

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2012

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

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

Open to Public Inspection

☐ Yes ☐ No

Cat No 11282Y

Form **990** (2012)

2012, and ending For the 2012 calendar year, or tax year beginning April 1 March 31 20 13 D Employer identification number C Name of organization B.P.O. Elks, Danbury Lodge No. 120, Inc. Check if applicable Address change Doing Business As Danbury Elks Lodge No. 120 06-0258842 Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number Name change Initial return 36 Tamarack Avenue **Ste 114** 203 791-0919 City, town or post office, state, and ZIP code Terminated Danbury, CT 06811-4822 Amended return G Gross receipts \$ 171576.09 Application pending F Name and address of principal officer Michael Jaber H(a) Is this a group return for affiliates? Yes Vo H(b) Are all affiliates included? Yes No Same as C Above If "No," attach a list (see instructions) 501(c)(3) ✓ 501(c) () ◀ (insert no) ☐ 4947(a)(1) or ☐ 527 Tax-exempt status Website: ▶ H(c) Group exemption number ▶ Form of organization Corporation Trust Association ☐ Other ▶ L Year of formation M State of legal domicile CT Part I Summarv Briefly describe the organization's mission or most significant activities: To inculcate the principles of Charity, Justice, Brotherly Love and Fidelity; to promote the welfare and enhance the happiness of its members; to quicken the spirit of American Activities & Governance patriotism; to cultivate good fellowship and perputate itseld as a fraternal organization. Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 3 9 Number of independent voting members of the governing body (Part VI, line 1b) 4 7 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 4 Total number of volunteers (estimate if necessary) 6 20 Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 Net unrelated business taxable income from Form 990-T. line 34 0 Current Year Contributions and grants (Part VIII, line 1h). 2370.50 19750.80 Program service revenue (Part VIII, line 2g)

Investment income (Part VIII, column (A), lines 3, 4 and 7d)

10 8 9 18641.00 475.00 10 1653.13 19.94 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10 11 28022.45 57138.27 Total revenue – add lines 8 through 11 (must equal Part VIII, columba (A). 12 50687.08 77384.01 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 0 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . 0 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 2335.50 2820.70 16a Professional fundraising fees (Part IX, column (A), line 11e) . . . Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 71827.54 84877.61 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 18 74163.04 87698.31 19 Revenue less expenses. Subtract line 18 from line 12 (10314.30) (23.475.96)**Beginning of Current Year** End of Year 20 Total assets (Part X, line 16) 887719.10 868161.90 21 Total liabilities (Part X, line 26) . . . 34120.26 24877.36 Net assets or fund balances. Subtract line 21 from line 20 853598.84 843284.54 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge UNULIA Sign Date SECRETAR WILLIAM Here Type or print name and title Print/Type preparer's name Preparer's signature Date Paid Check | ıf self-employed **Preparer** Firm's name Firm's E!N ▶ Use Only Firm's address >

May the IRS discuss this return with the preparer shown above? (see instructions)

For Paperwork Reduction Act Notice, see the separate instructions.

Oirii 33	0 (2011	·	i age ೭
Part		Statement of Program Service Accomplishments	
		Check if Schedule O contains a response to any question in this Part III	<u> </u>
1		efly describe the organization's mission:	
		nculcate the principles of Charity, Justice, Brotherly Love and Fidelity; to promote the welfare and enhance the hap	
		nbers; to quicken the spirit of American patriotism; to cultivate good fellowship and to perpetuate itself as a fraterr	ıal
	orga	anization.	
2	Did 1	the organization undertake any significant program services during the year which were not listed on the	
_]Yes ☑No
	•	Yes," describe these new services on Schedule O.	
3	Did	the organization cease conducting, or make significant changes in how it conducts, any program	
	serv	vices?]Yes ☑No
	If "Y	Yes," describe these changes on Schedule O.	
4		scribe the organization's program service accomplishments for each of its three largest program services, a	
		penses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocated	tions to others,
	the 1	total expenses, and revenue, if any, for each program service reported.	
40	(000	der \/Evennes \frac{\parts}{2} \/Evennes \	
4a		de:) (Expenses \$ including grants of \$) (Revenue \$ cardinal principles of the organization are Charity, Justice, Brotherly Love and Fidelity. These principles are exem	nlified at each
		he 21 regular Lodge meetings and at various special meetings attended by the membership.	
	91.01	The Er regular bodge modelings and at various special mostlings attended by the montest sing.	
4b	(Cod	ode:) (Expenses \$including grants of \$) (Revenue \$)
	The	welfare and happines of the members are promoted and enhanced through the social activities provided in the Lo	dge facilities.
4c	(Co	ode:) (Expenses \$including grants of \$) (Revenue \$)
		mmunity service is provided by the membership to the local communities primarily by members donating their time	
		provide various youth directed activities throughout the year including the nationally recognized "Hoop Shoot" and	d "Soccer
	Sho	oot Out" programs.	
4d	Oth	ner program services (Describe in Schedule O.)	
Tu		penses \$ Including grants of \$) (Revenue \$)	
4e		tal program service expenses ▶	

