business revenue from Part VIII, column (C), line 12		7a 7b	0
	<u>b</u>	Net ur	related business taxable income from Form 990-T, line 34		1/0	Current Year
		04-	hadiana and parets (Dod VIII. line 4b)	Prior Year	22,421	Current Year 226,213
92	8		butions and grants (Part VIII, line 1h)		22,421	220,213
Revenue	9		am service revenue (Part VIII, line 2g)		22 549	10.622
æ	10		ment income (Part VIII, column (A), lines 3, 4, and 7d)		22,548	19,622
	11		revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		44,969	245,835
	12		evenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		05,317	
	13		s and similar amounts paid (Part IX, column (A), lines 1–3)	 	.05,517	213,076
	14		its paid to or for members (Part IX, column (A), line 4)			0
808	15		ssional fundraising fees (Part IX, column (A), line 11e)			0
Expenses	16a		fundraising expenses (Part IX, column (D), line 25) ► 0			<u>_</u>
Ä	17 b		expenses (Part IX, column (A), lines 11a–11d, 11f–24e)		4,142	2,897
	18		expenses. Add lines 13–17 (must equal Part IX, column (A), line 25).		09.459	215.973
	19		nue less expenses. Subtract line 18 from line 12	<u> </u>	35,510	29,862
x		LYCAGI		Beginning of Curr		End of Year
Net Assets or	20	Total	assets (Part X, line 16)		97,911	634,375
Ass	21			<u>`</u>	31,049	37,651
ž	22		ssets or fund balances. Subtract line 28 from line 20	9	66,862	596,724
	art II		ignature Block	·		
			pury, I declare that I have examined this return, including accompanying schedules and statemen	nts, and to the best of	my knowle	kige
			prect, and complete Declaration of preparer (other than officer) is based on all information of wi			
Sig	an		Hem W Tilman			2/14/2013
	_		Signature of officer	Dat	е	
п е	ere		Glenn W. Tiemann Trea	surer		
			Type or print name and title			
		TF	nnt/Type preparer's name Preparer's signature	Date	Oheat. I	
Pa		_ ا_	Henn W. Tiemann SELF-PREPARED RETURN	2/14/2012	Check self-emp	loved
Рг	epare	"		2/14/2013		,
Us	se Onl	ly ^E	im's name	Firm's EIN	<u> </u>	
			irm's address ▶	Phone no		
Ма	ay the I	RS disc	cuss this return with the preparer shown above? (see instructions)			. X Yes No
			eduction Act Notice, see the separate instructions.	<u> </u>		Form 990 (2011)
(HT	-					(2011)

	90 (2011)	Benevolent and Protective Order of Elks of the USA	84-1243937	Page Z
Par	till	Statement of Program Service Accomplishments		[
		Check if Schedule O contains a response to any question in this Part III		<u> </u>
	•	escribe the organization's mission:		
		nse funds received received from the Clem Audin Memorial Fund, the Dr. Nuckoll's ship Fund and the Elks National Foundation of the B.P.O. Elks of the USA for		••
		le and Educational activities supported by the Colorado Elks Association, Inc.		
	Oliginal	e and Educational activities supported by the Colorado Line Association, inc.		
2	Did the	organization undertake any significant program services during the year which were not listed on		
	the prior	Form 990 or 990-EZ?		X No
	If "Yes,"	describe these new services on Schedule O.		
3		organization cease conducting, or make significant changes in how it conducts, any program	F	
		?	· · · L Yes	X No
	-	describe these changes on Schedule O.		
4	expense	the organization's program service accomplishments for each of its three largest program services. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to rend allocations to others, the total expenses, and revenue, if any, for each program service report	port the amount of	ру
4a	(Code.) (Expenses \$ 0 including grants of \$ 71,210) (Reve	nue \$	0)
	Larador	Hall Society for Exceptional Children and Adults. This is the Major Project of the		
	Colorad			
	•			
4b	(Code:) (Expenses \$ 0 including grants of \$ 59,500) (Reve	nue \$	0)
	There w	as a total of 86 scholarships sent to Universities, Colleges and Technical Schools. Each		
	scholars	hip was sent direct to the schools for the recipients.		
				•••••
	•			•
			•••••	
			•	

4c	(Code:) (Expenses \$ 0 including grants of \$ 20,510) (Reve	nue \$	0)
	Clem A	idin Fund - A total of 58 Cash Grants were awarded via Elks Lodges for the care of	***************************************	
	Develop	mental, Educational, and Personal Nee ds of children 18 years of age or younger		
	•••••			
			•	
	•••••			

4d	Other n	ogram services. (Describe in Schedule O)		
	(Expens		0)	
40		norm service expenses b 2.807		

Checklist of Required Schedules Part IV Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," Х 1 2 2 X Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 Х Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) Х Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If Х 6 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 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 Х 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," 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 Χ 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 Χ b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more Х c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. 11e Χ f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D. Part X. Χ 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes." complete 12a X 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 Х 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 Х 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 Х Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV 16 Χ 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)........ Х Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?

