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Form 990-EZ

Short 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)

Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions).

All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form.

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

Open to Public Inspection

OMB No. 1545-1150

2012

Department of the Treasury Internal Revenue Service

A F	or th	ne 2	2012 calendar	year, or tax year beginningAPRIL 01 , 2012, and en	ding MA	ARCH 3	1	,20 13
	Check			C Name of organization				fication number
\Box	ddres			GILLETTE ELKS LODGE 2825		, ,		47-0864008
\prod_{i}	iame d	chan	100	Number & street (or P.O. box, if mail is not delivered to street addr.)	Room/	E Telepho	ne numb	
\prod_{i}	nitial r	etur	'n					
\prod_{7}	ermin	atec	,	PO BOX 1358	1 1		(3	07)682-0333
\prod_{A}	mend	ed r	eturn	City or town, state or country, and ZIP + 4		F Group E	xemptio	n
Πâ	pplica	ation	1	Gillette WY 82717-1358		Numbe	er ▶ 1	156
			ng Method:	X Cash Accrual Other (specify) ▶	H Che	ck ▶ X i	the orga	nization is not
			e:▶ <u>N/A</u>		re	quired to a	ttach Sch	nedule B
<u>j 1</u>	Гах-е	xer	mpt status (ch	eck only one) X 501(c)(3) 501(c)() (insert no.) 4947(a)(1) or 5	27 (F	orm 990, 9	90-EZ, o	r 990-PF)
K	Check	⟨▶	X if the organ	ization is not a section 509(a)(3) supporting organization or a section 52	7 organiza	ation and	its gross	receipts are normally
r	not m	ore	than \$50,000.	A Form 990-EZ or Form 990 return is not required though Form 990-N	(e-postca	ard) may be	e required	d (see instructions).
E	But if '	the	organization c	hooses to file a return, be sure to file a complete return.				
				b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or				ll,
				ow) are \$500,000 or more, file Form 990 instead of Form 990-EZ				46,968
P	art d			Expenses, and Changes in Net Assets or Fund Balan				
				organization used Schedule O to respond to any question in this Part I				
	'	1		, gifts, grants, and similar amounts received			1	7,274
	:	2		ice revenue including government fees and contracts			2	
	;	3		dues and assessments · · · · · · · · · · · · · · · · · · ·			3	12,836
	4	4		come · · · · · · · · · · · · · · · · · · ·			4	127
	;	5 a		t from sale of assets other than inventory · · · · · · 5a				
	-	þ	Less: cost or					
R	ı	C	Gain or (loss)		5c -•æ≈ <i>∞</i>			
'nν	1	6	Gaming and t					
SEXUE VE	j	8		from gaming (attach Schedule G if greater than	# S			
֝׆֝֟֡֝	1			6a				
.¥	J	Ь			contributio	ns		
	- }			ing events reported on line 1) (attach Schedule G if the		10 000		
として	ļ		-	gross income and contributions exceeds \$15,000)		10,933	ADSERTED I	
				xpenses from gaming and fundraising events		670		
긡	.	d		r (lòss) from gaming and fundraising events (add lines 6a and 6b and si	ubtract		-5342	10.000
CANNED	1.			1 1			6d	10,263
Z	1			f inventory, less returns and allowances		13,192	1.20	
5	j			goods sold		2,965	DW 200	10,227
Ŝ	١.		•	r (loss) from sales of inventory (Subtract line 7b from line 7a)		• • • • • •	7c 8	2,606
•	8			e (describe in Schedule O)			9	43,333
	10	-	Create and si	milar amounts paid (list in Schedule 0)	1		10	8,115
	10			to or for members	1		11	
E	11		Salarias etha	to or for members	}		12	
EXPERSES	12		Professional fo		1		13	345
N	14				1		14	27,000
S	15		-	cations, postage, and shipping OGDEN, UT	1		15	
Ē	16			es (describe in Schedule O)	3		16	43,355
	17		•	es. Add lines 10 through 16		▶	17	78,815
	18	_		ficit) for the year (Subtract line 17 from line 9)			18	-35,482
A	19			fund balances at beginning of year (from line 27, column (A)) (must agree			,	
ASSET'S	''			igure reported on prior year's return) · · · · · · · · · · · · · · · · · · ·	J	19	35,188	
ŤŤ	20			s in net assets or fund balances (explain in Schedule O) · · · · · · · · · · · · · · · · · ·	20	36,946		
Ś	21			fund balances at end of year. Combine lines 18 through 20 · · · · · · ·			21	36,652