Part IV Checklist of Required Schedules

			Yes	No
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		1
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		✓
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		✓
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? <i>If "Yes," complete Schedule C, Part II</i>	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,	_		1
_	Part III	_5		
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		1
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		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		√
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		V
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		✓
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.		1 5 mg.	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	√	_
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	11b		1
С	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	11c		1
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	11d		1
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	1	•
	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.	11f	•	1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII			1
h	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	12a		<u> </u>
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
b				
	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		✓
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		,
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	15		✓
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		✓
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		√
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		✓
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	1	
20 a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	<u> </u>	1
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		Ť

	V 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		1
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		✓
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		1
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		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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? <i>If "Yes," complete Schedule L, Part I</i>	24d 25a		
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		1
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		√
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
С	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	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		1
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		1
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		1
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	34		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		√
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		✓
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	38	1	

Form **990** (2012)

Form 99	0 (2012)			Page \$
Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V	<u></u>	<u> </u>	. 🗆
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	Į ,		1
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			ļ
С	Did the organization comply with backup withholding rules for reportable payments to vendors and		- ,-	1
20	reportable gaming (gambling) winnings to prize winners?	1c	<u> </u>	-
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 If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	- <u>-</u> -	
b	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	-	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		_
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		 •
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		✓
b	If "Yes," enter the name of the foreign country: ▶		-	
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	_	1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
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?	6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			ļ
	and services provided to the payor?	7a	ļ	ļ
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	_		
		7c		<u> </u>
d	If "Yes," indicate the number of Forms 8282 filed during the year			-
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		
	If the organization, during the year, pay premiums, directly of indirectly, on a personal benefit contract?.	7g		┼─
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	79 7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			<u> </u>
_	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			ļ
	organization, have excess business holdings at any time during the year?	8	-	† -
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		Ī
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12		}	İ
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b]	l	
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
þ	Gross income from other sources (Do not net amounts due or paid to other sources	ł	}	
	against amounts due or received from them.)		<u> </u>	ļ
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	<u> </u>	↓
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.	1-	<u> </u>	-
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	ļ	
h	Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which		1	ĺ
Ь	Table 1 and 1 also the form and a firm of the first terms of the first			
С	Enter the amount of reserves on hand	1	1	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	· 	1./
1761 h	If "You " hos it filed a Form 720 to report those payments? If "No " provide an evaluation in Schodulo O	14a		+

Form **990** (2012)

Form 99	0 (2012)		•		Page 6
Part					
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes				
	Check if Schedule O contains a response to any question in this Part VI		· ·	· ·	
<u>Secti</u>	on 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 9	-		i '
	If there are material differences in voting rights among members of the governing body, or				ĺ
	if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.				
	Enter the number of voting members included in line 1a, above, who are independent .	1b 7	ĺ		
р 2	Did any officer, director, trustee, or key employee have a family relationship or a business r	<u> </u>			
_	any other officer, director, trustee, or key employee?		2		i i
3	Did the organization delegate control over management duties customarily performed by or i	under the direct		•	
	supervision of officers, directors, or trustees, or key employees to a management company or othe		3		✓
4	Did the organization make any significant changes to its governing documents since the prior Form 99	0 was filed?	4		√
5	Did the organization become aware during the year of a significant diversion of the organization	n's assets?.	5		✓
6	Did the organization have members or stockholders?		6	✓	
7a	Did the organization have members, stockholders, or other persons who had the power to	elect or appoint	1	_	
	one or more members of the governing body?		7a	✓	<u> </u>
b	Are any governance decisions of the organization reserved to (or subject to approval			1	1
8	stockholders, or persons other than the governing body?		7b		
0	the year by the following:	dertaken duning			· '
2	The governing body?		8a	1	}
a b	Each committee with authority to act on behalf of the governing body?		8b	1	\vdash
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot				
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		✓
Secti	on B. Policies (This Section B requests information about policies not required by the	e Internal Rever	ue C	ode.)	
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		✓
b	If "Yes," did the organization have written policies and procedures governing the activities of				
	affiliates, and branches to ensure their operations are consistent with the organization's exem		10b		_
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body befor	e tiling the form?	11a		-
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>		12a		- ·
12a b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	e rise to conflicts?	12b		+
C	Did the organization regularly and consistently monitor and enforce compliance with the p		125		
·	describe in Schedule O how this was done		12c		
13	Did the organization have a written whistleblower policy?		13		1
14	Did the organization have a written document retention and destruction policy?		14		✓
15	Did the process for determining compensation of the following persons include a review a				
	independent persons, comparability data, and contemporaneous substantiation of the deliberation		ļ., .	<u> </u>	نـــِـ ا
a	The organization's CEO, Executive Director, or top management official		15a		1
b	Other officers or key employees of the organization		15b		 ✓
160	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or simi	lar arrandement		[!
16a	with a taxable entity during the year?		16a	-	j
b	If "Yes," did the organization follow a written policy or procedure requiring the organization	to evaluate its	100		
J	participation in joint venture arrangements under applicable federal tax law, and take steps t	o safeguard the			
	organization's exempt status with respect to such arrangements?		16b	†	† <i>'</i>
Secti	on C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed ► None				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a	nd 990-T (Sectio	n 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 Sci				1
19	Describe in Schedule O whether (and if so, how), the organization made its governing docu	iments, conflict o	ot inte	rest p	olicy,
20	and financial statements available to the public during the tax year.	ooke and records	of the	2	
20	State the name, physical address, and telephone number of the person who possesses the boorganization: ► John Tanner, Lodge Treasurer; 42 Driftway Road, Danbury, CT 06811-5103	JUNS AND TECUTOS	or tile	-	
	John Tanner, Logge Treasurer; 42 Drittway Road, Danbury, C1 06811-5103				

