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Form 990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

Open to Public Inspection

Α	For the 20	012 calend	dar year, or tax year beginning $Apr 1$, 2012, and ending	Mar	31		2013	
В	Check if app	licable	C Name of organization ROCKLAND ELKS LODGE NO. 1008		D Employ	er Identıfi	cation Number	
	Address	s change	Doing Business As		01-0	0277	51	
	Name o	hanne	Number and street (or P O box if mail is not delivered to street addr) Room/suil	te	E Telepho			
	Initial re	•	PO BOX 983		(205	7. 50	4-9200	
	\vdash		City, town or country State ZIP code + 4		(20)	1 , 39	4-9200	
	Termina				^ -			
	\vdash	ed return	ROCKLAND ME 04841				1,699,058.	
	Applica	tion pending			group return			X No
			HARRY MANK, TREAS PO BOX 983 ROCKLAND ME 04841	Are all a (ייי) If 'No,' a	iffiliates incli ittach a list	uded? (see instr	uctions) Yes	∐ No
<u> </u>	Tax-exem	pt status	501(c)(3) X 501(c) (8) (insert no.) 4947(a)(1) or 527			•	ŕ	
J	Website	e: > N/	A	(c) Group ex	xemption nu	mber 🏲	1156	
K	Form of o	rganization	X Corporation Trust Association Other ► L Year of Formation	1906	Mis	tate of leg	gal domicile ME	
Pa	rt I	Summar	ν					
1	1 Brie	efly descri	be the organization's mission or most significant activities A FRATERNA	AL SOC	CIAL W	ELFA	RE	
a)	OR	GANIZA	TION DEDICATED TO CHARITABLE, PATRIOTIC AND CO					
ĕ		OJECTS						- - -
Activities & Governance							-	
š	2 Che	ck this bo	if the organization discontinued its operations or disposed of more	than 25%	of its ne	t asset	- s	
ğ	3 Nur	nber of vo	oting members of the governing body (Part VI, line 1a)			3		9
•ಶ ഗ	4 Nur	nber of in	dependent voting members of the governing body (Part VI, line 1b)			4		9
.ë			of individuals employed in calendar year 2012 (Part V, line 2a)			5		16
≨	6 Tot	al number	of volunteers (estimate if necessary)			6		100
Ą	7a Tot	al unrelate	ed business revenue from Part VIII, column (C), line 12			7a	9,	261.
	b Net	unrelated	business taxable income from Form 990-T, line 34			7b		749.
				Pr	ior Year		Current Yea	ar
•	8 Cor	ntributions	and grants (Part VIII, line 1h)		67,5	50.	58,	502.
/Revenue	9 Pro	gram serv	rice revenue (Part VIII, line 2g)					
- ΣΦ	10 Inv	estment ır	ncome (Part VIII, column (A), lines 3, 4, and 7d)		6,9	43.	6,	996.
Ţ			e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		213,4	73.	197,	230.
<u> </u>	12 Tot	al revenue	e – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		287,9	66.	262,	728.
≂	13 Gra	nts and s	imilar angunts patti (Part IX) column (A), lines 1-3)			İ		
	14 Ber	nefits paid	to or for members (Part IX, column (A), line 4)					
Child Expenses JUL	15 Sal		er @mpensation, employee benefits (Part IX, column (A), lines 5-10)		51,7	96.	65.	634.
es.	16 a Pro		fungraising tees (Part A) Column (A), line 11e)	····	<u> </u>			<u> </u>
و ا	104 7 10		101					
្តនិ	b lot	ai fundrais	sing expenses (Part IX, column (D), line 25)		<u>.</u>			
33	17 Oth		ses (Part) X-20 umn (A), injes 11a-11d, 11f-24e)		195,3	81.	199,	<u>270.</u>
الم	18 Tot	al expense	es Add lines 13-17 (must equal Part IX, column (A), line 25)		247,1	77.	264,	904.
3	19 Rev	venue less	expenses Subtract line 18 from line 12		40,7	89.	-2,	176.
∄ 8				Beginning	of Current	t Year	End of Yea	r
a a	20 Tot	al assets	(Part X, line 16)		,084,4		1,082,	770.
Not Assets of Fund Balances	21 Tot	al liabilitie	s (Part X, line 26)	,	51,6			243.
ž	22 Net	assets or	fund balances Subtract line 21 from line 20	1	,032,7		1,030,	
	1 ::-:		re Block		,032,7	03.1	1,050,	<u>J2.7.</u>
			1	a bact of m	v knowledke	and halv	of it is true correct	
com	plete Declar	ation of preparation	ecare that I have examined this return, including accompanying schedules and statements, and to the ayer (other than officer) is based on all information of which preparer has any knowledge	e best of my	y Knowledge	and bene	si, it is true, confect,	ariu
		N 1/	/ Have Man		Jun	0 1	5 11/3	
Sig	an	Signatu	are of officer	Date		~_~	4 2012	
He		N 1/	HARRY MANK TREasurer					
		Type or	r print name and title					
		Print/Type i	preparer's name Prepare Prepare Date	1,	Check	۶ ، ۶	TIÑ	
_			2 in Wun		L	J" [
Pa			AMS CPA MBA G. ADAMS CPA MBA 7 05/28/1		self-employe	ed E	201447362	
	eparer	Firm's nam						
US	e Only	Firm's addr	ess 216 HIGH ST 121		Firm's EIN	<u> 45-</u>	<u> 3209299 </u>	
]	ELLSWORTH ME 04605-1742		Рһоле по	(207) 951-99 <u>5</u>	7
Ма	y the IRS	discuss th	is return with the preparer shown above? (see instructions)				X Yes	No
ВА	A For Pa	perwork R	Reduction Act Notice, see the separate instructions.	0101 05/09	9/13		Form 990	(2012)
							> P	