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2012)

orm 990-EZ (2012) GILLETTE E	LKS LODGE 2825	47-086				
Part II. Balance Sheets (see the inst	ructions for Part II)					,
Check if the organization used Sc	nedule O to respond to any o	question in this Pa	art II	· · · · · ·		
•			A) Beginning of yea			(B) End of year
Cash, savings, and investments			47	,324		54,768
Land and buildings					23	0
Other assets (describe in Schedule O).				,101		0
Total assets				,425		54,768
Total liabilities (describe in Schedule C				,237		18,116
Net assets or fund balances (line 27 or		·		,188	27	36,652
Check if the organization used Sometis the organization's primary exempt or a secribe the organization's program service a measured by expenses. In a clear and concernsons benefited, and other relevant informations.	hedule 0 to respond to any cose? See attachm complishments for each of it	question in this P nent #1 s three largest pro	art III	🛭	5 0 4	Expenses Required for section 601(c)(3) and 501(c)(4) organizations and section 1947(a)(1) trusts; optional or others.)
See attachment #2	of to cash program asc.			_		<u> </u>
			-		• •	
					` ;	1 T 1 Land 18 1
(Grants \$ 4,460) If this	amount includes foreign gra	nts, check here		: TT	28a	670
		 		·····		Part of Participation of the A
			<u> </u>	_	~::	10 7 6 7 4 11 11 11 11 11 11 11 11 11 11 11 11 1
						'· ፣· · · ·
(Grants \$) If this	amount includes foreign gra	nts, check here			29a	., .
	<u></u>					
(Grants \$) If this	amount includes foreign gra	nte check here		\Box	30a	
					JUBI	
Other program services (describe in Scher		its, check here			500	
Other program services (describe in Sched (Grants \$) If this	ule O)		•	. П		
(Grants \$) If this	ule O) amount includes foreign gra	nts, check here .	·····•		31a	670
(Grants \$) If this Total program service expenses (add line)	ule O) amount includes foreign gra es 28a through 31a)	nts, check here			31a 32	
(Grants \$) If this Total program service expenses (add line) Anti-V. List of Officers, Directors, Trus	ule O) amount includes foreign gra es 28a through 31a) tees, and Key Employees I	ist each one ever	n if not compensated	d. (see 1	31a 32	
(Grants \$) If this Total program service expenses (add line)	ule O) amount includes foreign gra es 28a through 31a) tees, and Key Employees I thedule O to respond to any (b) Average hours per week	ist each one ever	n if not compensated	benefits,	31a 32 the inc	
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Pa	TV Other Information (Note the Schedule A and personal benefit contract statement	requirements in the			
	instructions for Part V) Check if the organization used Schedule O to respond to any c	uestion in this Part V			
	,			Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Ye	es," provide a			
	detailed description of each activity in Schedule O		33	<u> </u>	X
34	Were any significant changes made to the organizing or governing documents? If "Yes," attack	a conformed			
	copy of the amended documents if they reflect a change to the organization's name. Otherwise	e, explain the		ł	1
	change on Schedule O (see instructions)		34		X
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year	from business			
	activities (such as those reported on lines 2, 6a, and 7a, among others)?		35a		X
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an e	xplanation in Schedule O	35b		X
C	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section	6033(e) notice,			
	reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III		35c	ļ	X
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of	net assets .			
	during the year? If "Yes," complete applicable parts of Schedule N		36		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions	37a	Yar V	1.6	
b	Did the organization file Form 1120-POL for this year?		37b		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key en	nployee or were	2.7	- A.	77.
	any such loans made in a prior year and still outstanding at the end of the tax year covered by	this return?	38a		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved	38b		1	25
39	Section 501(c)(7) organizations. Enter:	· · · · · · · · · · · · · · · · · · ·			
a	Initiation fees and capital contributions included on line 9	39a			
b		39b			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year	ear under:			
	section 4911 ▶ ; section 4912 ▶; section 4				
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958				1
	transaction during the year, or did it engage in an excess benefit transaction in a prior year tha	t has not been			
	reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		40b		X
c	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on	•	100		
-	organization managers or disqualified persons during the year under sections 4912,				
	4955, and 4958	.>		41.6	
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c				
	reimbursed by the organization	>			
e	All organizations. At any time during the tax year, was the organization a party to a prohibited t	ax shelter			
	transaction? If "Yes," complete Form 8886-T		40e		X
41	List the states with which a copy of this return is filed NONE				
42a	The organization's books are in care of ▶ See attachment #4	Telephone no. ▶			
	Located at -	ZIP + 4 ▶			
ь	At any time during the calendar year, did the organization have an interest in or a signature or	other authority over		Yes	No
	a financial account in a foreign country (such as a bank account, secunties account, or other fi	nancial account)?	42b		X
	If "Yes," enter the name of the foreign country:		15	1	高級
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of	Foreign Bank ,	2.3	A 135	
	and Financial Accounts.			新	1
C	At any time during the calendar year, did the organization maintain an office outside the U.S.?		42c		X
	If "Yes," enter the name of the foreign country:				
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 Ch	neck here	• • • • •		▶ [
	and enter the amount of tax-exempt interest received or accrued during the tax year \cdots	▶ 43			
			·	Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 mu		整整		
	completed instead of Form 990-EZ		44a		X
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990			氏葉点	100
	completed instead of Form 990-EZ				X
c	Did the organization receive any payments for indoor tanning services during the year? \dots		44c		X
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," pr	ovide an	子が流		
	explanation in Schedule O	N/A	44d		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	· · · · · · · · · · · · · · · · · · ·	45a		X
45b	Did the organization receive any payment from or engage in any transaction with a controlled e	ntity within the	- C		1.75%
	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed	instead of		1	
	Form 990–F7 (see instructions)		45b	1	X

