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Part III**Statement of Program Service Accomplishments**Check if Schedule O contains a response to any question in this Part III 1 Briefly describe the organization's mission

Line 1 Mission is to bury their deceased members and to provide for their widows and children

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 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 \$ _____ 500) (Revenue \$ _____)

See attachment #1

4b (Code _____) (Expenses \$ _____ including grants of \$ _____ 5,500) (Revenue \$ _____)

4c (Code _____) (Expenses \$ _____ including grants of \$ _____ 2,375) (Revenue \$ _____)

4d Other program services (Describe in Schedule O)

(Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4e Total program service expenses ►

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 N/A

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 N/A

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, for escrow or custodial account liability, 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

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

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 and XII is optional

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

14a 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 \$100,00 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

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? N/A

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

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	X
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 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
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
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?	24c	N/A
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	N/A
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	X
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	25b	X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled 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, Part IV instructions for applicable filing thresholds, conditions, and exceptions)	28a	X
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.	28c	X
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	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	30	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	31	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.	32	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	33	X
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	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	35a	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35b	X
b	If "Yes" to line 35a, 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	
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	X
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	
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		
	Note. All Form 990 filers are required to complete Schedule O		

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	0
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	X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	0
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	2b	N/A
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	N/A
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)? See instructions for filing requirements for Form TD F 90-221, Report of Foreign Bank and Financial Accounts.	4a	X
b	If "Yes," enter the name of the foreign country. ►	5a	X
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5b	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5c	
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	6a	X
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 as charitable contributions?	6b	N/A
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	7a	X
7	Organizations that may receive deductible contributions under section 170(c).	7b	
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?	7c	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7d	N/A
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7e	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7f	X
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7g	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7h	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	8	X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	9a	X
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.	9b	X
	Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	10a	
9	Sponsoring organizations maintaining donor advised funds.	10b	
a	Did the organization make any taxable distributions under section 4966?	11a	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	11b	
10	Section 501(c)(7) organizations. Enter:	12a	X
a	Initiation fees and capital contributions included on Part VIII, line 12	12b	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	13a	X
11	Section 501(c)(12) organizations. Enter:	13b	
a	Gross income from members or shareholders	13c	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	14a	X
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	14b	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
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? 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		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		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

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	38	
	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.			
b	Enter the number of voting members included in line 1a, above, who are independent	1b	33	
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?	2	X	
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?	3	X	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	X	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	X	
6	Did the organization have members or stockholders?	6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	8a	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	8b	X	
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 VI, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	X	

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?	10a	X
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?		N/A
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	11a	X
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		N/A
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done		N/A
13	Did the organization have a written whistleblower policy?	12b	
14	Did the organization have a written document retention and destruction policy?	12c	
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?	13	X
a	The organization's CEO, Executive Director, or top management official	14	X
b	Other officers or key employees of the organization	15a	X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)	15b	X
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	X
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 taken steps to safeguard the organization's exempt status with respect to such arrangements?		N/A
16b			

Section C. Disclosure

- List the states with which a copy of this Form 990 is required to be filed ► DE
- 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 Other (explain in Schedule O)
- 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.
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► See attachment #2

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 organizations compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organiza- tions below)	(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	
		I N D U R I S T U C T I O N A L	T R U S T U C T I O N A L	D I R E C T O R A L	O F F I C I E R	K E M P L O Y E E	C E M P L O Y E E	H C E M P L O Y E E				
Linda Oliver												
Noble												
Grand (President)		X		X								
Patrick Simpkins												
Vice Grand and												
Trustee		X		X					600			
Michael K Lynch												
Secretary		X		X					600			
Rob Oliver												
Treasurer and Trus		X		X					1,200			
Ronald S Martin												
Financial Secretar												
and Trustee		X		X					1,200			

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

(A) Name and title		(B) Average hours per week (list any hours for related organiza- tions below)	(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	
			IN- DUS- TRIAL	TRI- AL	TRU- SSES- TORS	TRU- SSES- TORS	OFF- ICE- R	KEY- EMP- LOY- EE	HCE- GMP- HPL- EEEO- SSNY- TSEE- TED	FOR- MER			
			IN- DUS- TRIAL	TRI- AL	TRU- SSES- TORS	TRU- SSES- TORS	OFF- ICE- R	KEY- EMP- LOY- EE	HCE- GMP- HPL- EEEO- SSNY- TSEE- TED	FOR- MER			
1b	Sub-total										► 3600		
c	Total from continuation sheets to Part VII, Section A										► 3600		
d	Total (add lines 1b and 1c)										► 3600		
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 ►												

3. Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee

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

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

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

	Yes	No
3		X
4		X
5		X

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

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 ►

Part VIII**Statement of Revenue**Check if Schedule O contains a response to any question in this Part VIII