	990 (2012) ROCK						01-0	0277	<u> </u>	F	Page 2
ran		of Program Se		•							
1	Briefly describe the o			y question in this P	art III						
	A FRATERNAL SORGANIZATION PROJECTS.	SOCIAL WELFA	RE	ABLE, PATRIO	TIC AND C	COMMUNITY	 	<u>-</u>	 	- -	
2	Did the organization	undertake any sign	ficant progran	n services during the	e year which v	vere not listed	on the prior		_		
	Form 990 or 990-EZ7		Schedule O	-			·		Yes	X	No
	Did the organization If 'Yes,' describe the	-	-	cant changes in ho	w it conducts,	any program s	services?		Yes	X	No
	Describe the organiz Section 501(c)(3) an others, the total expe	d 501(c)(4) organız	ations and sec	:tion 4947(a)(1) trus	ts are required	est program se d to report the	ervices, as me amount of g	easured rants an	by ex d alloc	pense cations	s. s to
4 a	(Code)	(Expenses \$		including grants	of \$) (Revenue	\$		_)
	THE LODGE, THE AND DONATES	SIGNIFICANT	FINANCIA	L ASSISTANCE	TO VARIO	OUS CHARI			. – – -	·	
	EDUCATIONAL, \$2,406 WAS S	PENT ON VARI	OUS LODG	E FUNCTIONS	INCLUDING	G SUPPERS		IAL	. – – -	- -	
	GATHERINGS. SWAS SPENT ON									- - -	
	EVENTS FOR O	UR COMMUNITY									
		·						 	· – – -	- - - :	
							-				-
											
4 b	(Code·)	(Expenses \$		including grants	of \$) (Revenue	\$)
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		·				-		 	. .		
4 c	(Code)	(Expenses \$		ıncludıng grants	of \$) (Revenue	\$;
											-
		·							· – – -		
									· -		
		·			-				· – – -	- - -	
							<u>-</u>		- -		
											
4 d	Other program service (Expenses \$	ces (Describe in So	chedule O) including gra	ants of \$) (Revenue	s			`	
-10	Total program service	ce expenses >	including gre	21113 UI Y) (i veveriue	<u> </u>			,	

Yes No

Part IV	Checklist of	Required Se	chedules

1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		<u>x</u>
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		
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	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		<u>x</u> _
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		X
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	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
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			
ā	Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	х	
ŧ	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	11 Ь		х
•	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	11 c		X
(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	11 d		Х
•	e Did the organization report an amount for other liabilities in Part X, line 25° If 'Yes,' complete Schedule D, Part X	11 e		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	11 f		х
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a		х
ŀ	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	12b		х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
ŀ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		х
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	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19	х	
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		X
ŀ	olf 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		_

Form 990 (2012) ROCKLAND ELKS LODGE NO. 1008

Part IV | Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2° If 'Yes,' complete Schedule I, Parts I and III	22		х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		X
24 a	a 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, and 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
t	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
•	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		
•	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a 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		
ı	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		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest 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	,	х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)	- %	7. 1. °,	Ì
•	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a	-	Х
(b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>	28b		х
	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	28c		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		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		х
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		х
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
1	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	35b		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note . All Form 990 filers are required to complete Schedule O	38	х	
BAA		Form	990	(2012)

<u>P</u> a	<u>rt V</u> Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V				
_				Yes	No
1	a 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 (gambling) winnings to prize winners?	and reportable gaming	1 c	х	
2	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-				
	ments, filed for the calendar year ending with or within the year covered by this return	2a 16	2 b	Х	·
	b If at least one is reported on line 2a, did the organization file all required federal employment Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . (see ins		20	Λ	
3	a Did the organization have unrelated business gross income of \$1,000 or more during the year.	•	3 a	Х	·
J	b If 'Yes' has it filed a Form 990-T for this year? If 'No, ' provide an explanation in Schedule O	•	3 b	X	_
4	a At any time during the calendar year, did the organization have an interest in, or a signature of	or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other fin b If 'Yes,' enter the name of the foreign country: ►	ancial account)	4 a		
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Fir	annual Accounts	-	*	
5	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax		5 a		Х
,	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter		5 b		X
	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	ti alisaction	5 c		
_	· · · · · · · · · · · · · · · · · · ·			_	
6	a Does the organization have annual gross receipts that are normally greater than \$100,000, an solicit any contributions that were not tax deductible as charitable contributions?	d did the organization	6 a		X
	b If 'Yes,' did the organization include with every solicitation an express statement that such cornot tax deductible?	ntributions or gifts were	6ь		
7	Organizations that may receive deductible contributions under section 170(c).				
	a Did the organization receive a payment in excess of \$75 made partly as a contribution and paservices provided to the payor?	rtly for goods and	7 a		Х
	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	•	7 b		
	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for whi Form 8282?	ch it was required to file	7с		х
	d If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d	1	2	
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal b	enefit contract?	7 e		Х
	${f f}$ Did the organization, during the year, pay premiums, directly or indirectly, on a personal bene	fit contract?	7 f		Х
	${f g}$ If the organization received a contribution of qualified intellectual property, did the organization as required?	n file Form 8899	7 g		
	h if the organization received a contribution of cars, boats, airplanes, or other vehicles, did the of Form 1098-C?	organization file a	7 h		
8	supporting organization, or a donor advised fund maintained by a sponsoring organization, ha	g organizations. Did the ve excess business			
	holdings at any time during the year?		8		
9	-p		L	ļ	-
	a Did the organization make any taxable distributions under section 4966?		9 a		
	b Did the organization make a distribution to a donor, donor advisor, or related person?		9 b	208 2	7.
10	Section 501(c)(7) organizations. Enter	امدا			î.×
	a Initiation fees and capital contributions included on Part VIII, line 12	10a	-	è	ì
11	b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	106	- (
' '	Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders	11 a			
		114	-		
	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11 Ь	ļ. <u>.</u> .		
12	a Section 4947(a)(1) non - exempt charitable trusts. Is the organization filing Form 990 in lieu o		12a		
	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b	-		
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?		12-		ļ
	Note. See the instructions for additional information the organization must report on Schedule	0	13a		<u> </u>
	·				
	b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
_	c Enter the amount of reserves on hand	13c	1.	 	X
14	La Did the organization receive any payments for indoor tanning services during the tax year?	shadula O	14a		 ^
	b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in So	nedule O	14b	1	I