GILLETTE ELKS LODGE 2825 47-0864008

Form 990	0-EZ (2012)						P	age 4
							Yes	No
6 Did	d the organization engage, directly or indirectly, i	n political campaign	activities on behalf of	or in oppos	ition			,
to	candidates for public office? If "Yes," complete	Schedule C, Part I				46		X
Part \								
	All section 501(c)(3) organizations must		-49b and 52, and com	plete the ta	bles for lines			
	50 and 51	·	·	•				
	Check if the organization used Schedule	O to respond to an	v question in this Part \	/ 1				Г
	Oncor ii iii o o gamaaaan aaaa aanaaa	, o 10 100pono 10 11	, , , , , , , , , , , , , , , , , , , ,				Yes	No
7 Did	d the organization engage in lobbying activities of	or have a section 501	(h) election in effect d	iring the te	,			
	ar? If "Yes," complete Schedule C, Part II					. 47		х
-	the organization a school as described in section						 	X
	_		•				 	X
	d the organization make any transfers to an exer							X
	'Yes," was the related organization a section 527						Ь	L.A.
	implete this table for the organization's five high						•	
en	nployees) who each received more than \$100,00					<u>, , , , , , , , , , , , , , , , , , , </u>		
	(a) Name and title of each employee	(b) Average hours per week	(C) Reportable compensation (Forms	utions to em	th benefits, contruib- ployee benefit plans,	(e) Estima		
	paid more than \$100,000	': devoted-to.positio		and deter	red compensation:	, other co	<u> </u>	<u> </u>
NONE					arin 47 4	ri 5	, 1	٠. ٠
			· 8.2	15;**	·. ·.	4 d 17 g		71
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_	· · · · · · · · · · · · · · · · · · ·			<u> </u>				
		j.]	1				
(a) Nan	ne and address of each independent contractor paid mor	e than \$100,000	(b) Type of service		(c) Co	mpensation	a	
ONE								
NOME		}						
	•		· · · · · · · · · · · · · · · · · · ·		, ,			
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d To	tal number of other independent contractors ea	ch receiving over \$10	00.000		·			
	the organization complete Schedule A? Note:			7(a)(1)				
_	nexempt charitable trusts must attach a comple		=			▶ ∏ Ye	s X	No
	alties of perjury, I declare that I have examined this retu							
inaer pen rue, corre	ct, and complete. Declaration of preparer settler than of	icer) is based on all infor	mation of which preparer i	asany knowi	edge.	a A a and Dan	W1, 11.10	
	1/4 - 061	<u> </u>				10	पन	$\mathbf{\Sigma}$
Sign	Signature of officer	<u> </u>	····	 .		Date		
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.U. C	KONNIE WAYNE		SECRE:	IMKI				
	Type or print name and title		D-1-			DTIN		
		parer's signature	Date) A. 7-19	Check if	PTIN		
Paid	KAREN DUVALL	mend by	m 30 8-2	0-2013	self-employed	P0008	<u> 557</u>	33
^o repai					Firm's EIN ▶			
<u>Jse O</u>					Phone no. 307	-682-2		,
lay the	IRS discuss this return with the preparer shown	above? See instruct	ions			<u>▶ Ye</u>		No
JVA '	12 990EZ4 TWF 990 Copyright Forms (Sof	tware Only) - 2012 TW			Fo	m 990-	EZ (2	2012)