Form	990	(2012)	
Citt	330	(2012)	

Page 7

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

Check this box if heither the organization no	Tarry relate	u org	ailiz			ompe	1150	Ted any currer	it officer, director	, or trustee.
					C)					
(A)	(B)	(40.5	ot ch		ition	e than o	222	(D)	(E)	(F)
Name and Title	Average					is both		Reportable	Reportable	Estimated
	hours per week (list any	office				or/trust		compensation	compensation from	
	hours for	유공	l Ins	Officer	<u>₹</u>	딇ᇣ	Former	from the	related organizations	other compensation
	related	dred	<u> </u>	Cer	ě	ploy	me	organization	(W-2/1099-MISC)	from the
	organizations below dotted	ctor	l on	'	忌	/ee co		(W-2/1099-MISC)		organization and related
	line)	Individual trustee or director	1 2		Key employee	mg				organizations
		tee	Institutional trustee			Highest compensated employee				_
			L°			<u>e</u>				
(4)										
(1) Michael Jaber	10	1		,						_
Exalted Ruler		-	-	✓		-	 	0	0	O
(2) Suzanne Novaco	6	/		1						_
Esteemed Leading Knight	_	-	-	V	<u> </u>	-	-	0	0	
(3) Lisa Knapp	2	/		1						_
Esteemed Loyal Knight	_	-	\vdash	*	├	-	├	0	0	0
(4) Eric Svege	2	/		1			ł			_
Esteemed Lecturing Knight		-	-	· V	-		├	0	0	
(5) Norm Figgs	8	1		,				_		
Chairman, Board of Trustees		*	-	✓	 			0	0	0
(6) Steven Parker	2	,		,						
Trustee		✓		✓	_		-	0	0	
(7) Jack Knapp	2	,	1	,						
Trustee	<u> </u>	✓		✓	-			0	0	
(8) William Chinn	8	ļ								
Secretary		<u> </u>	\sqcup	✓				1971.00	0	0
(9) John Tanner	2									
<u>Treasurer</u>		<u> </u>		✓	<u> </u>		<u> </u>	1072.50	0	
(10) Brian McCullough	2									
Esquire				✓	_			0	0	
(11) John Wallace	2			_		ł				
<u>Tiler</u>		<u> </u>		✓				<u> </u>	0	
(12) Robert Morelli	2		1							
Inner Guard		ļ		✓				0	0	0
(13)	ļ	Į				1				
	_		\sqcup		<u> </u>					
(14)	<u> </u>									
							<u></u>	<u></u>		