20a 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?

Part	IV Checklist of Required Schedules (continued)	_		
	•		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	Į į		
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	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			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K. If "No," go to line 25	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			l
	to defease any tax-exempt bonds?	24c	ļ	X
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	1	1	
_	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	ļ	X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a	ļ		
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or	\		١.,
	990-EZ? If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	1		١.,
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	1		
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	-	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			1
_	Part IV instructions for applicable filing thresholds, conditions, and exceptions):	00-		
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		<u> X</u>
þ	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	204		
_	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	28b		X
С	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	200		l
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	28c	├	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29	-	 ^
30	conservation contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N</i> ,	30		 ^
J1	Part I	31	l	х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?	1 31	 	 ^
-	If "Yes," complete Schedule N, Part II	32	1	х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	-	 	 ^
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	"	 	 ^
	III, IV, and V, line 1	34	ļ	х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		 ^
	Did the organization receive any payment from or engage in any transaction with a controlled entity within	1000		_
_	the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		ł
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	1	†	
	organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	==	t	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part	i		
	VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and		1	Ť
	19? Note . All Form 990 filers are required to complete Schedule O	38	Ιx	1

1a

b

6a

d

g

h

9

Part V

Page (2014) Page (2014) Protective Order of Elko of the USA 94 124	0027		E
90 (2011) Benevolent and Protective Order of Elks of the USA 84-1243 Statements Regarding Other IRS Filings and Tax Compliance	937	P	Page 5
Check if Schedule O contains a response to any question in this Part V		_	П
		Yes	No
Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		100	
Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
gaming (gambling) winnings to prize winners?	1c	Х	
Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			\vdash
Statements, filed for the calendar year ending with or within the year covered by this return 2a 0	i		
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 <i>e-file</i> . (see instructions)			┼──
Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		х
If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
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		x
AS INC. a. II and a share as a state for simple and the state of the s			 ``
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		x
Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
organization solicit any contributions that were not tax deductible?	6a		X
If "Yes," did the organization include with every solicitation an express statement that such contributions or			
gifts were not tax deductible?	6b		
Organizations that may receive deductible contributions under section 170(c).			
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		X
If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
required to file Form 8282?	7c		Х
If "Yes," indicate the number of Forms 8282 filed during the year		l	
Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		X
Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		l	
organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			

Sponsoring organizations maintaining donor advised funds.

Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? 13a

	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
C	Enter the amount of reserves on hand
	Did the organization receive any payments for indoor tanning services during the tax year?

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

13b 13c

Х

Х

Х

Form **990** (2011)

9b

Part VI

Benevolent and Protective Order of Elks of the USA 84-1243937 Page

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.

Sect	on A. Governing Body and Management						
4-		40 40		Yes	No		
1 a	Enter the number of voting members of the governing body at the end of the tax year	1a 13	İ				
	If there are material differences in voting rights among members of the governing body, or						
	of the governing body delegated broad authority to an executive committee or similar						
_	committee, explain in Schedule O	45 200					
b	Enter the number of voting members included in line 1a, above, who are independent	1b 300		i			
2							
_	any other officer, director, trustee, or key employee?		2		<u>X</u>		
3	Did the organization delegate control over management duties customarily performed by or under		۱ ۵				
	supervision of officers, directors, or trustees, or key employees to a management company or oth	-	3		X		
4	Did the organization make any significant changes to its governing documents since the prior Form 990 w		4		<u>^</u>		
5	Did the organization become aware during the year of a significant diversion of the organization's	assets?	5	V			
6	Did the organization have members or stockholders?		6	X			
7 a	Did the organization have members, stockholders, or other persons who had the power to elect o	rappoint		v			
	one or more members of the governing body?	- · · · · · · ·	7a	<u> </u>			
b	Are any governance decisions of the organization reserved to (or subject to approval by) member		76		v		
	stockholders, or persons other than the governing body?		7b	-	X		
8	Did the organization contemporaneously document the meetings held or written actions undertake	en aunng					
_	the year by the following: The governing body?		8a	Х			
a b	Each committee with authority to act on behalf of the governing body?		8b				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be		OD		\vdash		
3	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		×		
Sect	ion B. Policies (This Section B requests information about policies not required by the						
000	to i D. I Onoice (Time Section & requeste information about periodes not required by the r	mornar revenue et	/////////////////////////////////////	Yes	No		
10a	Did the organization have local chapters, branches, or affiliates?		10a		X		
	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 p		10b				
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before	•	11a		X		
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	Х			
b		give rise to conflicts?	12b	Х			
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? In	"Yes,"					
	describe in Schedule O how this was done		12c	X	<u> </u>		
13	Did the organization have a written whistleblower policy?		13		X		
14	Did the organization have a written document retention and destruction policy?		14		X		
15	Did the process for determining compensation of the following persons include a review and appropriate the process for determining compensation of the following persons include a review and approximately approxim						
	independent persons, comparability data, and contemporaneous substantiation of the deliberatio	n and decision?					
а	The organization's CEO, Executive Director, or top management official		15a		X		
b	Other officers or key employees of the organization		15b		X		
	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 arran	gement					
	with a taxable entity duning the year?		16a		X		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to eva						
	participation in joint venture arrangements under applicable federal tax law, and take steps to saf	•					
_	the organization's exempt status with respect to such arrangements?		16b	L	L		
	tion C. Disclosure		- *				
17		IRED IN COL					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 9	90-1 (Section 501(c)(s)s or	lly)			
	available for public inspection. Indicate how you made these available. Check all that apply						
40	Own website Another's website Upon request	nonflict of manner t					
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents	s, connict of interest					
20	policy, and financial statements available to the public.	o and recepts of the					
20	State the name, physical address, and telephone number of the person who possesses the book	(700) 200 20	000				
	organization. Glenn W. Tiemann 8235 Flati Street, Depuer, CO 80221-4477	(720) 290-23	<u>UU</u>		- 		
	8235 Elati Street, Denver, CO 80221-4477						