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

2012

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

		f the organizati		\ -					Employer		ation n	umber	
			S LODGE 282						<u>7-086</u>	4008		· · · · · · · · · · · · · · · · · · ·	
_	ırt			ity Status (All organ					tructions.				
	org	1	•	ecause it is: (For lines 1 association of churche	-		-						
1 2	上	!	·-)(1)(A)(II). (Attach Sche									
3	\vdash		-	ervice organization des		section 1	70(b)(1)(A	Mili).					
4	H			rated in conjunction wit)(1)(A)(iii).	. Enter the	hospita	al's na	me.
7	_	city, and state:											
5		An organization	operated for the ben (). (Complete Part II.)	efit of a college or unive	ersity owne	ed or oper	ated by a g	governmer	ntal unit de	escribed in	n sect	ion	
6	Г		•	or governmental unit d	escribed in	section	170(b)(1)(A)(v).	•		•		
7			n that normally receive (1)(A)(vI). (Complete I	s a substantial part of it Part II.)	s support	from a gov	rernmental	unit or fro	m the gen	eral publi	c descri	ibed in	١
8		A community tr	ust described in sect	ion 170(b)(1)(A)(vi). (C	omplete P	art II.)							
9	X	receipts from a support from g	ctivities related to its eaross investment incom	s: (1) more than 33 1/3 xempt functions—subje e and unrelated busine ne 30, 1975. See secti	ect to certa ess taxable	in exception income (le	ons, and (2 ess section	2) no more 511 tax) f	than 33 1	/3% of its		•	
10		An organization	organized and opera	ted exclusively to test for	or public s	afety. See	section !	509(a)(4).		•			
11		An organization purposes of on	n organized and opera e or more publicly sup	ted exclusively for the laported organizations does the type of supporti	benefit of, 1 lescribed in	o perform section 5	the function 09(a)(1) or	ons of, or t section 5	09(a)(2). S	ee sect	ion		
e			han foundation manag	Corganization is not corgers and other than one		ectly or ind	irectly by o			fied	_	integra	ated
·f		organization, cl	neck this box	determination from the		• • • • • • • •		• • • • • • • •	supporting) •••••			
g		following perso	ns?	nization accepted any g							1		
		(i) A person w	rho directly or indirectly	y controls, either alone	or togethe	r with pers	ons descri	ibed in (ii)		. г		Yes	No
			_	dy of the supported org							11g(i)		<u>X</u>
				cribed in (i) above?							11g(ii)		X
				on described in (i) or (ii		• • • • • • • • •		• • • • • • • •	• • • • • • • •	[11g(iii)		X
h		Provide the follo	owing information abo	ut the supported organ	ization(s).				 		,		
(i) N		e of supported panization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	in col. (I) li	organization sted in your document?	organizatio	u notify the n in col. (I) support?	-		(vil) /	Arnour tary su	
					Yes	No	Yes	No	Yes	No	<u> </u>		
					· · ·	Complete Spire	in a Grant	经一定的特殊	CARTIFICATIONS	Market Millians			
Γot	al										10 21 5		

If the organization fails to qualify under the tests listed below, please complete Part II.)