Form 990 (2012) ROCKLAND ELKS LODGE NO. 1008 01-0027751 Page 6 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 1 a 1 a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O b Enter the number of voting members included in line 1a, above, who are independent 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 Х Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X Did the organization have members or stockholders? Х 6 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? 7 a X **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? 7 b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8 a Х **b** Each committee with authority to act on behalf of the governing body? 8 b X Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10a Did the organization have local chapters, branches, or affiliates? 10 a Х b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a Х b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12a b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12_b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 12 c 13 Did the organization have a written whistleblower policy? 13 Did the organization have a written document retention and destruction policy? 14 Х Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official Х 15a b Other officers of key employees of the organization 15b Х If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16 a 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? 16_b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. Another's website Upon request Other (explain in Schedule O) Own website Describe in Schedule O whether (and if so, how) the organization makes 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

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

- 1 a 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	n nor any r	elated	org	anız	atıo	n com	pen	sated any current office	cer, director, or truste	<u> </u>
				((;)					
(A) Name and Title	(B) Average hours per week (list	one bo	x, unl er an	ess p d a d	ersor	more the state of	an e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other
	any hours for related organiza- trons below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	compensation from the organization and related organizations
(1) ARTHUR W ANDERSON	1.00								,	
ALT REP TO GL	ļ	Х	Ш					0.	0.	0.
(2) TOM WENCKUS	5.00									
EXALTED RULER	ļ			X				0.	0.	. 0.
_(3)_WILLIAM_DEMMONS	1.00									
LEADING KNIGHT & LOYAL KNIGH		Х						0.	0.	0.
_(4)_CLAYTON_COLLINS	1.00									
CHAPLAIN		X						0.	0.	0.
_(5)_CRAIG_DAVIS	1.00									
TRUSTEE	<u> </u>	Х	<u> </u>					0.	0.	0.
_(6)_DONALD_WEBBER	1.00									
TRUSTEE		X						0.	0.	0.
	10.00									
SECRETARY				Х				5,200.	0.	0.
(8) HARRY MANK	10.00								-	.
TREASURER				X				4,200.	0.	0.
(9) STEVEN OBRIEN	1.00									
TRUSTEE		X						0.	0.	0.
(10) ARTHUR FISH	1.00									
TILER		X						0.	0.	0.
(11) R SCOTT HALL	1.00							_		
TRUSTEE		X						0.	0.	0.
(12) ALFRED WIDDECOMBE	1.00									
INNER GUARD		X						0.	0.	0.
(13) JAMES BRANNAN	1.00									
PRESIDING JUSTICE		Х						0.	0.	0.
(14) BRYAN HOCKING	1.00									
LECTURING KNIGHT		Х						0.	0.	0.

Page 8

Part VII Section A. Officers, Directors, Trus	(B)	∖ey ∐	Em		oye C)	es,	<u>anc</u>	d Highest Com	pensated Emp	oyees (cont)
(A) Name and title	Average hours per week (list any	box, offi	unle: cer ar	heck ss pe nd a	rson direct	than or/trus	tee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	hours for related organiza - tions below dotted line)	or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(15) GEORGE BRIDGES TRUSTEE	1.00	х						0.	0.	0
(16) TODD JOHNSTON ESQUIRE	1.00	х						0.	0.	0.
(17)										
(18)										-
(19)										
(20)									·.	
(21)										
(22)										
(23)										
(24)										
(25)										
1 b Sub-total							>	9,400.	0.	0
c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)	A						•	9,400.	0.	0.
2 Total number of individuals (including but not limite from the organization ▶ 0	d to thos	se lis	ted	abo	ve) v	who r	ece			e compensation
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such ii	or trust	ee, k /	еу е	empl	loye	e, or	hıgi	hest compensated	employee	Yes No
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater t such individual	portable han \$15	com 0,00	npen 0? //	ısatı f 'Ye	on a	ind o ompl	ther <i>ete</i>	compensation fro Schedule J for	om	4 X
5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,' or	compens	atıor Sch	froi nedu	m ai le J	ny u <i>for</i> :	nrela such	ted	organization or in	dıvıdual	5 X
Section B. Independent Contractors 1 Complete this table for your five highest compensate									#100.000 -f	
compensation from the organization Report compe	nsation	for th	ie ca	alen	dar	year	end	ing with or within	the organization's ta	ax year
(A) Name and business addres	ss							Description o	f services	(C) Compensation
2 Total number of independent contractors (including \$100,000 in compensation from the organization ▶		limite	ed to	the	se l	ısted	abo	ove) who received	more than	
BAA		TEFAC	100	01/2	4/12				1,5.	Form 990 (2012

	Check if Schedule O contains a response to an	y question	n 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
A SI	1 a Federated campaigns 1 a					
윤릴	b Membership dues 1 b 36	921.	ĺ			
돐	c Fundraising events 1 c					
ਭੂ≦	d Related organizations 1 d			:		
용회	e Government grants (contributions)			:		
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grants, and similar amounts not included above 1 f 21	,581.				
중봉	g Noncash contributions included in lns 1a-1f. \$					
اس	h Total. Add lines 1a-1f	•	58,502.		Marie 1811	
S	Business	s Code	<u>-</u>			
짍	2a					
핑	b					
- 6	·					
S	d					_
죓	e			_		
Š	f All other program service revenue					
_	g Total / tota			'	,	<u> </u>
	3 Investment income (including dividends, interest a other similar amounts)	and _	6 006		•	
	4 Income from investment of tax-exempt bond proce	abde •	6,996.	0.	0.	6,996
	5 Royalties	ecus ·			_	
		ersonal				
	6a Gross rents 23,790.		À		À.	*
	b Less rental expenses 19,031.			44.8		
	c Rental income or (loss) 4,759.			*,	*	
	d Net rental income or (loss)	<u> </u>	4,759.	0.	4,759.	
	` r 	Other	4,739.	7#7 · 1	4,759.	
	assets other than inventory		*	₹^	*	
	b Less cost or other basis and sales expenses					*
	c Gain or (loss)				* 4	
	d Net gain or (loss)	•				
			/2			
岁	8a Gross income from fundraising events (not including \$	}	\$ (4)		,	
S S	of contributions reported on line 1c).	ļ	*			
띮	See Part IV, line 18	1				
OTHER REVENUE	b Less: direct expenses b		**	1	**	
6	c Net income or (loss) from fundraising events	▶			· · · · · · · · · · · · · · · · · · ·	
	9 a Gross income from gaming activities See Part IV, line 19 a 1,166	. 570	* ;			
	b Less: direct expenses b 1,139		,	,		3
	c Net income or (loss) from gaming activities	,,630. ►	26,722.	26,722.	0.	
				<u> </u>		0
	10a Gross sales of inventory, less returns all allowances all 337	,220.	-	* * {	*	7, 2 *
	<u></u>	,443.				
	c Net income or (loss) from sales of inventory	<u>,443.</u> ►	59,777.	55,275.	4,502.	0
	Miscellaneous Revenue Business	s Code		33,213.	4,302.	
	11a INTRALODGE RENT NONE		105,972.	105,972.	0.	0
	b	-1		100,0,2,2.		
	c	1				
	d All other revenue		-			
	e Total. Add lines 11a-11d	-	105,972.	·		
	12 Total revenue. See instructions	▶	262,728.	187,969.	9,261.	6,996