	(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted	ox, ce Individua or directo	unles	eck s pe	ition more	that highest compensated to both the employee	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation fr related organizations (W-2/1099-MIS		Estir amo ot compe fror organ and r	mated unt of her ensation in the inzation related	
		line)	stee	rustee		ă	pensated					Organ	izations	
(15)														
(16)														
(17)														
(18)														
(19)						_					-		· · · · ·	
(20)			_						-					
(21)														
(22)								-			_			
			_											
(23)														
(24)					_									
(25)			-											
1b c d	Sub-total Total from continuation sheets to Part Total (add lines 1b and 1c)	VII, Section	n A					> > >	3043.50 0 3043.50		0 0			0
2	Total number of individuals (including bu reportable compensation from the organ	t not limited	d to th					e) w			0,000	of		
3	Did the organization list any former of employee on line 1a? <i>If "Yes," complete</i>	ficer, direc	tor, o						oloyee, or high		sated	3	Yes	No ✓
4	For any individual listed on line 1a, is the organization and related organizations individual	e sum of re greater th	porta an \$	ble 150	con ,000	npe)? <i>[</i>	nsatio f "Ye	on a s,"	and other complete Scl	pensation from medule J for 	m the such	4		√
5	Did any person listed on line 1a receive of for services rendered to the organization	or accrue co? If "Yes," o	ompe comp	nsa lete	tion Scl	fro hedi	m any ule J	y ur for s	nrelated organi such person	zation or indiv		5		✓
Section	on B. Independent Contractors													
1	Complete this table for your five highest compensation from the organization. Repear.											anizatio		x
	(A) Name and business add	dress							(B) Description of s	services	C	(C) Compens	sation	
N/A								-	<u> </u>					
								$^{+}$						
2	Total number of independent contractor received more than \$100,000 of compen							o ti	hose listed ab	ove) who				

Part	VIII	Statement of Revenue						_
		Check if Schedule O contain	s a respo	nse to any quest				<u> </u>
! !					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts nts	1a	Federated campaigns	. 1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	. 1b	15460.80				1
s, C Am	С	Fundraising events						
Gift	d	Related organizations	. 1d			i		
is, (е	Government grants (contribution	s) 1e			1		'
tior sr S	f_						i	
ig #				4250.00				Ī
ig g	g						İ	
	h	Total. Add lines 1a-1f	· · · ·		19750.80	<u> </u>		
nge -	_			Business Code		I		 "
eve	2a	Contributions for Programs		813410	475.00			
e E	b							
Ž.	C							
Š	d				_			
Jran		All other program service rev		-				
Program Service Revenue	g				475.00			
	3	Investment income (includi			475.00			
		and other similar amounts)			19.94	o	o	19.94
	4	Income from investment of tax-	exempt bo	ond proceeds ►	0	0	0	0
	5	Royalties			0	0	0	0
			Real	(II) Personal				
	6a	Gross rents	54955.63	0		į		
	b	Less rental expenses	0	0				
	С		54955.63	<u> </u>				
	_ d	Net rental income or (loss)	<u> </u>	•	54955.63	54955.63	0	0_
	7a							
	_	Less: cost or other basis	- 0.					1
	b	and sales expenses					!	
	С	Gain or (loss)	0 0	0	1			1
	d	Net gain or (loss)		D	0		أم	
		rver gam or (1000)			- 0	U		
<u>n</u>	8a	Gross income from fundraisi	ng				!	<u> </u>
Other Revenue		events (not including \$	0			,	,	i
Re e		of contributions reported on lin					!	
ē		See Part IV, line 18	а	2375.00		!	+	
₹	b	Less: direct expenses	b	529.03				
_		Net income or (loss) from fur		events . ►	1845.97		0	0
	9a	Gross income from gaming a				!	i	
		See Part IV, line 19				;		į
		Less: direct expenses			Ì		į	
	1 .	Net income or (loss) from ga	-	vities >	(177.39)	0	0	(177.39)
	IUa	Gross sales of inventory returns and allowances .		047.04			;	
	ь	Less: cost of goods sold .					İ	ı
	C	Net income or (loss) from sal			313.15	313.15	اه	
		Miscellaneous Revenue		Business Code	313.13	313.15	0	<u>U</u>
	11a	Other Income	<u> </u>		200.91		İ	200.91
	Ь	Odiei income			200.01			
	c	***************************************						
	d	All other revenue						
	e	Total. Add lines 11a-11d .		•	200.91			
	12	Total revenue. See instruction	ons	<u>.</u> ▶_[77384.01	55268.78	0	43.46
								Form 990 (2012)

Sectio	n 50)1(c)(3)	and	501	(c)(4) (organiza	ations	must	compl	ete al	II columns	. All	other	organ	nization	s must	comp	olete (colun	nn (A).