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.

Section A. Public Support (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total Calendar year (or fiscal year beginning in) ▶ Gifts, grants, contributions, and membership fees received. (Do not 311 621 3,423 2,466 6,850 include any "unusual grants.")..... Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the 49,714 64,398 37,746 2,462 155,084 organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513-Tax revenues levied for the organization's benefit and either paid to or expended on The value of services or facilities furnished by a governmental unit to the organization without charge 49,743 64,709 38,367 4,187 4,928 161,934 Total, Add lines 1 through 5, Amounts included on lines 1, 2, and 3 received from disqualified persons..... Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 c Add lines 7a and 7b..... 161,934 Public support (Subtract line 7c from line 8.) Section B. Total Support (e) 2012 (d) 2011 (f) Total (a) 2008 (b) 2009 (c) 2010 Calendar year (or fiscal year beginning in) 161,934 4,928 49,743 64,709 38,367 4,187 Amounts from line 6..... Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 313 1.537 616 137 405 sources...... b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 313 1,537 616 137 6 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly Other income. Do not include gain or 12 loss from the sale of capital assets 8,795 46,804 10.743 14,029 5.305 7.932 (Explain in Part IV.)..... 78,804 44,288 12.432 13,860 210,275 60,891 Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. Section C. Computation of Public Support Percentage 77.01% 15 15 16 Section D. Computation of Investment Income Percentage Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f)) 0.73% 17 Investment income percentage from 2011 Schedule A, Part III, line 17..... 18 33 1/3% support tests -- 2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is 19a not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 33 1/3% support tests -- 2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions .

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

ACTIVITIES FROM PRIOR YEARS EXPLAINED IN STATEMENTS 13 THROUGH 17

SCHEDULE O

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2012

Open to Public 🕢

Department of the Treasury Internal Revenue Service

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.

Inspection

Name of the organization

GILLETTE ELKS LODGE 2825

Employer identification number

47-0864008

A CORRECTING ADJUSTMENT WAS MADE TO BOOKS OF 1227 FUNDS FROM PRIOR LODGE HELD BY STATE AND RETURNED TO LODGE LEASEHOLD IMPROVEMENTS AND PARKING LOT PURCHASE ABOVE EXPLANATION FOR FUNDS AND ASSETS CHANGES

990 PRIMARY EXEMPT PURPOSE

Attachment 1: page 1 - 990-EZ Page	2, Part III
Open to Public Inspection For calendar year 2012 or tax period beginning	04-01 , and ending 03-31-2013.
Name of Organization	Employer Identification Number
GILLETTE ELKS LODGE 2825	47-0864008
Р	rimary Purpose
THE ELKS PRIMARY EXEMPT PURPOSE IS 'ORGANIZATIONS	TO HELP YOUTH, VETERANS AND OTHER CIVIC
	• •

990 PROGRAM SERVICE ACCOMPLISHMENT

Attachment	2:	page	1 -	990-	EZ P	age	3, Part	III				, nl
Open to Public Inspection	Enne	alender · · ·	ant OD40	or tov =-	riod begin	nina	04-0	1-201	2, and ending	N3. 1	31-2013	2
lame of Organization		alendar ye	ar 2012	or tax pe	rioa negiri	ring	04-0	1-201	Z, and ending	Employer ic		
SILLETTE E		LODG	E 28	25						47-086		_
Part III - Statemer			ervice A	ccompli	shments							
Grants and allocation	ons		4	,460			es foreign gra		ogram service e	xpenses		6
TATION A TOTAL	C 17	- DE	ODI E	MILO			Purpose Achi		MEDICAL	DITTO	7 NT 17	- ATD
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990 PROGRAM SERVICE ACCOMPLISHMENT

