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ELKSJODGE 10/06/2013 3 49 PM Form Form

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.

Dep Inter	artment of the Treasur mal Revenue Service	benefit trust or private The organization may have to use a copy of this re		e reporting requir	ements.	Open to Public Inspection
A	For the 2012 ca	elendar year, or tax year beginning 04/01/12, and end				
В	Check if applicable	C Name of organization			D Employer	Identification number
	Address change	BPOE #105 TRENTON ELKS]	
	Name change	Doing Business As				7583748
$\overline{\sqcap}$	Initial return	Number and street (or P O box if mail is not delivered to street address)		Room/suite	E Telephone	
\exists	Terminated	42 DECOU AVE		ļ	609-	-771-0105
		City, town or post office, state, and ZIP code			İ	040.000
님	Amended return	TRENTON NJ 08628 F Name and address of principal officer			G Gross receipt	s\$ 249,829
	Application pending	Traine and address of principal officer		H(a) Is this a g	roup return for affil	lates? Yes X No
				H(b) Are all af	filiates included?	Yes No
	l			1	o," attach a list (se	ee instructions)
$\overline{}$	Tax-exempt status	501(c)(3) X 501(c) (8) ◄ (insert no) 4947(a)(1) c	or 527			
<u>J</u>		LKS105.ORG		H(c) Group ex	emption number	>
ĸ	Form of organization	Corporation Trust Association X Other ► FRATERN	IAL L	Year of formation 1	.888 м	State of legal domicile NJ
F	art I Su	mmary				
	1 Briefly des	cribe the organization's mission or most significant activities.				
9	See	Schedule O				
Jan						
Veri						
Activities & Governance	2 Check this		d of more than 25%	% of its net asset	1 1	0
රේ ග	3 Number o	f voting members of the governing body (Part VI, line 1a)	.			3 28
ij	5 Total num	f independent voting members of the governing body (Part VI, line 1b ber of individuals employed in calendar year 2012 (Part V, line 2a))			4
Ę	6 Total num	ber of volunteers (estimate if necessary)		200		
⋖		lated business revenue from Part VIII, column (C), line 12	7a	0		
		ted business taxable income from Form 990-T, line 34	• • • •		7b	0
			(2)	Prior Ye	ar	Current Year
<u>o</u>	8 Contributi	ons and grants (Part VIII, line 1h)			4,542	24,630
enu	9 Program	ervice revenue (Part VIII, line 2g)	0,167	45,569		
Revenue	10 Investmen	t income (Part VIII, column (A), lines 3, 4, and 7d)	,		9,227	20,116
_	11 Other rev	enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		6,068 0,004	26,306 116,621	
_		nue – add lines 8 through 11 (must equal Part VIII, column (A), line 1	2)	13	0,004	110,021
		d sımılar amounts paıd (Part IX, column (A), lines 1–3) aid to or for members (Part IX, column (A), line 4)		··· <u>-</u>		0
		other compensation, employee benefits (Part IX, column (A), lines 5–		1	5,298	12,008
ses		nal fundraising fees (Part IX, column (A), line 11e)	,		-/ -	0
Expense	b Total fund	raising expenses (Part IX, column (D), line 25)				
Ä	17 Other exp	enses (Part IX, column (A), lines 11a–11d, 11f–24e)	0	16	9,668	139,873
		enses. Add lines 13–17 (must equal Part IX, column (A), line 25)			4,966	151,881
	19 Revenue	ess expenses Subtract line 18 from line 12			4,962	-35,260
Net Assets or	-			Beginning of Cu		End of Year
Sset	20 Total asse	ts (Part X, line 16)			1,935	1,123,506
let A	21 Total liabi	ities (Part X, line 26)			5,563	12,394
		s or fund balances Subtract line 21 from line 20		1,14	6,372	1,111,112
		equity, I declare that I have examined this return, including accompanying sche	dules and statement	s and to the host o	of my knowledge	and holiof it is
6	be, correct, and co	nplete Declaration of preparer (other than officer) is based on all information of	of which preparer has	any knowledge	in my knowledge	, and belief, it is
C,	20	May A/W		-	1011	1/13
Sig	gn F s	gnature of officer			Date	7
Hệ	re L	GREG KROL	EXALT	ED RULE	<u> </u>	
		pe or print name and title				
	Print/Type	preparer's name Preparer's signature	/	Date	Check	X of PTIN
Paj	~	J. VICARI CPA YMEN J. Y	run -	10/06	/13 self-emplo	yed P00053082
-	parer Firm's nan				Firm's EIN	
USE		311 WHITEHORSE AVE STE A PESS HAMILTON, NJ 08610-1411		1		609-585-2500
<u>?</u>	Firm's add				Phone no	Yes X No
_		this return with the preparer shown above? (see instructions) tion Act Notice, see the separate instructions.				Form 990 (2012)
DAA		היים השני וזענוטם, שפט נווט שפוצמו מומנו שכנוטוום.			A	FOITH 200 (2012)

(Expenses \$

4d Other program services (Describe in Schedule O.)