Section	11 30 1 (c)(3) and 30 1 (c)(4) organizations must com				
	Check if Schedule O contains a respons	se to any question i	n this Part IX .		🗹
Do no	t include amounts reported on lines 6b, 7b,	(A)	(B)	(C) Management and	(D)
8b. 9b	, and 10b of Part VIII.	Total expenses	Program service expenses	Management and	Fundraising
1			expenses	general expenses	expenses
	Grants and other assistance to governments and				i
	organizations in the United States. See Part IV, line 21	0			
2	Grants and other assistance to individuals in				· ·
	the United States. See Part IV, line 22	o		1	ļ
3	Grants and other assistance to governments,				
•	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16			j	1
_	·	0			
4	Benefits paid to or for members	0			<u> </u>
5	Compensation of current officers, directors,			ŀ	
	trustees, and key employees	2271.00		<u> </u>	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	o			
-					
7	Other salaries and wages	0		 	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	0			
9	Other employee benefits	0			
10	Payroll taxes	549.70			
11	Fees for services (non-employees):				
а	Management				
b	Legal	50.00			-
C	Accounting	0			
ď	Lobbying	0			
е	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0			
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.) .	0			
12	Advertising and promotion	0			
13	Office expenses	3586.57			
14	Information technology	0			
15	Royalties	0			
	· •				
16	Occupancy	4018.32			
17	Travel	0			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings .	3092.85			
20	Interest	5.89			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization .	656.78	-		
23	Insurance				
	<u> </u>	2139.54		 	
24	Other expenses. Itemize expenses not covered				1
	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.)				
а	Property Taxes	19531.76			<u> </u>
b	Donations	4238.00			
C	National & State per capita assessment	2742.90			
ď	Sunnline	1665.33		 	
e	All other expenses		· · · · · · · · · · · · · · · · · · ·	 	
_	Total functional expenses. Add lines 1 through 24e	43149.67		 	
25_		87698.31			
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				
	following SOP 98-2 (ASC 958-720)				

Part X **Balance Sheet** (A) (B) Beginning of year End of year 28999.97 1 25243.31 2 2 6.86 5215.02 3 3 n 0 4 4 363.60 0 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 0 0 Loans and other receivables from other disqualified persons (as defined under section 6 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. 0 0 **Assets** 7 7 0 0 Inventories for sale or use 8 8 630.25 481.08 Prepaid expenses and deferred charges . 9 46128.16 2500.00 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 864713.13 10b b Less: accumulated depreciation 29990.64 811590.26 10c 834722.49 11 Investments—publicly traded securities 11 0 12 12 Investments—other securities. See Part IV. line 11 . . . 0 0 13 Investments—program-related. See Part IV, line 11... 0 13 0 14 14 0 0 15 15 0 0 16 Total assets. Add lines 1 through 15 (must equal line 34) 887719.10 16 868161.90 17 17 22558.16 14093.36 18 18 0 0 19 9598.9 19 10232.00 20 20 0 0 21 Escrow or custodial account liability. Complete Part IV of Schedule D. ol 21 0 Loans and other payables to current and former officers, directors, 22 trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 0 0 Secured mortgages and notes payable to unrelated third parties . . . 23 23 0 0 24 Unsecured notes and loans payable to unrelated third parties . . . 24 O 0 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X 25 1963.20 552.00 Total liabilities. Add lines 17 through 25 26 34120.26 26 24877.36 Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and **Balances** complete lines 27 through 29, and lines 33 and 34. 27 27 28 28 Fund 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. Net Assets or 30 Capital stock or trust principal, or current funds 1883.03 30 2205.64 31 Paid-in or capital surplus, or land, building, or equipment fund . . . ol 31 32 Retained earnings, endowment, accumulated income, or other funds. 851715.81 32 841078.90 853598.84 33 33 843284.54 34 887719.10: 34 868161.90 Form 990 (2012)

Pag	e	1	2

						<u> </u>
Part	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)	1	_			84.01
2	Total expenses (must equal Part IX, column (A), line 25)	2			876	98.31
3						
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			8535	98.84
5	Net unrealized gains (losses) on investments	5				0
6	Donated services and use of facilities	6				0
7	Investment expenses	7				0
8	Prior period adjustments	8				0
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10			8432	84.54
Part	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 Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," ex	olain	in			
	Schedule O.				_	,
2a	, , , , , , , , , , , , , , , , , , ,			2a │	✓	
	If "Yes," check a box below to indicate whether the financial statements for the year were comp	oiled	or	İ	-	
	reviewed on a separate basis, consolidated basis, or both:				- 1	
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b		✓_
	If "Yes," check a box below to indicate whether the financial statements for the year were audited	ed on	a	- 1		
	separate basis, consolidated basis, or both:				1	
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		L_			
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or		_			
	of the audit, review, or compilation of its financial statements and selection of an independent account			<u>:c</u>	✓	
	If the organization changed either its oversight process or selection process during the tax year, ex	plain	in			
	Schedule O.		.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	torth	i			
	the Single Audit Act and OMB Circular A-133?	• •		3a		✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under		1			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits		3b		
				Form	990	(2012)

SCHEDULE D (Form 990)