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
G O C I T O F H N T S R R G I R M B A U N L T S R O A A N M S U T S	1a Federated campaigns	1a				
	b Membership dues	1b	355			
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, & similar amounts not included above	1f				
	g Noncash contributions included in lines 1a-1f	\$				
	h Total. Add lines 1a-1f	355				
P R O S G E R R A V M I V C E E N U E	2a	Business Code				
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f					
O T H E R R E V E N U E	3 Investment income (including dividends, interest, and other similar amounts)		28,192	28,192		
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6a Gross Rents	(i) Real	(ii) Personal			
	b Less: rental expenses	25,200				
	c Rental income or (loss)	8,303				
	d Net rental income or (loss)	16,897		16,897	16,897	
R E V E N U E	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
	b Less: cost or other basis and sales expenses	312,075				
	c Gain or (loss)	255,099				
	d Net gain or (loss)	56,976		56,976	56,976	
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a				
	b Less: direct expenses	b				
	c Net income or (loss) from fundraising events					
11a b c d e 12 Total revenue. See instructions	9a Gross income from gaming activities. See Part IV, line 19	a				
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities					
	10a Gross sales of inventory, less returns and allowances	a				
	b Less: cost of goods sold	b				
	c Net income or (loss) from sales of inventory					
	Miscellaneous Revenue	Business Code				
11a						
b						
c						
d All other revenue						
e Total. Add lines 11a-11d						
12 Total revenue. See instructions		102,420	102,065			

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).

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	8,575			
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 United States See Part IV, lines 15 and 16				
4 Benefits paid to or for members	4,305			
5 Compensation of current officers, directors, trustees, and key employees	3,600			
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				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees)				
a Management				
b Legal	500			
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	3,875			
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	3,519			
12 Advertising and promotion	75			
13 Office expenses	427			
14 Information technology	715			
15 Royalties				
16 Occupancy				
17 Travel	4,403			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	7,175			
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
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 Lodge Bldg utilities at 50%	1,619			
b Property tax at 50%	1,793			
c Lodge insurance at 50%	1,835			
d Property maintenance at 50%	1,008			
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	43,424			
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 SheetCheck if Schedule O contains a response to any question in this Part X

		(A) Beginning of year	(B) End of year
A S S E T S	1 Cash -- non-interest-bearing	20,125	1 16,171
	2 Savings and temporary cash investments	2	
	3 Pledges and grants receivable, net	3	
	4 Accounts receivable, net	4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	5	
	6 Loans and other 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). Complete Part II of Schedule L	6	
	7 Notes and loans receivable, net	7	
	8 Inventories for sale or use	8	
	9 Prepaid expenses and deferred charges	9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 154,951	
	b Less: accumulated depreciation	10b 131,243	10c 26,565 23,708
L I A B I L I T E S	11 Investments -- publicly traded securities	889,890	11 952,718
	12 Investments -- other securities. See Part IV, line 11	12	
	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)	936,580	16 992,597
	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 Loans and other 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	0	26 0
N F E T D A S B S A E L T A S C O R S	Organizations that follow SFAS 117 (ASC 958), check here ► <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.		
	27 Unrestricted net assets	936,580	27 992,597
	28 Temporarily restricted net assets	28	
	29 Permanently restricted net assets	29	
	Organizations that do not follow SFAS 117 (ASC 958), 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	936,580	33 992,597
	34 Total liabilities and net assets/fund balances	936,580	34 992,597

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	102,420
2	Total expenses (must equal Part IX, column (A), line 25)	2	43,424
3	Revenue less expenses Subtract line 2 from line 1.	3	58,996
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	936,580
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)).	10	992,597

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

		Yes	No
1	Accounting method used to prepare the Form 990 <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> 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? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	X
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	X
c	If "Yes" to lines 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? N/A If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	
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 N/A	3a	X
		3b	

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.

OMB No. 1545-0047

2012

Open to Public
Inspection

Name of the organization

Centerville Lodge #37 IOOF

Employer identification number

51-0098247

The completed Form 990's reviewed by the Financial Secretary
Section VI Item 19

The Financial Secretary, on request, makes the
requested documents available when requested.

Depreciation and Amortization (Including Information on Listed Property)

► See separate instructions.

► Attach to your tax return.