4e Total program service expenses ▶

including grants of \$

41,557

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		X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		_ <u>X</u>
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> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)		- 1	
	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,	_		7.7
	Part III	5		X
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			x
_	"Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		x
_	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,"	8		x
	complete Schedule D, Part III	-		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
0	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
٠	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	- 1		
•	VII, VIII, IX, or X as applicable.			
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	x	
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		X
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		X
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		X
ө	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		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	11f		X
2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate	۱		v
_	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	4-		v
_	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	4.		x
_	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		
7	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		x
Ω	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	- '' -		
8	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		x
9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	ٺٽ		_ <u>-</u>
•	If "Yes," complete Schedule G, Part III	19		x
02	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

	_		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		_ <u>x</u> _
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	l		
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25	24a		X
b	- Side and Siger management of the state of	24b		
С	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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	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?	256		
	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
7	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	20		
27	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).			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		x
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
_	Schedule L, Part IV	28b		X
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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		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		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			٠,-
	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
Ь	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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	26		
	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,	37		x
20	Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	<u> </u>		
38	19? Note. All Form 990 filers are required to complete Schedule O	38		x
	13: NOTE: AIL OITH 330 HIGHS & FEQUITED TO COMPLETE OFFICERS OF			

Enter the amount of reserves the organization is required to maintain by the states in which

Did the organization receive any payments for indoor tanning services during the tax year?

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

the organization is licensed to issue qualified health plans

Enter the amount of reserves on hand

X

14a

14b

13b 13c

14a

b

Form	990 (2012) BPOE #105 TRENTON ELKS	23-7583748					age 6
	rt Vi Governance, Management, and Disclosure For each "Yes" re			oelow, a	nd for a "N		
	response to line 8a, 8b, or 10b below, describe the circumstances, pr	ocesses, or change	s in Sched	tule O. S	See instruc	tions	
	Check if Schedule O contains a response to any question in this Part	VI					_X_
Sec	tion 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	0			
	If there are material differences in voting rights among members of the governing body, o	r					
	if the governing body delegated broad authority to an executive committee or similar			İ			
	committee, explain in Schedule O						
b	Enter the number of voting members included in line 1a, above, who are independent		1b	328			
2	Did any officer, director, trustee, or key employee have a family relationship or a business	relationship with					
	any other officer, director, trustee, or key employee?				2		X
3	Did the organization delegate control over management duties customarily performed by						٠,,
	supervision of officers, directors, or trustees, or key employees to a management compar				3		X
4	Did the organization make any significant changes to its governing documents since the		:d?		4		X
5	Did the organization become aware during the year of a significant diversion of the organi	zation's assets?			_5_	<u> </u>	X
6	Did the organization have members or stockholders?				6		<u> </u>
7a	Did the organization have members, stockholders, or other persons who had the power to	elect or appoint			_	v	
	one or more members of the governing body?				7a	X	<u> </u>
ь	Are any governance decisions of the organization reserved to (or subject to approval by)	members,				x	
_	stockholders, or persons other than the governing body?			_ 11	7b		ļ
8	Did the organization contemporaneously document the meetings held or written actions u	ndertaken during the y	ear by the t	ollowing		x	Ī
а	The governing body?				8a	X	-
b	Each committee with authority to act on behalf of the governing body?				_8b_		\vdash
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who ca				9		x
	the organization's mailing address? If "Yes," provide the names and addresses in Schedution B. Policies (This Section B requests information about policies no		nternal P	ovonue			
Sec	tion B. Policies (This Section B requests information about policies no	t required by the i	illeinai ix	evenue	code.)	Yes	No
40-	Did the executation have level chapters, branches, or officiates?				10a	103	X
10a	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities	of such chanters			100		
b	affiliates, and branches to ensure their operations are consistent with the organization's e				10b		į
11-			na the form	,	11a		x
11a	Describe in Schedule O the process, if any, used by the organization to review this Form		ing the torm		1		
b 12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	330			12a	Ì	x
b	Were officers, directors, or trustees, and key employees required to disclose annually inte	erests that could give r	ise to conflu	cts?	12b		
C	Did the organization regularly and consistently monitor and enforce compliance with the p		100 10 0011111		12.5		
·	describe in Schedule O how this was done	100,			12c	l	İ
13	Did the organization have a written whistleblower policy?				13		X
14	Did the organization have a written document retention and destruction policy?				14		X
15	Did the process for determining compensation of the following persons include a review a	and approval by					T
	independent persons, comparability data, and contemporaneous substantiation of the del		?				I
а	The organization's CEO, Executive Director, or top management official				15a	L	x
b	Other officers or key employees of the organization				15b		X
-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)						T
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or simi	lar arrangement					1
	with a taxable entity during the year?				16a	<u> </u>	<u> </u>
ь	If "Yes," did the organization follow a written policy or procedure requiring the organization	n to evaluate its					
	participation in joint venture arrangements under applicable federal tax law, and take step						
	organization's exempt status with respect to such arrangements?				16b		
Sec	tion 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), 99	0, and 990-T (Section	501(c)(3)s	only)			
	available for public inspection. Indicate how you made these available. Check all that app						
	Own website Another's website X Upon request Other (explain i						
19	Describe in Schedule O whether (and if so, how), the organization made its governing do	cuments, conflict of in	terest policy				
	and financial statements available to the public during the tax year.						
20	State the name, physical address, and telephone number of the person who possesses t	he books and records	of the				
		DECOU AVE					
יידי	RENTON	NJ C	8628		609-77	7 <u>1-0</u>	<u> 105</u>