Form 990 (2011)	Benevolent and Protective Order of Elks of the USA 84-1243937	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated	
,	Employees, and Independent Contractors Check if Schedule O contains a response to any question in this Part VII	
Section A	Officers Directors Trustees Key Employees and Highest Compensated Employees	

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- · List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- · List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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)	policy long		an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations		
(1) John D. Amen, Sr. President	7.00			X			0	0	0
(2) Frank Sommer 1st V.P.	2.00			X			0	0	0
(3) Brian O'Neil 2nd V.P.	2.00			X			0	0	0
(4) Thomas Fraker 3rd V.P.	2.00			X			0	0	0
(5) John Hutson Secretary	10.00			X			0	0	0
(6) Glenn Tiemann Treasurer	8.00			x			0	0	0
(7) James Pierce Trustee	1.00			x			0	0	0
(8) Steve Rysdam Trustee	2.00			x			0	0	
(9) James Reasoner Trustee	1.00			х			0	0	
(10) Gary Salberg Trustee	1.00			x			0	0	
(11) Frank Keller Trustee	1.00			х			0	0	
(12) Mary Ragsdale Trustee	1.00			х			0		
(13) Al Maggard Past Pres on Board	1.00			х			0		
(14)									

	990 (2011) Benevolent and Protective Ord										24393		Page 8
Pa	Section A. Officers, Directors, Tru	ıstees, Key Em	ploy	ees		_	ighe	st C	ompensated E	mployees (c	ontinue	ed)	
	, (A) Name and title	(B) Average hours per week	box, office	unies er and	Pos eck s pe d a d	more rson :rectr	than o	an ee)	(D) Reportable compensation from	(E) Reportable compensation from related	,	(F) Estima amoun	t of
	••	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	(ey employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS	C)	ompens from ti organiza and rela organiza	ation ne ition ited
(15)													
(16)													
(17)										-			·
(18)											+		
(19)													
(20)													
(21)									-				
(22)													
(23)		-											
(24)							,						
(25)													
1b c	Total from continuation sheets to Part VII, S		٠.	•		· ·	· ·	>	0		0		0
<u>d</u> 2	Total number of individuals (including but not li				ve)		rece	eive	d more than \$10		0		0
3	reportable compensation from the organization Did the organization list any former officer, dire		kev	emr	0 olov	ee (or hic	he	st compensated			Yet	No No
_	employee on line 1a? If "Yes," complete Scheo	tule J for such ii	ndivid	lual	٠.						3	•	X
4	For any individual listed on line 1a, is the sum of the organization and related organizations great undividual.										4		x
5	Did any person listed on line 1a receive or according for services rendered to the organization? If "Y										5	; ·	x
Sec	tion B. Independent Contractors												
1	Complete this table for your five highest compecompensation from the organization. Report of year.											x	
	(A) Name and business add	Iress							(B) Description of se	rvices	Com	(C) pensatio	on
													0
													0
2	Total number of independent contractors (inclu	iding but not lim	ited to	o th	ose	liste	ed ab	ove	e) who received				0
	more than \$100,000 of compensation from the	organization	<u> </u>				0						