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	rganization		iendar yea	ar 2012	or tax pe	nod beginnir	ng	04-0	11-2	OIZ, and	ariumy		dentification No	
	TTE E		LODGE	₹ 28	25							47-086		
rt III -	Statement	t of Pro	ogram Se	rvice A	ccomplis	shments								
	d allocation					Amount is	ncludes fo	reign gra	ints	Program s	ervice e	xpenses		
						Ð	cempt Pur	pose Ach	ievem					
								IONS	IN	COMMUN	ITY			
HTU	ORGAI	NIZA	TIONS	S IN	THE	COMMUN	VITY							
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990 CURRENT OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

Inspection For calendar year 2012 of Name of Organization GILLETTE ELKS LODGE 282		04-01-2012, and		tification Number
(A) Name and Title	(B) Average hours per week devoted to postion	(C) Compensation (Form W-2/1099-MISC) (if not paid, enter -0-)	(D) Cont. to employee ben. plans & def. comp.	(E) Expense account & other compensation
JOHN H WAYNE III EXALTED RULER	25.00			
BILL CLIFTON LEADING KNIGHT	10.00			
JOHN D POYNOR LOYAL KNIGHT	12.00			
BRANDON MORGAN LECTURING KNIGHT	1.00	,,,		
KONNIE L WAYNE SECRETARY	30.00			,
RICK D SHANK TREASURER	1.00			
BERWYN (TYKE) T CONROY 1 YR TRUSTEE	1.00			
DUANE BLUME 2 YR TRUSTEE	2.00			
RODNEY C ADDISON 3 YR TRUSTEE	1.00			
CARKA POYNER 4 YR TRUSTEE	6.00			
RON J HOLBROOK FIVE YR TRUSTEE	2.00			
JOE FULTON TILER	2.00			
CLINT RISING ESQUIRE	4.00			
RICHARD MINCHOW CHAPLAIN	10.00			
JOE APPLEBAKER INNER GUARD	2.00			

990 BOOKS ARE IN CARE OF

Atta	<u>achmen</u>	t 4	- 990-E	Z Page 3	<u>, Part V</u>	<u>, Line 42</u>	a		
Oper	n to Public	T							
Inspe	ection	For c	alendar year 20	12 or tax period	l beginning	04-01		03-31-20	
Name	of Organizat	ion						Employer Identificati	on Number
GILI	LETTE :	ELKS	LODGE :	2825			4	7-0864008	
Part V	- Line 42a								
c	ual Name . or ss Name:					<u>KONNI</u>	E L WAYNE		
Street /	Address					1207 (CEDAR CREEK	CT	
U.S. Ad		827:	; 18	city G	ILLETTE	:	State	WY	· · · ·
Foreign	or Address			, —					
	City			· · · · · · · · ·					
	Province or	r State .		· · · · · · · · · · · · · · · · · · ·					
	Country .					<i></i> .	• • • • • • • • • • • • • • • • • • • •		<u></u>
	Postal code	9					•••••••		
	Phone Nun	nber .					• • • • • • • • • • • • • • • • • • • •	(307)	247-121
	Fax Numbe	er						····	

L0613F

47-0864008	Page1
STATEMENT #1 - Contributions, gifts, grants (EZ1 Line 1)	•
FAIR BOARD	
TOTAL CARRIED TO EZ1 Line 1	7,274
STATEMENT #2 - Membership Dues & Assessments (990-EZ PG 1 Line 3	
MEMBERSHIP DUES	
TOTAL CARRIED TO 990-EZ PG 1 Line 3	12,836
STATEMENT #3 - Other revenue (990-EZ PG 1 Line 8)	
MISC. 182 VFW BUILDING USE 500 GL INSURANCE 303 GL PER CAPITA 1,111 STATE FEES 500 FINES 10	··
TOTAL CARRIED TO 990-EZ PG 1 Line 8	2,606
STATEMENT #4 - Grants and similar amts paid (990-EZ PG 1 Line 10) ,
CHARITABLE DONATIONS	
STATEMENT #5 - Professional Fees (990-EZ PG 1 Line 13)	
TAX PREP	
TOTAL CARRIED TO 990-EZ PG 1 Line 13	345
STATEMENT #6 - Other expenses (EOEZ Pg 1 Line 16)	
CONVENTION EXPENSE	