Section A.

Form 990 (2012	2) BPOE #105 TRENTON_ELKS <u>-23-7583748</u>	Page
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and	
•	Independent Contractors	_
	Check if Schedule O contains a response to any question in this Part VII	

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

(A) Name and Title	(B) Average hours per week (list any	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the	
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2 1099-MISC)	organization and related organizations	
(1) KAREN MANFREE	4 = 00										
	15.00							2 250		0	
SECRETARY	0.00			X		┈┤		3,350	0	0	
(2) JAMES CASTELIZE	15 00										
mpe à cupen	15.00 0.00			x				1,832	o	0	
TREASURER (3) VAR . OFFICERS/TRU	STEES-PE	R	ΑT		H 1	LIS	T	1,052			
(5) VAR. OFF ICERS/ IRC	15.00				•		•				
	0.00			x	l			o	o	0	
(4) MATTHEW SCHULTE	<u> </u>										
•	15.00	ł									
TREASURER	0.00	l					X	465	0	0	
(5)											
(6)									-		
(7)											
(8)											
(9)											
(10)											
(11)				_			_				

<u>Par</u>	1 VII Section A. Officers	, Directors, Trus	stee	s, K	ey Ei	mple	yee:	s, ar	nd Highest Compensated	Employees_(continued)				
	(A) Name and title	(B) Average hours per week (list any	Average Position hours per (do not check more than one week box, unless person is both an (list any officer and a director/trustee)				s both	an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations		(F) Estima amoun othe impens	ted t of r sation	
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	4	from ti irganiza and rela ganiza	ation ated	
(12)							-						_	
(13)					_	-								_
(14)							_							_
(15)				-							_			
(16)				_										
(17)					_		_							_
(18)														
(19)														
1b	Sub-total	<u> </u>	L	1	L	<u> </u>			5,647					
	Total from continuation shee	ets to Part VII, S	ectio	on A					5,647		<u> </u>		_	
2	Total (add lines 1b and 1c) Total number of individuals (inc				ose	liste	d abo	ve)		00,000 in	<u> </u>			
	reportable compensation from t	the organization I	<u> </u>	0_									Yes	No
	Did the organization list any for								ee, or highest compensated	1		3	x	
4	employee on line 1a? If "Yes," of For any individual listed on line organization and related organi	1a, is the sum of	rep	ortat	ole co	ompe	ensat	ion a	and other compensation from the state of the	m the		3	A	
	ındivıdual Did any person listed on line 1a									leubivih	-	4		X
	for services rendered to the org	ganization? If "Ye										5		Х
1	on B. Independent Contractor Complete this table for your five compensation from the organiz	e highest comper	nsate	ed in	depe	nder	nt cor	ntrac	ctors that received more that	n \$100,000 of				
		(A) business address	iipei	isau	<u> </u>	ı use	Calc	lidai		(B)		Co	(C) mpensat	tion
									· ·	-				
												_		
														
								L						
DAA	Total number of independent or received more than \$100,000 or	ontractors (includ of compensation f	ing b	the o	ot lin orgar	nited nizat	to th ion ▶	ose	listed above) who	0			" 99(0 (2011
UAA												ror		- 12012