Part IX Statement of Functional Expenses

Benevolent and Protective Order of Elks of the USA

Catement of Canada and Catemate	
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									
	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	213,076							
2	Grants and other assistance to individuals in the								
	United States. See Part IV, line 22								
3	Grants and other assistance to governments,								
	organizations, and individuals outside the			1					
	United States. See Part IV, lines 15 and 16	0							
4	Benefits paid to or for members	0							
5	Compensation of current officers, directors,								
	trustees, and key employees	0							
6	Compensation not included above, to disqualified								
	persons (as defined under section 4958(f)(1)) and	1							
	persons described in section 4958(c)(3)(B)	0							
7	Other salaries and wages	0							
8	Pension plan accruals and contributions (include								
	section 401(k) and 403(b) employer contributions)	O							
9	Other employee benefits	0							
10	Payroll taxes	0							
11	Fees for services (non-employees):								
а	Management	0							
b	Legal	0							
C	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	0							
13	Office expenses	2,897	2,897		· · · · · · · · · · · · · · · · · · ·				
14	Information technology	0							
15	Royalties	0							
16	Occupancy	0							
17	Travel	0							
18	Payments of travel or entertainment expenses	_							
	for any federal, state, or local public officials	0							
19	Conferences, conventions, and meetings	0	0						
20	Interest	0		· · · · · · · · · · · · · · · · · · ·	 				
21	Payments to affiliates	0		· · · · · · · · · · · · · · · · · · ·	_				
22	Depreciation, depletion, and amortization	0	0	0	0				
23	Insurance	0							
24	Other expenses. Itemize expenses not covered	}							
	above (List miscellaneous expenses in line 24e. If								
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)								
_		<u> </u>	······································						
a		0							
D		0							
ار ام		0			L, ,				
u e	All other expenses	0							
25	Total functional expenses. Add lines 1 through 24e .	215,973	2 907						
26	Joint costs. Complete this line only if the	210,9/3	2,897	0	0				
20	organization reported in column (B) joint costs								
	from a combined educational campaign and								
	fundraising solicitation. Check here								
	following SOP 98-2 (ASC 958-720)								
	10110WILLY GOT 80-2 (AGC 800-120)	1			L				

Part X **Balance Sheet** (A) (B) Beginning of year End of year 24,416 1 22.001 1 570,997 2 2 612,374 3 3 0 ol 4 0 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 5 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 0 7 0 8 8 2.498 0 9 Prepaid expenses and deferred charges . . . 9 Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a b Less: accumulated depreciation 10b O ol 10c 0 11 0 11 0 12 Investments—other securities. See Part IV, line 11 ol 12 0 13 Investments—program-related, See Part IV, line 11 ol 13 0 14 ol 14 0 15 ol 15 0 16 597,911 Total assets. Add lines 1 through 15 (must equal line 34) 16 634,375 17 17 18 31.049 18 31,049 19 19 6,602 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. . . 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 Secured mortgages and notes payable to unrelated third parties ol 23 0 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 25 26 Total liabilities. Add lines 17 through 25 31,049 26 37.651 Organizations that follow SFAS 117, check here ▶ and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 27 28 28 29 29 Organizations that do not follow SFAS 117, check here ► X and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds . . . 32 566,862 32 596,724 33 566,862 33 596,724 34 Total liabilities and net assets/fund balances 597,911 34 634,375

Form 9	290 (2011) Benevolent and Protective Order of Elks of the USA	84	⊢12439 3	7 р	age 12
Par	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI	<u></u>	<u> </u>		
1	Total rèvenue (must equal Part VIII, column (A), line 12)	1 1		24	15,835
2	Total expenses (must equal Part IX, column (A), line 25)	2			5,973
3	Revenue less expenses. Subtract line 2 from line 1	3			29,862
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			6,862
5	Other changes in net assets or fund balances (explain in Schedule O)	5			-1
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,	6		E	
Part	Column (B))	0		35	96,724
rait	Check if Schedule O contains a response to any question in this Part XII				
	Officer if Ochedule O Contains a response to any question in this Part XII	• •	· · ·	Yes	No No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		_	Tex	100
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2	.	l x
ь	Were the organization's financial statements audited by an independent accountant?		21	, x	\top
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh	t of			T
	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 i Schedule O.		. 20	; X	-
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:		- 1		
	Separate basis X 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		1		
	the Single Audit Act and OMB Circular A-133?		3	.	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	,		<u> </u>	
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		31	,	
			Fo	m 99 ((2011)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ►See separate instructions. Employer Identification number

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenuè Service Name of the organization