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 (B) (D) (A) Total expenses Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII Fundraising Program service Management and general expenses expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 Grants and other assistance to individuals in the United States See Part IV, line 22 Grants and other assistance to governments, 3 organizations, and individuals outside the United States See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 9,400 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 46,410. Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions) 5,052 Other employee benefits Payroll taxes 4,772. Fees for services (non-employees): a Management **b** Legal c Accounting 5,454. d Lobbying e Professional fundraising services See Part IV, line 17 f Investment management fees g Other (If line 11g amt exceeds 10% of line 25, column (A) amt, list line 11g expenses on Sch O) Advertising and promotion 2,793 Office expenses 5,359 Information technology Royalties 16 Occupancy 82,180 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 18,019 20 Interest Payments to affiliates 22 Depreciation, depletion, and amortization 29,428 23 10,788 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 GRAND_LODGE_INSURANCE_____ 2,118 1,210 b LICENSES__ c PER CAPITA FEES <u>11,296</u> d CHARITABLE CONTRIBUTIONS 30,625 e All other expenses 25 Total functional expenses. Add lines 1 through 24e 264,904 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► if following

SOP 98-2 (ASC 958-720)

Balance Sheet

Part X

Check if Schedule O contains a response to any question in this Part X (B) End of year (A) Beginning of year 1 Cash - non-interest-bearing 290,267 309,494. 2 2 Savings and temporary cash investments 298,315 278,514. 3 3 Pledges and grants receivable, net 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L. 5 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 Notes and loans receivable, net 7 Inventories for sale or use 7.000 8 11,011. Prepaid expenses and deferred charges 9 Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10 a ,153,435 b Less: accumulated depreciation 10b 669,684 488,820 10 c 483,751. Investments - publicly traded securities 11 11 Investments - other securities See Part IV, line 11 12 12 Investments - program-related See Part IV, line 11 13 13 Intangible assets 14 14 Other assets. See Part IV, line 11 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 1,084,402 16 1,082,770. Accounts payable and accrued expenses 17 17 26,829 27,960. Grants pavable 18 18 Deferred revenue 19 24,283. 19 24,868 Tax-exempt bond liabilities 20 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, 22 key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 24 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 51,697 52,243 Organizations that follow SFAS 117 (ASC 958), check here ► x and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets 27 27 608,828 572,947. 28 Temporarily restricted net assets 423,877 28 457,580. Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds 32 32 Total net assets or fund balances 33 33 1,032,705. 1,030,527. Total liabilities and net assets/fund balances 34 34 1,084,402. 1,082,770.

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Form 990 (2012)

Form	n 990 (2012) ROCKLAND ELKS LODGE NO. 1008 01-002	17751 Page 1
Pa	rt XI Reconciliation of Net Assets	
	Check if Schedule O contains a response to any question in this Part XI	
1	Total revenue (must equal Part VIII, column (A), line 12)	262,728
2	Total expenses (must equal Part IX, column (A), line 25)	264,904
3	Revenue less expenses Subtract line 2 from line 1	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	1,032,705
5	Net unrealized gains (losses) on investments 5	
6	Donated services and use of facilities 6	
7	Investment expenses 7	
8	Prior period adjustments	
9	Other changes in net assets or fund balances (explain in Schedule O)	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	1,030,527
Pa	rt XII Financial Statements and Reporting	•
	Check if Schedule O contains a response to any question in this Part XII	
		Yes 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	
2 :	a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a X
	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'	
	Separate basis K Consolidated basis Both consolidated and separate basis	
1	b Were the organization's financial statements audited by an independent accountant?	2 b X
	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.	
	Separate basis X Consolidated basis Both consolidated and separate basis	
•	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audieview, or compilation of its financial statements and selection of an independent accountant?	it, 2c X
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a X
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required are or audits, explain why in Schedule O and describe any steps taken to undergo such audits	udit 3 b

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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization **Supplemental Financial Statements**

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection
Employer identification number