Form 990 (2012) BPOE #105 TRENTON ELKS _23-7583748 -- -- -Statement of Revenue Check if Schedule O contains a response to any question in this Part VIII. (B) Related or (C) (D) Revenue (A) Unrelated Total revenue excluded from tax under sections exempt function business revenue 512, 513, or 514 revenue Gifts, Grants ilar Amounts 1a Federated campaigns 1a 21,600 **b** Membership dues 1b 1c c Fundraising events 1d d Related organizations Contributions, and Other Simi e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 3,030 1f g Noncash contributions included in lines 1a-1f 24,630 h Total. Add lines 1a-1f Program Service Revenue Busn. Code 20,096 20,096 SOCIAL COMMITTEE 2a 11,375 11,375 b HOUSE COMMITTEE 6,153 6,153 CONVENTION COMMITTEE 3,973 3,973 CIVIC COMMITTEE 2,312 2,312 AMERICANISM COMMITTEE 1,660 1,660 f All other program service revenue 45,569 g Total. Add lines 2a-2f Investment income (including dividends, interest, 23,276 23,276 and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (ı) Real (II) Personal 6a Gross rents b Less rental exps c Rental inc or (loss) d Net rental income or (loss) Gross amount from (II) Other sales of assets 107,413 other than inventory **b** Less cost or other 110,573 basis & sales exps -3,160 c Gain or (loss) -3,160 -3,160 d Net gain or (loss) 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c). See Part IV, line 18 b Less. direct expenses c Net income or (loss) from fundraising events 9a Gross income from gaming activities. 3,713 See Part IV, line 19 2,368 b Less. direct expenses 1,345 1,345 c Net income or (loss) from gaming activities ▶ 10a Gross sales of inventory, less 32,878 returns and allowances 267 20, b Less cost of goods sold 12,611 12,611 c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn. Code 12,350 12,350 11a INSUR. PROCEEDS-STORM DAMAGE b C All other revenue

12,350

68,715

116,621

▶

0

Total, Add lines 11a-11d

Total revenue. See instructions

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 (A) Total expenses (B) Program service (D) Do not include amounts reported on lines 6b, Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S See Part IV, line 22 3 Grants and other assistance to governments, organizations, and individuals outside the US See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 5,182 5,182 trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and 465 465 persons described in section 4958(c)(3)(B) 4,562 4,562 Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 1,799 1,799 Payroll taxes Fees for services (non-employees) Management а Legal b 3,200 3,200 c Accounting d Lobbying Professional fundraising services. See Part IV, line 17 750 750 Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 12 Advertising and promotion 9,741 9,741 Office expenses 14 Information technology 15 Royalties 47,589 51,867 4,278 Occupancy 16 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 2,519 2,519 Conferences, conventions, and meetings 19 20 Interest 5,445 5,445 21 Payments to affiliates 16,824 308 16,516 Depreciation, depletion, and amortization 22 9,551 9,551 23 Insurance 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) 36,921 36,921 COMMITTEE EXPENSES 1.611 1,611 ALL OTHER EXPENSES 797 797 SUPPLIES c 50 597 647 LICENSES & PERMITS All other expenses 41,557 151,881 110,324 25 Total functional expenses. Add lines 1 through 24e 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)

Balance Sheet Part X Check if Schedule O contains a response to any question in this Part X (B) (A) End of year Beginning of year 58,374 39,698 Cash-non-interest bearing 215,925 84,924 2 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L Notes and loans receivable, net 8,209 4,333 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or 995,932 other basis. Complete Part VI of Schedule D 10a 550,496 468,236 445,436 10b b Less. accumulated depreciation 418,114 542,192 11 Investments—publicly traded securities 12 12 Investments—other securities. See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 14 14 Intangible assets 15 Other assets See Part IV, line 11 15 1,161,935 1,123,506 Total assets. Add lines 1 through 15 (must equal line 34) 16 16 803 17 17 Accounts payable and accrued expenses 18 18 Grants payable 14,760 12,394 19 19 Deferred revenue 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 25 of Schedule D 15,563 12,394 Total liabilities. Add lines 17 through 25 X and Organizations that follow SFAS 117 (ASC 958), check here ▶ complete lines 27 through 29, and lines 33 and 34. or Fund Balances 393,572 <u>332,753</u> Unrestricted net assets 752,800 778,359 28 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete lines 30 through 34. Net Assets 30 Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds 32 1,146,372 1,111,112 33 Total net assets or fund balances 33 1,123,506 1,161,935 Total liabilities and net assets/fund balances