JVA

2012 DETAIL STATEMENTS

GILLETTE ELKS LODGE 2825 47-0864008

Page 2

TELEPHONE 27 MISC 551 CLUB EXPENSE 1,139 LODGE ACTIVITIES EXPENSE 250 BUILDING EXPENSES 37,593 ADVERTISING 33 BUSINESS EXPENSE 814 TOTAL CARRIED TO EOEZ Pg 1 Line 16	43,355
STATEMENT #7 - End of Year - Cash (990-EZ PG 1 Line 22)	
GENERAL FUND. 13,050 BUILDING FUND. 2,415 ELKS CHARITABLE FUND. 34,693 CLUB ACCOUNT. 3,610 CASH ON HAND. 1,000	. · • ·
TOTAL CARRIED TO 990-EZ PG 1 Line 22	54,768
STATEMENT #8 - Gross income from fundraising (990-EZ PG 1 Line 6 GENERAL FUNDRAISING	
STATEMENT #9 - Direct expenses from gaming (990-EZ PG 1 Line 6c)	
HILL ROPING FUNDRAISER	
TOTAL CARRIED TO 990-EZ PG 1 Line 6c	670
STATEMENT #10 - Gross sale of inventory (EZ1 Line 7a)	· · · · · · · · · · · · · · · · · · ·
LIQUOR SALES	·
TOTAL CARRIED TO EZ1 Line 7a	13,192
STATEMENT #11 - Less: Cost of goods sold (EZ1 Lione 7b)	
PURCHASES LESS ENDING INVENTORY	2,965
STATEMENT #12 - Total liabilities end yr (EOEZ Pg 2 Line 26)	

2012 DETAIL STATEMENTS

GILLETTE	ELKS	LODGE	2825
47-086400	80		

47-0864008	Page 3
ELKS FOUNDATION	
TOTAL CARRIED TO EOEZ Pg 2 Line 26	18,116
STATEMENT #13 Other income (SCH A, PG 2 Line 10(a))	
MEMBERSHIP DUES	
TOTAL CARRIED TO SCH A, PG 2 LITTLE TO(a)	10,743
STATEMENT #14 - Other income (SCH A, PG 2 Line 10(b)) MEMBERSHIP DUES. 6,698 GL INSURANCE AND PER CAPITA 246 STATE FEES. 80 LODGE ACTIVITIES. 1,840 CONCESSIONS. 4,962 PIN SALES. 6 YOUTH FUND. 197 TOTAL CARRIED TO SCH A, PG 2 Line 10(b).	14,029
STATEMENT #15 - Other income (SCH A, PG 2 Line 10(c)) MEMBER DUES	
TOTAL CARRIED TO SCH A, PG 2 Line 10(c)	5,305
STATEMENT #16 - Other income (SCH A, PG 2 Line 10(d)) MEMBER DUES	
TOTAL CARRIED TO SCH A, PG 2 Line 10(d)	7,932
STATEMENT #17 - Other income (SCH A, PG 2 Line 10(e))	

2012 DETAIL STATEMENTS

GILLETTE ELKS LODGE 2825 47-0864008

Page 4

GL INSURANCE AND PER CAPITA	1,540	
STATE FEES	440	
OTHER	2	
PIN SALES	10	
MEMBER DUES	6,803	
TOTAL CARRIED TO SCH A, PG 2 Line 10(e)		8,795
STATEMENT #18 - Assets included (SCH D, PG 1 Line 2b)	40 170	
MONEYS FROM FORM GILLETTE CHAPTER BUILDING FUND	40,170	
CLUB ACCOUNT		
DEPRECIATION OF ASSETS	-5,101	•
CLOSING OF BANK ACCOUNT NOT IN BOOKS	•	
OTHER BOOK ADJUSTMENTS	1,756	
TOTAL CARRIED TO SCH D, PG 1 Line 2b		36,946