RO	CKLAND ELKS LODGE NO. 1008			01-0027751
Pai	Organizations Maintaining Dono the organization answered 'Yes'			ds or Accounts. Complete if
	the organization and rec	(a) Donor advised fun		(b) Funds and other accounts
1	Total number at end of year	,,		
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and don are the organization's property, subject to the organization			or advised funds
6	Did the organization inform all grantees, donor for charitable purposes and not for the benefit impermissible private benefit?			
Pai	Conservation Easements. Comp	lete if the organization ans	wered 'Yes'	to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by	the organization (check all that a	pply)	-
	Preservation of land for public use (e g , re	ecreation or education)	Preservation of	an historically important land area
	Protection of natural habitat		Preservation of	f a certified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization last day of the tax year	on held a qualified conservation co	entribution in the	e form of a conservation easement on the
				Held at the End of the Tax Year
	a Total number of conservation easements			2 a
l	b Total acreage restricted by conservation easen	nents		2 b
	c Number of conservation easements on a certif	ied historic structure included in (a	a)	2 c
	d Number of conservation easements included in structure listed in the National Register	n (c) acquired after 8/17/06, and n	ot on a historic	2 d
3	Number of conservation easements modified, tax year ►	transferred, released, extinguished	d, or terminated	by the organization during the
4	Number of states where property subject to co	nservation easement is located >		
5	Does the organization have a written policy regand enforcement of the conservation easemen		spection, handl	ling of violations,
6	Staff and volunteer hours devoted to monitorin	g, inspecting, and enforcing conse	ervation easeme	ents during the year
7	Amount of expenses incurred in monitoring, in:	specting, and enforcing conservat	on easements	during the year
8	Does each conservation easement reported on and section 170(h)(4)(B)(ii)?	line 2(d) above satisfy the require	ements of section	on 170(h)(4)(B)(ı) Yes No
9	In Part XIII, describe how the organization repoinclude, if applicable, the text of the footnote to conservation easements			
Pa	Organizations Maintaining Colle Complete if the organization ans	ctions of Art, Historical Tr wered 'Yes' to Form 990, F	easures, or Part IV, line 8	Other Similar Assets. 8.
1	a If the organization elected, as permitted under art, historical treasures, or other similar assets in Part XIII, the text of the footnote to its finance	s held for public exhibition, educat	ion, or research	
	b If the organization elected, as permitted under historical treasures, or other similar assets hel following amounts relating to these items	SFAS 116 (ASC 958), to report in d for public exhibition, education,	its revenue sta or research in f	atement and balance sheet works of art, furtherance of public service, provide the
	(i) Revenues included in Form 990, Part VIII,	line 1		► \$
	(ii) Assets included in Form 990, Part X			► \$ ► \$
2	If the organization received or held works of ar amounts required to be reported under SFAS 1			financial gain, provide the following
	a Revenues included in Form 990, Part VIII, line	, ,		► \$
	b Assets included in Form 990. Part X			▶ \$

art Organizations Mainta	ining Collection	s of Art, Histor	ical Treasures, or	Other Similar Ass	ets (contin	ued
3 Using the organization's acquisition items (check all that apply):			· · · · · · · · · · · · · · · · · · ·			
a Public exhibition		d Loan or	exchange programs			
b Scholarly research		e Other				
c Preservation for future genera	ations	_				
4 Provide a description of the organ Part XIII.	nization's collections	and explain how th	ey further the organiza	ation's exempt purpose	ın	
5 During the year, did the organizat to be sold to raise funds rather th	nan to be maintained	as part of the orga	nization's collection?		Yes	□ N
Part IV Escrow and Custodial reported an amount o	Arrangements. C n Form 990, Par	omplete if the ord t X, line 21.	ganızatıon answere	d 'Yes' to Form 990	, Part IV, line	e 9, o
1 a Is the organization an agent, trus on Form 990, Part X?	tee, custodian, or ot	her intermediary for	contributions or other	assets not included	Yes	
b If 'Yes,' explain the arrangement	in Part XIII and com	plete the following	table			
					Amount	
c Beginning balance				1 c		
d Additions during the year				1 d		
e Distributions during the year				1 e		
f Ending balance				1 f		
2 a Did the organization include an a	mount on Form 990,	Part X, line 21?			Yes	I
b If 'Yes,' explain the arrangement	in Part XIII Check h	ere if the explantion	n has been provided in	Part XIII		П
1 a Beginning of year balance	(a) Current	(b) Prior year	(c) Two years	(d) Three years	(e) Four ye	u13
					<u> </u>	
b Contributions		1 -			 	
c Net investment earnings, gains, and losses						
d Grants or scholarships						
 Other expenditures for facilities and programs 						
f Administrative expenses						
g End of year balance						
2 Provide the estimated percentage	e of the current year	end balance (line 1	g, column (a)) held as	•		
a Board designated or quasi-endow	vment ►	8				
b Permanent endowment ►	8					
- Townson by rectinated and sympon	nt ►	8				
c Temporarily restricted endowmer						
The percentages in lines 2a, 2b,	and 2c should equal	100%				
The percentages in lines 2a, 2b, 3a Are there endowment funds not in	•		t are held and adminis	stered for the	Yes	<u> </u>
The percentages in lines 2a, 2b, 3a Are there endowment funds not in organization by	•		it are held and adminis	stered for the		Ŧ
The percentages in lines 2a, 2b, 3 a Are there endowment funds not in organization by (i) unrelated organizations	•		it are held and adminis	stered for the	3a(i)	
The percentages in lines 2a, 2b, 3 a Are there endowment funds not in organization by (i) unrelated organizations (ii) related organizations	n the possession of	the organization tha		stered for the	3a(i) 3a(ii)	
The percentages in lines 2a, 2b, 3 a Are there endowment funds not in organization by: (i) unrelated organizations (ii) related organizations b If 'Yes' to 3a(ii), are the related organizations	n the possession of the posses	the organization tha	dule R?	stered for the	3a(i)	
The percentages in lines 2a, 2b, 3 a Are there endowment funds not in organization by: (i) unrelated organizations (ii) related organizations b If 'Yes' to 3a(ii), are the related of the decrease of the content o	n the possession of the possession of the possession of the program and the program is the progr	the organization tha is required on Sche ation's endowment	dule R? funds	stered for the	3a(i) 3a(ii)	
The percentages in lines 2a, 2b, 3 a Are there endowment funds not in organization by: (i) unrelated organizations (ii) related organizations b If 'Yes' to 3a(ii), are the related of Describe in Part XIII the intended	organizations listed at uses of the organiz Equipment. See	the organization that is required on Sche ation's endowment Form 990, Parest or other basis	dule R? funds t X, line 10. (b) Cost or other	(c) Accumulated	3a(i) 3a(ii)	
The percentages in lines 2a, 2b, 3 a Are there endowment funds not in organization by: (i) unrelated organizations (ii) related organizations b If 'Yes' to 3a(ii), are the related of the december of the percentage of the per	organizations listed at uses of the organiz Equipment. See	the organization that is required on Sche ation's endowment e Form 990, Par	dule R? funds t X, line 10. (b) Cost or other basis (other)		3a(i) 3a(ii) 3b (d) Book v	/alue
The percentages in lines 2a, 2b, 3 a Are there endowment funds not in organization by: (i) unrelated organizations (ii) related organizations b If 'Yes' to 3a(ii), are the related of the december of the line of the lin	organizations listed at uses of the organiz Equipment. See	the organization that is required on Sche ation's endowment Form 990, Parest or other basis	dule R? funds t X, line 10. (b) Cost or other basis (other) 64,111.	(c) Accumulated depreciation	3a(i) 3a(ii) 3b (d) Book v	value
The percentages in lines 2a, 2b, 3 a Are there endowment funds not in organization by: (i) unrelated organizations (ii) related organizations b If 'Yes' to 3a(ii), are the related of the december of the line of the lin	organizations listed at uses of the organiz Equipment. See	the organization that is required on Sche ation's endowment Form 990, Parest or other basis	dule R? funds t X, line 10. (b) Cost or other basis (other)	(c) Accumulated	3a(i) 3a(ii) 3b (d) Book v	value
The percentages in lines 2a, 2b, 3 a Are there endowment funds not in organization by: (i) unrelated organizations (ii) related organizations b If 'Yes' to 3a(ii), are the related of the december of the part XIII the intended the part VI Land, Buildings, and Description of property 1 a Land b Buildings c Leasehold improvements	organizations listed at uses of the organiz Equipment. See	the organization that is required on Sche ation's endowment Form 990, Parest or other basis	dule R? funds t X, line 10. (b) Cost or other basis (other) 64,111. 979,803.	(c) Accumulated depreciation	3a(i) 3a(ii) 3b (d) Book v	/alue
The percentages in lines 2a, 2b, 3 a Are there endowment funds not in organization by: (i) unrelated organizations (ii) related organizations b If 'Yes' to 3a(ii), are the related of the december of the line of the lin	organizations listed at uses of the organiz Equipment. See	the organization that is required on Sche ation's endowment Form 990, Parest or other basis	dule R? funds t X, line 10. (b) Cost or other basis (other) 64,111.	(c) Accumulated depreciation	3a(i) 3a(ii) 3b (d) Book v	value 41,11