	990 (2012)_ BPOE_#105_TRENTON_ELKS23-7583748	<u> </u>	 	- Pa	ge 12
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)	1_			621
2	Total expenses (must equal Part IX, column (A), line 25)	2			881
3	Revenue less expenses. Subtract line 2 from line 1	3			260
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	 <u>1,1</u>	46,	<u> 372</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6	 		
7	Investment expenses	7			
8	Prior period adjustments	8	 		
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	1,1	11,	<u>112</u>
Pa	rt XII Financial Statements and Reporting				_
	Check if Schedule O contains a response to any question in this Part XII				Ш.
				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.				
2a	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.				
	X Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		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 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 audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3ь	i	

Form 990 (2012)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial-Statements

➤ 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.

2012
Open to Public Inspection

Name of the organization

Employer identification number

ъ.	POE #105 TRENTON ELKS		23-75	883748
	If I Organizations Maintaining Donor Advised Fun	ds or Other Similar Funds or Ac		
1.0	organization answered "Yes" to Form 990, Part IV		Journa.	Jonipioto II dio
	3.ga.,,2410., 41.0	(a) Donor advised funds	(b)	Funds and other accounts
1	Total number at end of year	(4)		
2	Aggregate contributions to (during year)			
3	Aggregate contributions to (during year) Aggregate grants from (during year)			
3 4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in writing that the	e assets held in donor advised		
-	funds are the organization's property, subject to the organization's exclusi			Yes No
6	Did the organization inform all grantees, donors, and donor advisors in wr			_ ····
-	only for chantable purposes and not for the benefit of the donor or donor a			
	conferring impermissible private benefit?			Yes No
Pa	rt II Conservation Easements. Complete if the organ	ization answered "Yes" to Form 99	90, Part	IV, line 7.
1	Purpose(s) of conservation easements held by the organization (check all			
	Preservation of land for public use (e.g., recreation or education)	Preservation of an historically impo	rtant land	area
	Protection of natural habitat	Preservation of a certified historic s		
	Preservation of open space	_		
2	Complete lines 2a through 2d if the organization held a qualified conserva	tion contribution in the form of a conservation	on	
	easement on the last day of the tax year.			
				leld at the End of the Tax Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
С	Number of conservation easements on a certified historic structure include	ed ın (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06	, and not on a		
	histonc structure listed in the National Register		2d	
3	Number of conservation easements modified, transferred, released, extin	guished, or terminated by the organization o	during the	
	tax year ▶			
4	Number of states where property subject to conservation easement is loc	ated ▶		
5	Does the organization have a written policy regarding the periodic monitor	ring, inspection, handling of		
	violations, and enforcement of the conservation easements it holds?			Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing	g conservation easements during the year		
	>			
7	Amount of expenses incurred in monitoring, inspecting, and enforcing cor	servation easements during the year		
	▶ \$			
8	Does each conservation easement reported on line 2(d) above satisfy the	requirements of section 170(h)(4)(B)		п., п.,
	(i) and section 170(h)(4)(B)(॥)?			Yes No
9	In Part XIII, describe how the organization reports conservation easemen			
	balance sheet, and include, if applicable, the text of the footnote to the organization accounts.	ganization's financial statements that descri	des the	
-	organization's accounting for conservation easements.	Historical Treasures or Other Si	milas A	esats
***	Organizations Maintaining Collections of Art, Complete if the organization answered "Yes" to Fe	orm 990. Part IV. line 8	miliai A	33 5 (3,
_			oce shoot	
1 a	If the organization elected, as permitted under SFAS 116 (ASC 958), not works of art, historical treasures, or other similar assets held for public ex	hibition, education, or research in furthers	ce of	
	public service, provide, in Part XIII, the text of the footnote to its financial		UG UI	
L	If the organization elected, as permitted under SFAS 116 (ASC 958), to re		sheet	
D	works of art, historical treasures, or other similar assets held for public ex			
		inducti, education, or research in futile all	UG UI	
	public service, provide the following amounts relating to these items:			\$
	(i) Revenues included in Form 990, Part VIII, line 1			\$ \$
_	(ii) Assets included in Form 990, Part X	her similar assets for financial dain provide	the .	Ψ
2	If the organization received or held works of art, historical treasures, or of		i ii le	
_	following amounts required to be reported under SFAS 116 (ASC 958) re	idung to these items		\$
a	Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X		_	\$
	esseis incored in Form 530. Fall A			