2012

Attachment
Sequence No 179Name(s) shown on return
Centerville Lodge #37 IOOFBusiness or activity to which this form relates
DO NOT CARRYIdentifying number
51-0098247**Part I Election To Expense Certain Property Under Section 179**

Note: If you have any listed property, complete Part V before you complete Part I

1 Maximum amount (see instructions)	1	
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation (see instructions)	3	
4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4	
5 Dollar limitation for tax year. Subtract line 4 from line 1 If zero or less, enter -0-. If married filing separately, see instructions	5	500,000
6 (a) Description of property	(b) Cost (busn. use only)	(c) Elected cost
7 Listed property. Enter the amount from line 29	7	
8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	
9 Tentative deduction Enter the smaller of line 5 or line 8	9	
10 Carryover of disallowed deduction from line 13 of your 2011 Form 4562	10	
11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	500,000
12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13 Carryover of disallowed deduction to 2013. Add lines 9 and 10, less line 12 ►	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property) (See instructions.)

Section A						
17 MACRS deductions for assets placed in service in tax years beginning before 2012	17					2,857
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here						

Section B -- Assets Placed in Service During 2012 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depr (business/investment use only -- see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Section C -- Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part IV Summary (See instructions.)

21 Listed property. Enter amount from line 28	21	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations -- see instructions	22	2,857
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form 4562 (2012)

990 PART III – STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENT

Attachment 1: Form 990 Page 2, Part III

Open to Public
Inspection

For calendar year 2012, or tax period beginning

, and ending

Name of Organization

Centerville Lodge #37 IOOF

Employer Identification Number

51-0098247

Part III – Statement of Program Service Accomplishments

Code:

Expenses.

including Grants of:

500 Revenue

Exempt Purpose Achievements

Grant to J Humphreys in honor of his deceased spouse.

990 PART III – STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENT

Attachment 1: Form 990 Page 2, Part III

RECEIVED
Open to Public
Inspection

For calendar year 2012, or tax period beginning

, and ending

Name of Organization

Employer Identification Number

Centerville Lodge #37 IOOF

51-0098247

Part III – Statement of Program Service Accomplishments

Code:

Expenses:

including Grants of:

5,500 Revenue:

Exempt Purpose Achievements

Grants and payments to regional and national IOOF to support programs at those locations.

990 PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENT

Attachment 1: Form 990 Page 2, Part III

Open to Public
Inspection

For calendar year 2012, or tax period beginning _____, and ending _____

Name of Organization

Centerville Lodge #37 IOOF

Employer Identification Number
51-0098247

Part III - Statement of Program Service Accomplishments

Code:	Expenses:	including Grants of	Revenue:
		Exempt Purpose Achievements	2,375

Community outreach grants to support the work of local charities.

990 BOOKS ARE IN CARE OF

Attachment 2: Form 990 Page 6, Part VI, Section C, Line 20

Open to Public Inspection For calendar year 2012 or tax period beginning , and ending

Name of Organization Centerville Lodge #37 IOOF Employer Identification Number 51-0098247

Part VI - Line 20

Individual Name

or

Business Name

Centerville Lodge #37 International Order of Odd Fellows

Street Address 5725 Kennett Pike

U S. Address.

Zip code 19807

City Wilmington

State DE

or

Foreign Address

City

Province or State

Country

Postal code

Phone Number (302) 368-5963

Fax Number

2012 DETAIL STATEMENTS

Centerville Lodge #37 IOOF
51-0098247

Page 1

STATEMENT #1 - Invoice with total amt only (INVOICE)

Total..... 500

TOTAL CARRIED TO INVOICE..... 500

STATEMENT #2 - Investment income total rev (990 EO PG 9 Line 3)

FCG Advisors - Dividends.....	8,851
FCG Advisors - Interest.....	427
ML acct 753-07F06 dividends.....	7,335
ML acct 753-07115 dividends.....	6,965
ML and FCG cap gains distributions.....	4,614

TOTAL CARRIED TO 990 EO PG 9 Line 3..... 28,192

STATEMENT #3 - Investment income (B) (990-EO PG 9 Line 3b)

Total from ML and FCG..... 28,192

TOTAL CARRIED TO 990-EO PG 9 Line 3b..... 28,192

STATEMENT #4 - Net rental inc.or loss t rev (990 EO PG 9 Line 6a)

Net rental income..... 16,897

TOTAL CARRIED TO 990 EO PG 9 Line 6a..... 16,897

STATEMENT #5 - Net gain or loss total revenue (990 EO PG 9 Line 7a)

net revenue..... 56,976

TOTAL CARRIED TO 990 EO PG 9 Line 7a..... 56,976

STATEMENT #6 - Net rental income (B) (990-EO PG 9 Ln 6db)

Net rental income..... 16,897

TOTAL CARRIED TO 990-EO PG 9 Ln 6db..... 16,897

STATEMENT #7 - Net gain or loss (B) (990-EO PG 9 Ln 7db)

net revenue..... 56,976

TOTAL CARRIED TO 990-EO PG 9 Ln 7db..... 56,976

2012 DETAIL STATEMENTS

Centerville Lodge #37 IOOF
51-0098247

Page 2

STATEMENT #8 - Securities sales of assets (990-EO PG 9 Line 7a(i))