	stments — Other Securities.		line 12		0027751	Page
(a) Des	cription of security or category	(b) Book value	1 12.	(c) Method of valua	ation Cost or	
	ncluding name of security)			end-of-year ma	irket value	
(1) Financial deriv			- 			
(2) Closely-held ed(3) Other	quity interests	-				
(A) (B)			 			
(B)		 				
(C) (D)					.	
(E)						
(F)						
(G)						
(H)			-		<u> </u>	
(l)						
	st equal Form 990, Part X, column (B) line 12)	-				
	stments – Program Related.	See Form 990, Part X	, line 13.		· ·· <u> </u>	
(a) De	escription of investment type	(b) Book value		(c) Method of valua	ation Cost or	
(1)	 -	_	_	end-of-year ma	irket value	
(2)						
(3)						
(4)						
(5)						_
(6)						_
(7)	· · · · · · · · · · · · · · · · · · ·					
(8)			<u> </u>	 -		
(9)					<u>-</u>	
(10)		-				
	st equal Form 990, Part X, column (B) line 13.)	•	, Š. Š.	3 , ,	J 🗳 x	ili š ., i
Part IX Othe	r Assets. See Form 990, Part					
	(a) Description		- 	(b) Boo	k value
(1)						
(2)						
(3)						
(4)			_			
(5)						
(7)						
(8)						
(9)					-	
(10)						
) must equal Form 990, Part X, colum	ın (B), line 15.)			•	
,	r Liabilities. See Form 990, P				<u> </u>	
<u>C ;</u>	(a) Description of liability	(b) Book value	;			
(1) Federal incor	me taxes			*′	<i>\$</i> ^	ર
(2)						٠ .
(3)	-					
(4)				*		
(5)						
(6)						
(7)				*		
(8)						
(9)						
(10)						
(11)				ŧ.		
	st equal Form 990, Part X, column (B) line 25.)	<u> </u>				
2. FIN 48 (ASC 740) Fo	potnote In Part XIII, provide the text of the foot). Check here if the text of the footnote has been	note to the organization's financial	I statements that r	eports the organization's lia	bility for uncertain	tax positions
under FIN 48 (ASC 740)	, oneck here it the text of the foothole has been	i provided ili rait Alli				

Schedule D (Form 990) 2012 ROCKLAND ELKS LODGE NO. 1008		01-0027751	Page 4
Part XI Reconciliation of Revenue per Audited Financial Stater	ments With Revenue p		
1 Total revenue, gains, and other support per audited financial statements		1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a Net unrealized gains on investments	2 a		
b Donated services and use of facilities	2 b		
c Recoveries of prior year grants	2 c		
d Other (Describe in Part XIII.)	2 d		
e Add lines 2a through 2d		2 e	
3 Subtract line 2e from line 1		3	 -
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 1	-	 -
a Investment expenses not included on Form 990, Part VIII, line 7b	4.5		
•	4a 4b	—— <u> </u>	
b Other (Describe in Part XIII)	46		
c Add lines 4a and 4b	2)	4 c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 1.	-	5	
Part XII Reconciliation of Expenses per Audited Financial State	ements with Expenses		
1 Total expenses and losses per audited financial statements		1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	1 - 1		
a Donated services and use of facilities	2 a		
b Prior year adjustments	2 b		
c Other losses	2c		
d Other (Describe in Part XIII)	2 d		
e Add lines 2a through 2d		2 e	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	, ,		
a Investment expenses not included on Form 990, Part VIII, line 7b	4 a		
b Other (Describe in Part XIII.)	4 b		
c Add lines 4a and 4b		4 c	
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line	18)	5	
Part XIII Supplemental Information			
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9 line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b Also	9, Part III, lines 1a and 4; Pa complete this part to provide	rt IV, lines 1b and 2b; Pa : any additional informat	art V, ion
			 -
			