Sche	dule-D-(Form-990) 2012 BPOE #1-05	TRENTON—ELI	Ks		23 - 75 <u>83</u>	7 <u>48— —</u>	
	rt III Organizations Maintaining (easures, o	r Other Simi	lar Assets	(continued)
3	Using the organization's acquisition, accession, collection items (check all that apply):	and other records, che	eck any of the follow	ing that are a	significant use c	f its	
а	Public exhibition	d Loa	an or exchange prog	ırams			
b	Scholarly research	e 🗌 Oth	ег				
C	Preservation for future generations						
4	Provide a description of the organization's collect	tions and explain how	they further the org	anızation's ex	empt purpose in	Part	
	XIII.						
5	During the year, did the organization solicit or re assets to be sold to raise funds rather than to be				lar		Yes No
Pa	rt IV Escrow and Custodial Arran				wered "Yes"	to Form 99	0, Part IV,
	line 9, or reported an amount						
1a	Is the organization an agent, trustee, custodian			ther assets no	ot		
	included on Form 990, Part X?	-					Yes No
b	If "Yes," explain the arrangement in Part XIII and	complete the following	g table				
							Amount
С	Beginning balance					1c	
d	Additions during the year					1d	
9	Distributions during the year					1e	
f	Ending balance					1f	
	Did the organization include an amount on Form						Yes No
	If "Yes," explain the arrangement in Part XIII. Ch					/ l'a a 40	
Pa	rt V Endowment Funds. Comple						(-) F bt-
	_ _	(a) Current year	(b) Pnor year	(c) Two year	s back (d)	Three years back	(e) Four years back
	Beginning of year balance						
b	Contributions						
С	Net investment earnings, gains, and losses						
d	Grants or scholarships						
8	Other expenditures for facilities and				-		
	programs						
f	Administrative expenses						
g	End of year balance			l			
2	Provide the estimated percentage of the current		e 1g, column (a)) he	ld as:			
а	Board designated or quasi-endowment ▶	%					
	Permanent endowment ▶ %	04					
С	Temporarily restricted endowment ►	% agual 100%					
20	The percentages in lines 2a, 2b, and 2c should Are there endowment funds not in the possession		that are held and ad	ministered for	the		
Ja		on or the organization t	inal are nelu anu au	iiiiiisterea ioi	ano.		Yes No
	organization by. (i) unrelated organizations						3a(i)
	(ii) related organizations						3a(ii)
b	If "Yes" to 3a(II), are the related organizations lis	sted as required on Scl	hedule R?				3b
4	Describe in Part XIII the intended uses of the or						
Pa	art VI Land, Buildings, and Equip			10.			
	Description of property	(a) Cost or other basis			(c) Accumul	ated	(d) Book value
		(investment)	(oth		depreciati	on	
1a	Land			57,919			257,919
b	Buildings		6	50,914	46	5,710	185,204
С	Leasehold improvements						
d	Equipment			87,099	8	4,786	2,313
	Other	<u> </u>		l			445 400
Tota	I. Add lines 1a through 1e. (Column (d) must equ	al Form 990, Part X, co	olumn (B), l <u>ine 10(c</u>).)			445,436

Part VII	Investments—Other Securities. See Form 99	90, Part X, line 12.	
	(a) Description of security or category	(b) Book value	(c) Method of valuation
•	(including name of security)		Cost or end-of-year market value
(1) Financial d	erivatives		
	d equity interests		
(3) Other			
(A)			
(B)	·		
(c)			
(D)			
(E)			
(F)			
(G)			
(H)			
(1)			
Total. (Column	(b) must equal Form 990, Part X, col. (B) line 12.)	>	
Part VIII	Investments—Program Related. See Form 9	90, Part X, line 13.	
	(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
	(b) must equal Form 990, Part X, col. (B) line 13.)	>	
Part IX	Other Assets. See Form 990, Part X, line 15.	·	
	(a) Description	<u> </u>	(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)		, <u></u>	
(10)			
	(b) must equal Form 990, Part X, col. (B) line 15)		>
Part X	Other Liabilities. See Form 990, Part X, line 2	25.	
1.	(a) Description of liability	(b) Book value	
	ncome taxes		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			7
(10)		<u> </u>	7
(11)			1
	n (b) must equal Form 990, Part X, col (B) line 25.)	>	1
	C 740) Footnote. In Part XIII, provide the text of the footnote t		statements that reports the organization's

Sche	dule D (Form 990) 2012 BPOE #105 TRENTON ELKS	23-758	33 <u>748—— — </u>	
Pa	rt XI Reconciliation of Revenue per Audited Financial Staten	nents With Revenue pe	r 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	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
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.)	4b		
C	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	
Pa	Reconciliation of Expenses per Audited Financial State	ments With Expenses	per Return	
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities			
b	Prior year adjustments	2b		
C	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
0	Add lines 2a through 2d		2е	
3	Subtract line 2e from line 1	()	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b		4c	
5	Total expenses, Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	

Part XIII Supplemental Information

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

Schedule D (Form 990) 2012 BPOE #105 TRENTON ELKS

-23-7583748

Page 5

Part XIII Supplemental Information (continued)

SCHEDULE J

(Form 990) `

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" to Form 990,

Part IV, line 23. ► See separate instructions.

► Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

BPOE #105 TRENTON ELKS

Employer identification number 23-7583748

Pž	rt I Questions Regarding Compensation					
	- 		Yes	No		
1a	1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form					
	990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items					
	First-class or charter travel Housing allowance or residence for personal use					
	Travel for companions Payments for business use of personal residence					
	Tax indemnification and gross-up payments Health or social club dues or initiation fees					
	Discretionary spending account Personal services (e g , maid, chauffeur, chef)					
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment					
_	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to	ĺ	1			
	explain	1b				
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers,					
	directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2				
_	1. J'- to the bit					
3	Indicate which, if any, of the following the filing organization uses to establish the compensation of the					
	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a					
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III.					
	Compensation committee Written employment contract					
	Independent compensation consultant Compensation survey or study					
	Form 990 of other organizations Approval by the board or compensation committee					
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing					
	organization or a related organization					
а	Receive a severance payment or change-of-control payment?	4a		X		
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X		
c						
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III					
	O I STORY MAN I FRAM MAN I SIN					
_	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5–9.					
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any					
_	compensation contingent on the revenues of	5 0				
	The organization?	5a 5b		_		
D	Any related organization?	30				
e	If "Yes" to line 5a or 5b, describe in Part III.					
O	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any					
_	compensation contingent on the net earnings of.	63		İ		
	The organization? Any related organization?	6a 6b	-	\vdash		
D	Any related organization?	OD				
7	If "Yes" to line 6a or 6b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			İ		
7		7				
ρ	payments not described in lines 5 and 6? If "Yes," describe in Part III			$\vdash \vdash$		
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe					
	in Part III	8		1		
α	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			\vdash		
9	Regulations section 53 4958-6(c)?	9				

Page 2 Schedule J (Form 990) 2012 (F) Compensation reported as deferred in pnor Form 990 Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed Note. The sum of columns (B)(I)—(ii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, Inne 1a, applicable column (D) and (E) amounts for that individual 465 (E) Total of columns (B)(t)→(D) For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the 00 (D) Nontaxable benefits 00 (C) Retirement and other deferred compensation 23-7583748 (B) Breakdown of W-2 and/or 1099-MISC compensation (III) Other reportable compensation 00 (ii) Bonus & incentive compensation instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII. (i) Base compensation BPOE #105 TRENTON ELKS 888 εΞ € € (A) Name and Title Schedule J (Form 990) 2012 MATTHEW SCHULTE 1 TREASURER Part # 뛴 위 힏 힏

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Page 3

Schedule J (Form 990) 2012 BPOE #105 TRENTON ELKS Part III Supplemental Information

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

DAA

Schedule J (Form 990) 2012

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2012 Open to Public Inspection

OMB No 1545-0047

Name of the organization

BPOE #105 TRENTON ELKS

Employer identification number 23-7583748

Form 990 - Organization's Mission or Most Significant Activities

THE TRENTON LODGE #105 IS A NONPROFIT ORGANIZATION OPERATED INDEPENDENTLY

BUT CHARTERED BY THE GRAND LODGE BPOE. THE LODGE IS GOVERNED BY ELECTED

OFFICERS AND A BOARD OF TRUSTEES AND OPERATES UNDER THE AUSPICES OF THE

GRAND LODGE'S CONSTITUTION AND STATUTES. THE LODGE HAS VARIOUS OPERATING

COMMITTEES WHICH RAISE FUNDS FROM DONATIONS AND SPECIAL EVENTS TO BE USED

FOR THEIR SPECIFIC ACTIVITIES. THE CURRENT ACTIVE COMMITTEES ARE BUILDING

FUND; GRILL ROOM; CONVENTION/MARCHING CLUB; SPECIAL CHILDREN; YOUTH

ACTIVITIES, BLOOD BANK; AMERICANISM; NATIONAL SERVICE; DRUG AWARENESS;

SOCIAL & WELFARE; CHARITIES; BLIND.