Supplemental Financial Statements

20

2012

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

lame o	f the organization		Employ	ver identification number
3.P.O.	Elks, Danbury Lodge No. 120, Inc.			06-0258842
		r Advised Funds or Other Similar Fu	inds or	
	organization answered "Yes" to Fo			·
		(a) Donor advised funds		(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year) .			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and	donor advisors in writing that the assets	held in	donor advised
	funds are the organization's property, subject			
6	Did the organization inform all grantees, dor	nors, and donor advisors in writing that gr	rant fund	
•	only for charitable purposes and not for the			
	conferring impermissible private benefit?			
Par	Conservation Easements. Comp			
1	Purpose(s) of conservation easements held it			
•	Preservation of land for public use (e.g.,		of an his	storically important land area
	Protection of natural habitat			ified historic structure
	Preservation of open space		0. 4 00.	
2	Complete lines 2a through 2d if the organiza	tion held a qualified conservation contribu	tion in th	e form of a conservation
_	easement on the last day of the tax year.			
	,			Held at the End of the Tax Year
а	Total number of conservation easements .			2a
b	Total acreage restricted by conservation eas			2b
c	Number of conservation easements on a cer			2c
d	Number of conservation easements includ			
_	historic structure listed in the National Regis			2d
3	Number of conservation easements modified			
	tax year ▶			, ,
4	Number of states where property subject to	conservation easement is located ▶		
5	Does the organization have a written pol		nspection	n, handling of
	violations, and enforcement of the conservat			
6	Staff and volunteer hours devoted to monito	ring, inspecting, and enforcing conservation	on easem	nents during the year
	>	,g,g,		,
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing conservation ea	sements	during the year
-	▶ \$			
8	Does each conservation easement reported	on line 2(d) above satisfy the requirements	s of secti	ion 170(h)(4)(B)
	(i) and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization re	ports conservation easements in its reven	ue and e	
_	balance sheet, and include, if applicable, the	•		•
	organization's accounting for conservation e	asements.		
Part	III Organizations Maintaining Colle	ctions of Art, Historical Treasures,	or Othe	r Similar Assets.
	Complete if the organization answ	ered "Yes" to Form 990, Part IV, line 8	3.	
1a	If the organization elected, as permitted und	der SFAS 116 (ASC 958), not to report in	its reven	ue statement and balance sheet
	works of art, historical treasures, or other			
	public service, provide, in Part XIII, the text of	of the footnote to its financial statements t	hat descr	ribes these items
b	If the organization elected, as permitted un	nder SFAS 116 (ASC 958), to report in it	ts revenu	e statement and balance shee
	works of art, historical treasures, or other	similar assets held for public exhibition,	educatio	n, or research in furtherance of
	public service, provide the following amount	s relating to these items:		
	(i) Revenues included in Form 990, Part VIII,	, line 1		• \$
	(ii) Assets included in Form 990, Part X			
2	If the organization received or held works			
	following amounts required to be reported u	nder SFAS 116 (ASC 958) relating to these	e items:	- '
а	Revenues included in Form 990, Part VIII, lin	e1		▶ \$
	Assets included in Form 990, Part X			s • •

Part										
3	Using the organization's acquisition, collection items (check all that apply):	accession, and of	ther recor	ds, chec	k any of th	e follow	ing that are a s	ignificant	t use	of its
а	☐ Public exhibition		d [☐ Loan	or exchang	je progr	ams			
b	☐ Scholarly research		e [Other	r					
C	☐ Preservation for future generations	;								
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part									
	XIII.									
5	During the year, did the organization	solicit or receive	donation	s of art,	historical tr	reasures	, or other simila	ar		
	assets to be sold to raise funds rather	than to be mainta	ained as p	part of the	e organızatı	on's col	lection?	□ Ye	es 🗌] No
Part	V Escrow and Custodial Arra	ngements. Co	mplete if	f the org	anization	answer	ed "Yes" to Fo	orm 990	, Part	ĪV,
	line 9, or reported an amoun									
1a	Is the organization an agent, trustee,							ot		
	ıncluded on Form 990, Part X?							□ Y	es 🗌	No
b	If "Yes," explain the arrangement in Pa	art XIII and compl	ete the fo	llowing ta	able:					
							Α	mount		
C	Beginning balance					1c				
d	Additions during the year					1d				
е	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amount] No
	If "Yes," explain the arrangement in P									<u>] </u>
Par	Endowment Funds. Compl									
		(a) Current year	(b) Prid	or year	(c) Two year	rs back	(d) Three years back	k (e) Fou	r years	back
1a	Beginning of year balance									
b	Contributions				ļ					
C	Net investment earnings, gains, and									
	losses									
d	Grants or scholarships				,					
е	Other expenditures for facilities and									
	programs							_		
f	Administrative expenses									
g	End of year balance		l		<u> </u>					
2	Provide the estimated percentage of t			e (line 1g	g, column (a	a)) held a	ıs:			
a	Board designated or quasi-endowmen		%							
b	Permanent endowment ►	%								
C	Temporarily restricted endowment ►		2001							
0-	The percentages in lines 2a, 2b, and 2	•			at ara bald	and ad	minustavad far th			
уa	Are there endowment funds not in the organization by:	e possession or t	ne organi.	zauon ini	at are neio	anu aui	ministered for ti	ie	Vaal	
	•							2-(1)	Yes	No
	(i) unrelated organizations							3a(i)		
L	(ii) related organizations							3a(ii) 3b		
b 4	Describe in Part XIII the intended uses							[30	ļ	
Pari										
ı aı	Description of property	(a) Cost or o			or other basis	(c) 4	Accumulated	(d) Boo	sk value	
	Description of property	(investr		1 ()	other)		preciation	(4) 500	on value	•
1a	Land		0	_	802864.31	3/5/A/I			8029	64.31
b	Buildings		0		28363.10		0	 ,		63.10
c	Leasehold improvements		0		2548.66		211.65			37.01
d	Equipment		0		30937.06		29778.99			58.07
e	Other		0	-	0		0			0
	Add lines 1a through 1e. (Column (d) r	nust equal Form 9		·					8347	22.49