			-
BAA	-	Schedule D (Form	1 990) 2012

Schedule D	(Form 990) 2012 ROCKLAND ELKS LODGE NO. 1008	01-0027751	Page 5
Part XIII	(Form 990) 2012 ROCKLAND ELKS LODGE NO. 1008 Supplemental Information (continued)		<u>`</u> _
_		- -	

TEEA3305 06/08/12

BAA

Schedule **D** (Form 990) 2012

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization					Em	ployer identific	ation number
ROCKLAND ELKS LODGE NO.	1008				01	<u>-002775</u>	1
Part I Fundraising Activities. Comp	lete if the organ	ete this pa	rt				
1 Indicate whether the organization r	aised funds thro	ough any o	of the follow	<u> </u>			
a Mail solicitations			е	Solicitation of non-	government	grants	
b Internet and email solicitations			f	Solicitation of gove	rnment grai	nts	
c Phone solicitations			g	Special fundraising	events		
d In-person solicitations				_			
2 a Did the organization have a writter employees listed in Form 990, Par	or oral agreem t VII) or entity in	ent with a	ny individu on with pro	ial (including officers, d ifessional fundraising s	lirectors, tru ervices?	stees or key	Yes No
b If 'Yes,' list the ten highest paid incompensated at least \$5,000 by the	e organization.	ties (fundr	aisers) pui				
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(III) Did thave custod of contr	fundraiser ly or control ibutions?	(iv) Gross receipts from activity	fundraisei	ned by)	(vi) Amount paid to (or retained by) organization
		Yes	No				
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total			•				
List all states in which the organiz or licensing	ation is register	ed or licen	sed to soli	cit contributions or has	been notifie	ed it is exem	pt from registration
					- 		
	-						
		-					
		- -					-
		- -					
		-					-
			-	-			
							

Part		Fundraising Events. Complete if the more than \$15,000 of fundraising List events with gross receipts great the more than \$15,000 of fundraising the more than \$	event contributions	swered 'Yes' to Fo and gross income	orm 990, Part IV, Iir e on Form 990-EZ,	ne 18, or reported lines 1 and 6b.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add column (a) through column (c))
R			(event type)	(event type)	(total number)	through column (c)
REVENUE	1	Gross receipts				
E	2	Less: Charitable contributions			_	
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
D	5	Noncash prizes				
D I R E C T	6	Rent/facility costs		<u></u>		
- 1	7	Food and beverages				
XP	8	Entertainment				
EXPENSES	9	Other direct expenses				
•	10	Direct expense summary. Add lines 4 thro	ough 9 in column (d)		•	
		Net income summary Combine line 3, co			•	
Parl		Gaming. Complete if the organiza \$15,000 on Form 990-EZ, line 6a.	tion answered 'Yes	s' to Form 990, Par	rt IV, line 19, or rep	orted more than
REVENUE			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
Ë	1	Gross revenue	92,253.		1,074,325.	1,166,578.
_	2	Cash prizes	75,156.		933,176.	1,008,332.
D I P E N S E C T	3	Non-cash prizes	0.		0.	0.
C S T E S	4	Rent/facility costs	4,299.		101,673.	105,972.
	5	Other direct expenses	4,446.		21,106.	25,552.
	6	Volunteer labor	X Yes 35.00 % No	Yes %	X Yes 35.00 % No	
	7	Direct expense summary Add lines 2 thro	ough 5 in column (d)		•	1,139,856.
	8	Net gaming income summary Combine li	nes 1, column (d) and li	ne 7	•	26,722.
				- · · · · · · · · · · · · · · · · · · ·	-	
а	ls t	er the state(s) in which the organization opine organization licensed to operate gaming lo,' explain:				X Yes No
		re any of the organization's gaming licenses	s revoked, suspended on	_	tax year?	Yes X No

Julie	Soule & (101111 350 01 350-LZ) 2012 ROCKHAND ELRS_LODGE NO. 1008	<u> -002</u>	7731	i age 3
11	Does the organization operate gaming activities with nonmembers?		Yes	X No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity forme administer charitable gaming?	d to	Yes	X No
13	Indicate the percentage of gaming activity operated in.	1		
ā	a The organization's facility	13a	\00	8
t	An outside facility	13b	0	8
14	Enter the name and address of the person who prepares the organization's gaming/special events books and re	cords.	<u>. </u>	
	Name ► <u>HARRY MANK</u>			
	Address PO BOX 983 ROCKLAND, ME 04841			· -
15 a	a Does the organization have a contact with a third party from whom the organization receives gaming revenue?		Yes	X No
ŀ	b If 'Yes,' enter the amount of gaming revenue received by the organization 🕒 \$ and the	amou	nt	
	of gaming revenue retained by the third party • \$			
(c If 'Yes,' enter name and address of the third party			
	Name •			
				i
	Address		- -	. – – –
16	Gaming manager information			
	Name ► <u>JOHN LUDWIG</u>			
	Gaming manager compensation \$ 37, 036.			
	Description of services provided GENERAL MANAGER OF GAMING			
	Director/officer X Employee Independent contractor			
17	Mandatory distributions			
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain state gaming license?	_	Yes	X No
١	b Enter the amount of distributions required under state law to be distributed to other exempt organizations or specific	nt in th	ne	
	organization's own exempt activities during the tax year \$	<u>ь D.</u>		<u> </u>
Ra	Supplemental Information. Complete this part to provide the explanations required columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applications this part to provide any additional information (see instructions).	able. A	Also comp	zb, olete
			· · · ·	

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

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.

2012

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Department of the Treasury Internal Revenue Service Name of the organization Employer identification number 01-0027751 ROCKLAND ELKS LODGE NO. 1008 Pt VI, Line 6 THE ROCKLAND ELKS HAS 706 DUES PAYING MEMBERS Pt VI, Line 7a ALL MEMBERS MAY ELECT OFFICERS MAJOR DECISIONS ARE MADE BY MEMBER VOTE Pt VI, Line 11b AUDIT COMMITTEE REVIEWS TAX RETURNS AND THE GRAND LODGE Pt VI, Line 15b ONLY 2 OFFICERS ARE PAID FIXED SALARIES.