Form 990, Part VI, Line 7a - Election of Members and Their Rights
YES

Form 990, Part VI, Line 7b - Decisions Subject to Approval of Members YES

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 No review was or will be conducted.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public

Form 4562

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

► Attach to your tax return.

<u>179</u>

(99)

► See separate instructions.

Part I	Name							fying number -7583748		
Part Election To Expense Certain Property Under Section 179 Note: if you have any listed property, complete Part V before you complete Part I.			ion						_*	
Note: If you have any listed property, complete Part V before you complete Part I. Maximum amount (see instructions) 1				erty Under Sect	ion 179					
1 Threshold cost of section 179 property placed in service (see instructions) 2 Threshold cost of section 179 property placed in service (see instructions) 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 4 Reduction in limitation Subfract line 3 from line 2. Il zaro or less, enter -0- 5 Dollar limitation for tax year, Substantine 4 from line 1 Il zero or less, enter -0- 6 (a) Description of property (b) Contitueness use orth) 7 Listed property Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 Tentative deduction. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 Subsiness income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 Section 7 desalvewed deduction from line 13 or low 2013 Add lines 3 and 10, lute do not enter more than line 11 12 Section 7 separate device of desalved deduction to 2013 Add lines 3 and 10, lute on the net more than line 11 13 Carryover of desalvewed deduction to 2013 Add lines 3 and 10, lutes line 12 14 Special Depreciation Add lines 3 and 10, lute on the net more than line 11 15 Special Depreciation Add lines 3 and 10, lute than the separate line 11 16 Special Depreciation Add lines 3 and 10, lutes line 12 17 In the special Depreciation Add lines 3 and 10, lutes line 12 18 Special Depreciation Add lines 3 and 10, lutes line 12 19 Special Depreciation Add lines 3 and 10, lutes line 12 10 Carryover of desalved deduction to 2013 Add lines 3 and 10, lutes line 12 11 Special Depreciation Add lines 3 and 10, lutes line 12 12 Carryover of desalved deduction to 2013 Add lines 3 and 10, lutes line 12 13 Carryover of desalved deduction to 2013 Add lines 3 and 10, lutes line 12 14 Special Depreciation Add lines 3 and 10, lutes line 12 15 Special Depreciation Add lines 3 and 10, lutes line 12 16 Other depreciation (line) Add lines 3 and 10, lutes line 12 17 Carryover of the Add lines 12 18 Listed	, ,	•		•		omple	ete Part I.			
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h Residential rental property 27.5 yrs. MM S/L i Nonresidential real 39 yrs MM S/L Section C—Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System 20a Class life S/L b 12-year 12 yrs. S/L c 40-year 40 yrs. MM S/L Part IV Summary (See instructions.) 21 Listed property Enter amount from line 28	f	20-year property								
property i Nonresidential real property Section C—Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System 20a Class life b 12-year c 40-year Part IV Summary (See instructions.) 21 Listed property Enter amount from line 28	g	25-year property			25 yrs.			S	'L_	
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21 Listed property Enter amount from line 28 21			tructions \		j 40 yrs.	L	IVIIVI	5/	L	
							·		74	
22 Total, Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here				nee 10 and 20 in colum	nn (a) and line 21	Enter	r here		41	

portion of the basis attributable to section 263A costs

and on the appropriate lines of your return. Partnerships and S corporations—see instructions

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

16,824

23

Trenton Lodge Na 105, BPOF

BENEVOLENT AND PROTECTIVE ORDER OF ELKS

Established 1888

42 De Cou Avenue West Trenton, NJ 08628 Phone (609) 771-0105

Trenton Elks Lodge # 105 Officers/Trustees Fiscal Year 2012-2013

EXALTED RULER	TOM PETRO	609-394-1414
LEADING KNIGHT	GREG KROL	609-882-5000
LOYAL KNIGHT	LYNN VAN OST	609-538-8941
LECTURING KNIGHT	VACANT	
SECRETARY	KAREN MANFRE	609-538-8941
TREASURER	JIM CASTELIZE	609-638-4959
ESQUIRE	VACANT	
CHAPLIN	REX CARPENTER	609-883-0557
INNER GUARD	NANCY JAKUBOWSKI	609-882-0482
TILER	SEAN SMITHERS	609-571-1186
JUSTICE	VACANT	
1 YEAR TRUSTEE	DOMINICK VARRA	609-883-7858
2 YEAR TRUSTEE	LOU EGGERT,PER	609-577-0480
3 YEAR TRUSTEE	ROBERT HABEL	609-882-5040