ML acct 753-07115 sales.....	97,967
ML acct 753-07F06 sales.....	190,000
FCG advisors acct KWF-000507.....	24,108
TOTAL CARRIED TO 990-EO PG 9 Line 7a(i).....	312,075

STATEMENT #9 - Real less: rental expense (990-EO PG 9 Line 6b(i))

Depreciation.....	2,857
Insurance.....	1,835
Maintenance.....	1,008
Real Estate Taxes.....	1,793
Telephone	
Utilities.....	810
Janitorial	
TOTAL CARRIED TO 990-EO PG 9 Line 6b(i).....	8,303

STATEMENT #10 - Sec. cost other basis, s exp (990-EO PG 9 Line 7b(i))

ML acct 753-07115 basis.....	94,839
ML acct 753-07F06.....	136,155
FCG Advisors acct KWF-000507.....	24,105
TOTAL CARRIED TO 990-EO PG 9 Line 7b(i).....	255,099

STATEMENT #11 - Benefits paid to or for member (990 EO PG 10 Line 4)

Sick benefits.....	4,305
TOTAL CARRIED TO 990 EO PG 10 Line 4.....	4,305

STATEMENT #12 - Compensation of officers, etc (990 EO PG 10 Line 5)

Total officers compensation.....	3,600
TOTAL CARRIED TO 990 EO PG 10 Line 5.....	3,600

STATEMENT #13 - Office expenses (990 EO PG 10 Line 13)

Supplies.....	292
Petty cash.....	100
Postage.....	35

2012 DETAIL STATEMENTS

Centerville Lodge #37 IOOF
51-0098247

Page 3

TOTAL CARRIED TO 990 EO PG 10 Line 13..... 427

STATEMENT #14 - Information technology (990 EO PG 10 Line 14)

Internet.....	325
Telephone.....	390

TOTAL CARRIED TO 990 EO PG 10 Line 14..... 715

STATEMENT #15 - Travel (990 EO PG 10 Line 17)

Travel expense.....	4,403
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TOTAL CARRIED TO 990 EO PG 10 Line 17..... 4,403

STATEMENT #16 - Conf. conversions, and meeting (990 EO PG 10 Line 19)

Dining.....	1,714
Meeting refreshments.....	2,132
Local mileage.....	2,829
Helen Lynch refreshments.....	500

TOTAL CARRIED TO 990 EO PG 10 Line 19..... 7,175

STATEMENT #17 - Assist. to gov. and org in US (990 EO PG 10 Line 1a)

Grand Lodge of DE.....	2,600
IOOF Rural Encampment.....	500
Rebekah Assembly.....	800
IOOF Planning Board.....	400
IOOF Arthritus Commitee.....	250
Golden Rule Lodge.....	500
Hebron Lodge.....	500
Delaware Canton.....	200
VFW.....	200
Red Cross.....	500
Hand Of Friendship.....	800
Food Bank of DE.....	500
Salvation Army.....	200
Talleyville Fire Co.....	125
J Humphreys memorial for spouse.....	500

TOTAL CARRIED TO 990 EO PG 10 Line 1a..... 8,575

STATEMENT #18 - Accounting (990 EO PG 10 Line 11c)

Tax preparation.....	500
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2012 DETAIL STATEMENTS

Centerville Lodge #37 IOOF
51-0098247

Page 4

TOTAL CARRIED TO 990 EO PG 10 Line 11c..... 500

STATEMENT #19 - Investment manag. fees (990 EO PG 10 Line 11f)

ML investment mgmt..... 3,875

TOTAL CARRIED TO 990 EO PG 10 Line 11f..... 3,875

STATEMENT #20 - Other (990 EO PG 10 Line 11g)

Dues & Subscriptions..... 845

Septic Services

Snow removal

franchise tax

Bank Service Charges.....

300

Janitorial..... 1,300

Dues and subscriptions..... 845

Repairs..... 229

TOTAL CARRIED TO 990 EO PG 10 Line 11g..... 3,519

2012 Federal Depreciation Schedule

Centerville Lodge #37 IOOF
51-0098247

Description	Date	Method	Cost	Prior 179	Current 179	Pr Spec Allow	Curr Spec Allow	Basis	Prior Depr	Current Depr	Accum Depr	Adj Basis
UNASSIGNED												
Pavement improv	09-01-11	S/L-39	9350	0	0	0	0	9350	70	240	310	9040
hvac system	10-06-11	200DBMQ-7	9500	0	0	0	0	9500	339	2617	2956	6544
2 Assets		Totals:	18850	0	0	0	0	18850	409	2857	3266	15584
2 Assets		Grand Totals:	18850	0	0	0	0	18850	409	2857	3266	15584