Part VII	Investments - Other Securities	. See Form 990, Part X,	line 12.	
(a)	Description of security or category (including name of security)	(b) Book value	(c) Method of val Cost or end-of-year m	
(1) Financial				
	neld equity interests			
(3) Other				
(A)				_
(B)				
(C)				
(D)				
(E)				
(F) (G)	•			
(H)	•			
(I)				· · ··· · · · · · · · · · · · · · · ·
	b) must equal Form 990, Part X, col (B) line 12.)			
Part VIII	Investments—Program Related	N. See Form 990 Part X	line 13	· ··· ·· · · · · · · · · · · · · · · ·
	(a) Description of investment type	(b) Book value	(c) Method of va	luation
	ay besorption of investment type	(S) BOOK VALUE	Cost or end-of-year n	
(1)				· · · · · · · · · · · · · · · · · · ·
(2)				
(3)				
(4)				
(5)				
(6)				
(8)				
(9)				
(10)				-
	b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets. See Form 990, Pa	art X, line 15.		
		a) Description		(b) Book value
(1)	•			
(2)				
(3)				
(4)				
_(5)				
(6)				
(7)				
(8)				
<u>(9)</u>				
(10)	man (h) must a qual Farm 000. Part V a	al (D) line 15)		
Part X	mn (b) must equal Form 990, Part X, c		<u> </u>	
1.	Other Liabilities. See Form 990, (a) Description of liability	(b) Book value	T	
	income taxes	(b) Book value		
		550.00	· ·	
(3)	tional Foundation	552.00	{ · · · · · · · · · · · · · · · · · · ·	
(4)				
(5)				
(6)			1	
(7)			·	
(8)	•		<u> </u>	
(9)				
(10)			1 :	
(11)			<u>;</u>	
	b) must equal Form 990, Part X, col. (B) line 25)	552.00	1	
	C 740) Footnote in Part XIII, provide the			reports the organization's
	certain tax positions under FIN 48 (ASC 7			

	4
Page	4

Part		Return
1	Total revenue, gains, and other support per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
а	Net unrealized gains on investments	
b	Donated services and use of facilities	
С	Recoveries of prior year grants] [
d	Other (Describe in Part XIII.)	
е	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b	Other (Describe in Part XIII.)	
С	Add lines 4a and 4b	4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses p	er Return
1	Total expenses and losses per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	
а	Donated services and use of facilities	
þ	Prior year adjustments	1 9
C	Other losses	
d	Other (Describe in Part XIII.)	<u> </u>
е	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part iX, line 25, but not on line 1:	3
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	- Pag
b	Other (Describe in Part XIII.)	┥ -1
_	Add lines 4a and 4b	4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5
	XIII Supplemental Information	2-4 11/4 1 41 40
	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; I , line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part t	
	, line 4, Part X, line 2, Part XI, lines 20 and 4b, and Part XII, lines 20 and 4b. Also complete this part t lation.	o provide any additional
11 110111	auori.	
	1	

SCHEDULE G (Form 990 or 990-EZ)

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

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

<u>3.P.</u> O	Elks, Danbury lodge No. 120, Inc.						0258842
Par	- Fundraising Activities				vered "Yes" to F	orm 990, Part IV, I	ine 17.
1	Indicate whether the organization				owing activities. C	heck all that apply.	
а	☐ Mail solicitations	-			on of non-govern		
b							
c	☐ Phone solicitations		a [fundraising events	_	
d	☐ In-person solicitations		3 -				
2a	Did the organization have a wri	tten or oral agre	eement with	any individ	dual (including off	icers, directors, trus	ees
	or key employees listed in Form						
b	If "Yes," list the ten highest pai compensated at least \$5,000 b			draisers) p	ursuant to agreen	nents under which th	
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody o	ndraiser have or control of outlons?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			
1							
2							
3							
4							
						· · · · · · · · · · · · · · · · · · ·	1
5							
6							
7							
8							
9							
10		-				-	
				<u> </u>		,	
Tota		<u> </u>		<u>, , </u>	<u> </u>		J
3	List all states in which the organization or licensing.	anization is regi	stered or lic	censed to s	solicit contribution	is or has been notifi	ed it is exempt from