enevoie	nt and Protec	tive Order of Elk	is of the USA					<u> </u>	04-12	<u> 43937</u>		
Part I			arity Status (All org						struction	S.		
		•	ation because it is: (Fo		-		•	•				
1	·		rches, or association of			ed in sec	tion 170((b)(1)(A)(i).			
2 📙			on 170(b)(1)(A)(ii). (At		•							
3	A hospital or	a cooperative h	nospital service organiz	zation des	scribed in	section	170(b)(1)	(A)(iii).				
4 📋	,	search organiza me, city, and sta	ation operated in conju ate:	inction wit	h a hospi	tal descri	bed in se	ction 170	(b)(1)(A)	(iii). En	ter the	
5		•	r the benefit of a collect (Complete Part II.)	ge or unive	ersity own	ed or ope	erated by	a govern	mental ur	nit desc	ribed	
6	A federal, st	ate, or local gov	emment or governmer	ntal unit d	escribed i	n sectio r	170(b)(1)(A)(v).				
7 X	-		y receives a substanti (1)(A)(vi). (Complete l		its suppor	t from a g	jovernme	ental unit o	or from the	e gener	al publ	ic
8	A communit	y trust described	i in section 170(b)(1)((A)(vi). (C	omplete F	Part II.)						
9 🔲	An organization receipts from support from	tion that normall n activities relate n gross investme	y receives: (1) more the d to its exempt function on the income and unrelated after June 30, 1975.	nan 33 1/3 ons—subj ted busine	3% of its s ect to cer ess taxabl	support fro tain exce _l e income	ptions, an (less sec	nd (2) no retion 511 (nore than	33 1/3	% of its	
10 🔲	An organiza	tion organized a	nd operated exclusive	ly to test f	for public	safety. So	e sectio	n 509(a)(4).			
e [] f g	purposes of 509(a)(3). C a Type By checking persons othe 509(a)(1) or If the organization Since Augus following persons and (ii)	one or more pul- heck the box the l b this box, I certifer than foundation section 509(a)(2 zation received a this box than foundation section 509(a)(2 zation received a this box than 17, 2006, has rsons? son who directly ii) below, the government	a written determination the organization acce or indirectly controls, overning body of the su	izations do f supporti Type is not con r than one from the pted any g either alor pported o	escribed in gorgani e III—Funct ntrolled die or more IRS that	in section an zation an itionally in irectly or i publicly sit is a Typ tribution sether with on?	509(a)(1)d comple degrated indirectly supported be I, Type from any	or section to lines 1 by one or lorganizate II, or Type of the	on 509(a) 1e throug d	(2). See h 11h. Type III- equalifie	e secti -Other d	
	(ii) A fam	ily member of a	person described in (i) above? .						11g(ii)		Х
			y of a person describe							11g(iii)		Х
h	Provide the	following informa	ation about the suppor	rted organ	nization(s)			·				
• •	e of supported ganization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	ın col. (i) lıs	organization sted in your document?	the organ col. (i)	rou notify nization in of your port?	organiza (i) organi	Is the tion in col ized in the S ?) Amount support	t of
 				Yes	No	Yes	No	Yes	No]		
A)		1										
		 							ļ	 	· .	0
B)												0
C)				-								0
D) 										ļ	· · · · ·	0
E) 												0
otal												n

18

ı aı	. (Complete only if you checked the						
	Part III. If the organization fails to g		-		_		under
Soci	ion A. Public Support	uality under t	ie lesis listeu	Delow, pleas	e complete r	art III.)	
	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
		(4) 2007	(2) 2000	(0) 2000	(4) 20 10	(0, 20	(1) 10101
1	Gifts, grants, contributions, and membership fees received. (Do not					l	
	include any "unusual grants.")	191,885	209,045	235,200	222,421	242,948	1,101,499
2	Tax revenues levied for the organization's	191,000	209,043	233,200	222,721	242,340	1,101,433
4	benefit and either paid to or expended on		ļ				
	its behalf			Ì			0
3	The value of services or facilities						
•	furnished by a governmental unit to the	l					
	organization without charge		i	1			0
4	Total. Add lines 1 through 3	191,885	209,045	235,200	222,421	242,948	1,101,499
5	The portion of total contributions by each						.,,,
•	person (other than a governmental unit	Į			1		
	or publicly supported organization)		ļ	ļ			
	included on line 1 that exceeds 2%					ļ	
	of the amount shown on line 11,					l	
	column (f)				}		
6	Public support. Subtract line 5 from line 4.						1,101,499
Sect	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	191,885	209,045	235,200	222,421	242,948	1,101,499
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar		1				
	sources	25,140	22,941	22,638	22,548	19,622	112,889
9	Net income from unrelated business						
	activities, whether or not the business is				į		
	regularly carried on						0
10	Other income. Do not include gain or				·		
	loss from the sale of capital assets						
	(Explain in Part IV.)						0
11	Total support. Add lines 7 through 10.						1,214,388
12	Gross receipts from related activities, etc. (s					12	0
13	First five years. If the Form 990 is for the or						
	organization, check this box and stop here			· · · · · ·			▶□
Sec	tion C. Computation of Public Support	Percentage		·			
14	Public support percentage for 2011 (line 6, c	column (f) divid	ed by line 11, o	column (f))		14	90.70%
15	Public support percentage from 2010 Sched					15	89.50%
16a	33 1/3% support test—2011. If the organiza	ation did not ch	eck the box on	line 13, and li	ne 14 is 33 1/3	% or more, che	eck this box
	and stop here. The organization qualifies as						
b	33 1/3% support test—2010. If the organize						
	box and stop here. The organization qualific	es as a publicly	supported org	janization			▶∟_
17a	10%-facts-and-circumstances test-2011.	. If the organiza	ation did not ch	eck a box on li	ne 13, 16a, or	16b, and line 1	14
	is 10% or more, and if the organization meet	ts the "facts-an	d-circumstance	es" test, check	this box and s	top here. Expl	ain in
	Part IV how the organization meets the "fact	s-and-circums	ances" test. Th	ne organization	qualifies as a	publicly suppo	rted
	organization						▶[
b	10%-facts-and-circumstances test-2010	. If the organiza	ation did not ch	eck a box on li	ne 13, 16a, 16	b, or 17a, and	line
	15 is 10% or more, and if the organization m	neets the "facts	-and-circumsta	ances" test, che	eck this box an	d stop here. l	Explain in
	Part IV how the organization meets the "fact	s-and-circumst	tances" test. Th	ne organizatior	qualifies as a	publicly	J
	supported organization					•	