... 4562

Name(s) shown on return

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

► See separate instructions.
► Attach to your tax return.

Property) 20

2012

OMB No. 1545-0172

Attachment Sequence No 179

Sequence No 1

ROCKLAND ELKS LODGE NO. 1008 01-0027751 Business or activity to which this form relates Form 990 / Form 990EZ **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I 1 Maximum amount (see instructions) 2 2 Total cost of section 179 property placed in service (see instructions) Threshold cost of section 179 property before reduction in limitation (see instructions) 3 4 4 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0- If married filing 5 separately, see instructions 6 (b) Cost (business use only) (a) Description of property (C) Elected cost Listed property Enter the amount from line 29 7 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 Tentative deduction Enter the smaller of line 5 or line 8 9 10 10 Carryover of disallowed deduction from line 13 of your 2011 Form 4562 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs) 11 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 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions) Special depreciation allowance for qualified property (other than listed property) placed in service during the 14 tax year (see instructions) 15 Property subject to section 168(f)(1) election Other depreciation (including ACRS) 16 11,951 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 13,997 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here 18 Section B - Assets Placed in Service During 2012 Tax Year Using the General Depreciation System (a) Classification of property (b) Month and (c) Basis for depreciation (d) (e) Convention (g) Depreciation deduction year placed in service (business/investment use only — see instructions) Recovery period 19 a 3-year property **b** 5-year property 24,359 7.0 vrs HY 200 DB c 7-year property 3,480 d 10-year property e 15-year property f 20-year property g 25-year property 25 yrs S/L h Residential rental 27.5 yrs MM S/L property 27.5 yrs MM S/L i Nonresidential real 39 yrs MM S/L MM S/L property Section C - Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System 20 a Class life S/L b 12-year 12 yrs S/L **c** 40-year MM 40 yrs S/L Part IV Summary (See instructions.)

For assets shown above and placed in service during the current year, enter

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

21 Listed property Enter amount from line 28

29,428

21

22

Pai	1 4562 (2012)		ELKS LOD											02775		Page
		Property (Ir	nclude automob	iles, certa	ain other	vehicle	s, certa	ın co	mpu	ters, an	d prope	rty used	for ent	ertainm	ent,	
	Note: Fo	or any vehicle l s (a) through (c	for which you ar) of Section A,													
	-		ation and Other					nstru						.nobiles	$\overline{}$	<u> </u>
24 8	Do you have evi	 	т т	nvestmer (d		med / [Yes (e)	Ш	No				e written?		Yes	No
	(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	Cost or Basis for depreciation Recovery Method/ Depre		(h) reciation fuction	sect	(i) lected ion 179 cost								
25	Special deprec						ervice c	lurin	g the	tax yea	ar and				-	
26	used more that Property used		lified business			ns)						25	l <u>.</u>			
	1 Toperty useu	Thore than 50 %	in a qualified t	Jusiness	use		-		Γ		Т					_
																-
										_						
27	Property used !	50% or less in	a qualified busi	ness use		1			1							~ 7
			- 						<u> </u>							
			- -								_				-	<u> </u>
28	Add amounts in	column (h) lu	nes 25 through	27 Enter	r here an	d on lin	ne 21 na	ane i	1			28				
29	Add amounts in	• • •	•				io 21, pt	age.	•			<u></u>	·	29	1	
					B – Infor		on Use	of V	/ehic	les						-
Com	plete this section	n for vehicles u	ised by a sole p	roprietor	, partner,	or othe	er 'more	tha	n 5%	owner,	or rela	ted per	son If y	ou provi	ded veh	ıcles
.o y	our employees, f	irst answer the	questions in Se	ection C t	o see ir y	ou med	et an ex	cept	ion to	o compi	eting th	is section	on for th	ose ven	icies	
30		tal business/investment miles driven ring the year (do not include		g the year (do not include			(b Vehic) cle 2	\			(d) (e) Vehicle 4 Vehicle 5		e) cle 5	5 (f) Vehicle 6	
31	Total commuting n	•	the year					 -								_
	Total other per miles driven	•	•													
33	Total miles driv lines 30 throug		year Add				ı									,
34	Was the vehicl		personal use	Yes	No	Yes	No	Ye	es	No	Yes	No	Yes	No	Yes	No
35	Was the vehicl than 5% owner	e used primaril	y by a more													
36	Is another vehi	•														
	·	Section	C - Questions	for Emp	loyers W	ho Pro	vide Ve	hicle	s for	r Use by	/ Their 8	Employ	ees	ı	1	
	wer these question			ın except	ion to cor	mpletin	g Sectio	n B	for v	ehicles	used by	employ	yees wh	are no	t more t	han
J 76	DWITE S OF TELATE	u persons (see	mstructions)													l N-
37	Do you maintain by your employ		icy statement th	at prohib	nts all per	rsonal ı	use of v	ehicl	les, ıı	ncluding	g comm	utıng,			Yes	No
38																
39	Do you treat al	use of vehicle	s by employees	as perso	onal use?)										Ì
40	Do you provide vehicles, and re	more than five etain the inforn	e vehicles to you nation received	ur employ	ees, obta	aın ınfo	rmation	fron	n you	ır emplo	yees at	out the	use of t	he		
41	Do you meet th Note: If your a	ie requirements nswer to 37, 38	s concerning qu 3, 39, 40, or 41	alıfıed au ıs 'Yes,' d	itomobile do not coi	demon <i>mplete</i>	stration Section	use B fo	? (Se or the	e instru covere	uctions) ed vehic	les				<u> </u>
Рa	rt VI Amort	ization													<u> </u>	······································
	(a) Description of costs (b) Date amortization begins (c) Amortizable Code Amortization period or								(f) Amortization for this year							
	Amortization o	f costs that beg	ıns durıng your	2012 tax	year (se	e ınstrı	uctions)		l			l be	rcentage	!		
42							- /									
42																
42																

Supporting Statement of:

Form 990 p 12/Part XI, Line 9

	Amount	
ROUNDING		-2.
Total		