 -							
·				•			
							
-							
-							••••••••••

		gross receipts greater that		and gross income on i	rorm 990-EZ, lines 1 a	and 6b. List events with
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through
			(event type)	(event type)	(total number)	col (c))
Revenue	1	Gross receipts				
æ	2	Less. Contributions Gross income (line 1 minus line 2)				
	4	Cash prizes				
	5	Noncash prizes				
nses	6	Rent/facility costs				· · · · · · · · · · · · · · · · · · ·
Direct Expenses	7	Food and beverages .				
Direc	8	Entertainment				
	9	Other direct expenses .				
	10 11	Direct expense summary. Ad Net income summary. Comb		olumn (d) nd line 10		()
Pa	rt İli					reported more
nue		than \$15,000 on Form 99	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1	Gross revenue	92611.50	240.00	0	92851.50
ses	2	Cash prizes	85986.90	0	0	85986.90
Expenses	3	Noncash prizes	0	0	0	0
Direct	4	Rent/facility costs	6000.00	_ 0	0	6000.00
	5	Other direct expenses .	1041.99	0		1041.99
	6	Volunteer labor	✓ Yes 100 %☐ No	✓ Yes 100 % □ No	☐ Yes % ☐ No	
	7	Direct expense summary. Ad	d lines 2 through 5 in c	olumn (d)		93028.89
	8	Net gaming income summary	y. Combine line 1, colur	nn d, and line 7	<u> </u>	(177.39)
	a l	Enter the state(s) in which the orset to open the organization licensed to open f "No," explain.	perate gaming activities		?	
10		Vere any of the organization's g f "Yes," explain: Sealed Ticket	amıng licenses revoked permit voluntarily return			? . 🗹 Yes 🗌 No

Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more

onedui	ie G (FORM 990 01 990-EZ) 2012		F	age 3
11 12	Does the organization operate gaming activities with nonmembers?	у	Yes 🗸 Yes 🗸	
13	Indicate the percentage of gaming activity operated in:			
а	The organization's facility			0 %
b	An outside facility		100	<u>0 %</u>
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	t		
	Name ► John Tanner, Lodge Treasurer			
	Address > 42 Driftway Road, Danbury, CT 06810-7043			
15a	Does the organization have a contract with a third party from whom the organization receives gamin revenue?		Yes ☑	No
b c	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$			
	Name ►			
	Address ►			
16	Gaming manager information:			
	Name ► Celine Hanna (Bingo and member of Organization)			
	Gaming manager compensation ► \$ 0.00			
	Description of services provided ► Members in Charge per State Statutes			
	□ Director/officer □ Employee □ Independent contractor			
17 a b	Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming proceeds t retain the state gaming license?		Yes ☑	No
	spent in the organization's own exempt activities during the tax year ▶ \$			
Part	Supplemental Information. Complete this part to provide the explanations required by Part columns (III) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also capart to provide any additional information (see instructions).			
				
				
 -				

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

Open to Public Inspection
Employer identification number

B.P.O. Elks, Danbury Lodge No. 120, Inc.	06-0258842
Form 990, Part VI, Line 2 - Exalted Ruler Michael Jaber is the husband of Inner Guard Leslie Jaber, Ch	naplain John Wallace is the son of
Esteemed Leading Knight Randy Wallace. Trustee Jack Knapp is the husband of Esteemed Lecturing	Knight Lisa Knapp.
Form 990, Part VI, Line 6 - The organization has 201 members st the start of the fiscal year and 189 at	its end.
Form 990, Part VI, Line 7a & b - All currently paid members have the right to elect members of the gov	erning body at the annual election of
officers. Any currently paid member is entitled to participate in all Regular and Special meetings of the	ne Lodge and at such meetings can
ratify, change, modify or override the decisions of the governing body (composed of the Trustees and	Exalted Ruler, Esteemed Leading
Knight, Esteemed Loyal Knight and Esteemed Lecturing Knight) of the Lodge.	
Form 990, Part VI, Line 11b - No review was or will be conducted.	
Form 990, Part VI Section C Disclosure, Line 19 = No documents made available to the public.	
Form 990, Part IX, Line 24 E • Write off of prepaid expenses related to preliminary site development we	ork at property owned by the Lodge
totaled \$42644.35; Committee expenses of \$216.19, Dignitary goft of \$69.13 and Linceses of \$220.00.	
<u></u>	
······································	