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sect	ion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")						0
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished						
	in any activity that is related to the			1			•
_	, , ,						0
3	unrelated trade or business under section 513 .						0
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						0
6	Total. Add lines 1 through 5	0	0	0	0	0	0
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons		<u> </u>	····			0
b	Amounts included on lines 2 and 3 received from other than disqualified persons that	:					
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						0
C	Add lines 7a and 7b	0	0	0	0	0	0
- 	line 6.)	L					0
	tion B. Total Support	(or fiscal year beginning in) (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total					
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6	0	0	0		0	0
10a	Gross income from interest, dividends,]		}]	}	
	payments received on securities loans,						
	-	 -				 	0
b	section 511 taxes) from businesses						
	•						
C 11		0	0	0			0
••	activities not included in line 10b, whether or not the business is regularly carried on						0
12	Other income. Do not include gain or	· · · · · · · · · · · · · · · · · · ·					<u>U</u>
	loss from the sale of capital assets						0
13	Total support. (Add lines 9, 10c, 11,						
14	First five years. If the Form 990 is for the organiza	ation's first, seco	nd, third, fourth,	or fifth tax year a			
			· · · · · · ·	<u> </u>	• • • • •	· · · · · ·	· · · -
			40 1 6				
15 46							
16 Sec					· · · · · · · · · · · · · · · · · · ·	ן סו	0.00%
17				umn (fl)		17	0.00%
18							
19a							0.0070
	not more than 33 1/3%, check this box and stop h	ere. The organiz	ation qualifies as	a publicly supp	orted organizatio	n	▶□
b							_ ا
20						-	····▶₩
20	Private foundation. If the organization did not che	ON!! NO XOU IS AD:	14, 198, of 19b,	CHECK THIS DOX 8	ına see instructio	on s	▶[]

	m 990 or 990-E2) 2011 Benevolent and Protective Order of Elks of the USA	84-1243937	Page 4
Part IV	 Supplemental Information. Complete this part to provide the explanations required Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional instructions). 	by Part II, line 10;	
• .			••••••
•••••			***************************************
•			
		•••••	······································
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***************************************		•••••••••••••••••••••••••••••••••••••••	•••••

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

Open to Public

Inspection

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. See separate instructions.

If the organization answered "Yes" to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5788 (election under section 501(h)). Complete Part II-8. Do not complete Part II-8.

	` <i>'</i> \	S (tigit tisae 1401 tiled Fotti 2100 (electio			
	•	es" to Form 990, Part IV, line 5 (Proxy	Tax) or Form 990-6	EZ, Part V, line 35c (Proxy Ta	ax), then
		ganizations: Complete Part III.		Factories	identification number
	e of organization			Employer	
sen	evolent and Protective Ord	he organization is exempt und	or coetion 504/	n) or in a costion 527 o	84-1243937
1		he organization's direct and indirect			iganization.
2					0
3	Volunteer hours				^
J	Volunteer nours			•••••	
Pa	rt I-B Complete if t	he organization is exempt und	er section 501(c)(3).	
1	Enter the amount of any	excise tax incurred by the organizati	on under section	4955 ▶ \$	0
2	Enter the amount of any	excise tax incurred by organization r	managers under s	section 4955 🕨 💲	0
3	If the organization incurre	ed a section 4955 tax, did it file Form	n 4720 for this yea	ar?	. Yes No
4a					
b	If "Yes," describe in Part	IV.			
	rt I-C Complete if t	he organization is exempt und	er section 501(c), except section 501(c)(3).
1		expended by the filing organization			
	activities			▶ \$	
2	Enter the amount of the f	filing organization's funds contributed	d to other organiza	ations	
	for section 527 exempt fu	unction activities		▶ \$	
3		penditures. Add lines 1 and 2. Enter			
	line 17b			▶ \$	0
4	Did the filing organization	n file Form 1120-POL for this year?			. Yes No
5		ses and employer identification num			
		ents. For each organization listed, e			
		ontributions received that were prom			
	as a separate segregate	d fund or a political action committee	e (PAC). It additio	nai space is needed, provi	de information in Part IV.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds if none, enter -0	contributions received and promptly and directly
				lands in none, ones o	delivered to a separate
					political organization If none, enter -0-
					Horie, enter -o-
(1)					
	······································			0	0
(2)		 		l	0
					<u> </u>
(3)				o	0
(4)				0	0
/E\					
(5)				0	0
(6)					
`-,		i	1	l n	n

Sch	edule C (Form 990 or 990-EZ) 2011						Page 2
Р	art II-A Complete if the organizate under section 501(h)).	tion is	exempt	under section 5	01(c)(3) and filed	l Form 5768 (elect	tion
A	Check ▶ if the filing organization						member's
_	name, address, EIN, ex	•	•			•	
<u>B</u>	Check ▶ if the filing organization	cnecke	ed box A	and "limited con	trol" provisions ap	ply.	
	Limits on Lo (The term "expenditures"				l.)	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence						0
b	Total lobbying expenditures to influence	-		•	•••	· · · · · · · · · · · · · · · · · · ·	0
C	Total lobbying expenditures (add lines 1	_				0	0
ď	Other exempt purpose expenditures .		•				0
e	Total exempt purpose expenditures (ad					o	0
f	Lobbying nontaxable amount. Enter the					<u> </u>	
•	columns.	amoun		lonowing table iii i	JOU1	ا	0
1	If the amount on line 1e, column (a) or (b)	ie: T	he lebbyin	g nontaxable amou	nt ie:	H	<u>v</u>
	Not over \$500,000		 	mount on line 1e.	III. 13.		
	Over \$500,000 but not over \$1,000,000			us 15% of the excess	s over \$500 000		
	Over \$1,000,000 but not over \$1,500,000			us 10% of the excess			
	Over \$1,500,000 but not over \$17,000,000			us 5% of the excess			
	Over \$17,000,000		1.000,000.		313., 4., 13.4.4, 5.5.1		
g	Grassroots nontaxable amount (enter 2		0	0			
h	Subtract line 1g from line 1a. If zero or I		•			o o	0
ï	Subtract line 1f from line 1c. If zero or le					ol	0
;	If there is an amount other than zero on	-				<u></u>	
J	section 4911 tax for this year?						Yes No
	Social 4011 tax for this year:	· · ·			· · · · · · · ·	· · · · · <u>- </u>	
	(Some organizations that	t made	a section				
	Lobb	ying Ex	penditur	s During 4-Year	Averaging Period	T	
	Calendar year (or fiscal year beginning in)	(a)	2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a	Lobbying nontaxable amount					0	0
b	Lobbying ceiling amount (150% of line 2a, column(e))						0
c	Total lobbying expenditures		·			0	0
d	Grassroots nontaxable amount					0	0
e 	Grassroots ceiling amount (150% of line 2d, column (e))						0
f	Grassroots lobbying expenditures					n	0

Schedule C (Form 990 or 990-EZ) 2011

Sched	ule C (Form 990 or 990-EZ) 2011				ſ	Page 3
Par	t II-B · Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Form	5768		
For e	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description	(a)		(b)	
	e lobbying activity.	Yes	No	Aı	mount	t
a b c d e f g h i j 2a b	Dunng the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total. Add lines 1c through 1i. Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912. If "Yes," enter the amount of any tax incurred by organization managers under section 4912.		X X X X X X X X X			
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		x			
	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	(c)(5),		ction		· · · ·
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	<u> </u>	
2 3	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			3	 	├
	t III-B Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" (answered "Yes."	(c)(5),	or se) Part		line :	3, is
1 2	Dues, assessments and similar amounts from members		1			
а	Current year		2a			
b	Carryover from last year		2b			
C	Total	•	2c			
3 4	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?		3 4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5			
Par	t IV Supplemental Information					
	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; P. complete this part for any additional information.	art II-A	; and F	Part II-E	3, line	
		••••••	•••			•••••

•	Bene	rolent and Protective Order of Elks of the U	SA	84-1243937	
		m 990 or 990-EZ) 2011			Page 4
Pari	t IV	Supplemental Information (continue	<u>d)</u>		
		•			
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		•••••••			
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					_

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047
20.11
Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Name of the organization						Employer Identin	cauon number			
Benevolent and Protective Order o	f Elks of the US	A				84	84-1243937			
Part I General Informatio										
 Does the organization maint the selection criteria used to Describe in Part IV the organ 	ain records to s	ubstantiate the am								
Part II Grants and Other	Assistance to ine 21, for any	Governments a recipient that rec	ınd Organizations iı	n the United States 000. Check this box	. Complete if the orga if no one recipient rec	ceived more than	d "Yes" to \$5,000. Part II ▶			
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
(1) Laradon Hall Society 5100 Lincoln St Denver, CO 8021	84-0412621	501(c)3	66,000	0			Major Project			
(2)			0	0						
(3)			0	0						
(4)			0	0						
(5)			0	0						
(6)			0	0						
(7)			0	0						
(8)			0	0						
(9)			0	0						
(10)			0	0						
(11)			0	0						
(12)			0	0						
2 Enter total number of section 3 Enter total number of other of	n 501(c)(3) and organizations lis	government organ ted in the line 1 tal	nizations listed in the lin	e 1 table		>	1			

Benevolent and Protective Order of Elks of the USA 84-1243937 Page 2 Schedule I (Form 990) (2011) 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 Part III can be duplicated if additional space is needed. (e) Method of valuation (book, (f) Description of non-cash assistance (a) Type of grant or assistance (b) Number of (c) Amount of (d) Amount of recipients cash grant non-cash assistance FMV, appraisal, other) Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. Part IV

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047
2011

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.

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990 or 990-EZ. Inspection

Employer Identification number

Benevolent and Protective Order of Elks of the USA	34-1243937
Form 990, Part III, Line 4d: Program Service Expenses: 2,897, Grants and allocations: 71,210,	
Revenue: 0 See Schedule O	
Form 990 Part III Section 4d Drug & Alcohol Awareness. \$14601	
Form 990 Part III Section 4d Hoop Shoot for Children 8 to 14. \$8564	
Form 990 Part III Section 4d Soccer Shoot for Children 8 to 14. \$3458	
Form 990 Part III Section 4d National Western Stock Show booth to promote Activities and	
programs for Children and Adults that the Elks provide. \$4936.	
Form 990 Part III Section 4d Stock Show and Rodeo for Children to participate. \$9520	
Form 990 Part III Section 4d Veterans programs such as: Wounded veterans sports clinic,	
Veterans Service. \$6371	
Form 990 Part III Section 4d Community Projects - Sunshine Foundation \$1000, Kempe Center	for
Abused Children \$2500, Colorado Special Olympics \$2000, Cowboys for Kids \$4000, Handicap	ped
Bowlers \$200, Ridge View Academy \$1000, Blue Star Connection \$1000.	
Form 990 Part III Section 4d Americanism Committee to promote America \$1850	
Form 990 Part VI Section c Copies of the 990 is in the hands of the current President,	
Secretary and Treasurer. All members of the governing body that if a public inspection is	
asked for, they will contact those persons for a copy.	
•••••••••••••••••••••••••••••••••••••••	
•••••••••••••••••••••••••••••••••••••••	
••••••	

Part VIII, Lines 1a-h (990) - Contributions, Gifts, Grants, and Other Amounts

	Cash	Noncash
Federated Campaigns	1	
2 Membership dues	2	
Fundraising events		
Related organizations		
Government grants (contributions)	5	
All other contributions, gifts, grants, and similar amounts not included above:		
Lodge Donations	2,887	
	-T/1	
		
Other contributions total	6 2,887	

Part X, Lines 10a and 10b (990) - Land, Buildings, and Equipment

										0	0		0	0	0
		Category or Item	Land	Buildings	Leasehold Improve- ments	Equipment	Other	Check if Investment Asset	Check if Asset Disposed	Cost/Other Basis	Beginning Accumulated Depreciation	Ending Accumulated Depreciation	Disposats/ Adjustments	Beginning Balance	Ending Balance
4	None	Category of Rom								0				0	0
2	140110									0	0			0	0
3	 					 				0	0			0	0
4	 		 							0	0			0	0
5	 			ļ		 				0	0			0	0
6	1									0	0			0	0
7	ł					1				0	0			Ö	0
8										0	0			0	0
9					· ·					0	0			0	0
10	1						_			0	0			0	0
11	1						-			0	0			0	0
12	· · · · · · · · · · · · · · · · · · ·									0	0			0	0
13	1						•			0	0			0	0
14	 			ļ						0	0			0	0
15	†									0	0			0	0
16	† · · · · ·									0	0			0	0
17	 									0	0			0	0
18	†		<u> </u>							0	0			0	
19	1									0	0			0	
20										0	0			0	0

AUDIT COMMITTEE REPORT OCTOBER 01, 2011 THROUGH SEPTEMBER 30, 2012

COLORADO ELKS ASSOCIATION, INC. COLORADO ELKS ASSOCIATION CHARITIES, INC. BENEVOLENT AND PROTECTIVE ORDER OF ELKS

The Audit Committee has performed a review of the records of the State Secretary and the State Treasurer for the period of October 1, 2011 through September 30, 2012. The review included a test of income and disbursements for the fiscal year. Income included income from Grand Lodge, donations to Charities from various lodges, dues, interest income from investments and monies from various fund raising activities. A test of disbursements was completed and was found to be supported by vouchers and/or proper receipts. No inconsistencies were found during the tests of transactions.

All bank statements for the periods were reconciled, supported by bank statements and are true to the balance statement.

A summary of Association operating expenses and income for the fiscal year shows net income of \$4,083. Charities expenses and income for the fiscal year shows net income of \$27,015. Meeting expenses and income for the fiscal year shows net income of \$18,083 which is included in the Association books.

This resulted in a total net income for the Association and the Charities of \$31,098.

Total Assets of the State Association as of September 30, 2012 are \$533,301.91. Total assets of the State Charities Corporation as of September 30, 2012 are 634,375.41.

This will complete the report for the Fiscal year ending September 30, 2012.

Suzanne M. Bradeen Audit Chairman

November 4, 2012