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Return of Organization Exempt From Income Tax 990 2012 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) Open to Public Department of the Treasury Inspection The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service For the 2012 calendar year, or tax year beginning 04-01 , 2012, and ending 03-31 , 2013 Check if applicable C Name of organization OREGON STATE ELKS ASSOCIATION TRUST D Employer identification no. Address change Doing Business As 93-1117289 Name change Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number Initial return P O BOX 189 (503) 581-7485 Terminated City, town or post office, state, and ZIP code 2,421,840 Amended return Salem, OR 97308 G Gross receipts \$ Application pending Name and address of principal officer Is this a group return for affiliates? Yes 🛛 No 501(c)(3) Tax-exempt status 4947(a)(1) or 527 Are all affiliates included?
If "No," attach a list. (see instructio Group exemption number Yes 🗌 (inserting) Website^{*} H(c) Trust Association Form of organization Corporation L Year of formation 1905 M State of legal domicile OR Part I Summary Briefly describe the organization's mission or most significant activities FUNDING FOR MEDICINE AND ED Activities & Governance Number of voting members of the governing body (Part VI, line 1a) 3 15 Number of independent voting members of the governing body (Part VI, line 1b) 4 15 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 0 Total number of volunteers (estimate if necessary) 50 Total unrelated business revenue from Part VIII, column (C), line 12 0 Net unrelated business taxable income from Form 990-T, line 34 0 **Current Year** Contributions and grants (Part VIII, line 1h) 2,222,396 2,239,990 Program service revenue (Part VIII, line 2g) 0 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 31,339 29,924 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 164,267 151,926 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 2,421,840 2,418,002 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 2,176,312 2,144,110 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 Salaries, other compensation, employee benefits (Part-IX, column (A), lines 5-10) 15 0 Professional fundraising fees (Part IX, column (A), line 11e) RECEIVED 0 Total fundraising expenses (Part IX, column (D), line 25) S 17 Other expenses (Part IX, column (A), lines 11a-11d, 11-24e) 123,351 232,482 Total expenses Add lines 13-17 (must equal Part IX column X) line 25) 2,299,663 2,376,592 Revenue less expenses Subtract line 18 from line 12 118,339 45,248 Ad Blances Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 547,792 502.544 21 Total liabilities (Part X, line 26) 0 22 Net assets or fund balances Subtract line 21 from line 20 502.544 547.792 Part II Signature Block dunder penalties of penury, 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 base 冚 Sign Here AMES Type or print name and title Print/Type preparer's name Paid Robert L Armstrong Preparer Robert L P Firm's EIN Armstrong **Use Only** Firm's address 1100 Liberty St SE STE 1 Salem OR 97302 503-378-1463 May the IRS discuss this return with the preparer shown above? (see instructions) Yes For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2012)

OMB No 1545-0047

Form	990 (2012) OREGON STATE ELKS ASSOCIATION TRUST	93-1117289	Page 2
Pai	t III Statement of Program Service Accomplishments		_
	Check if Schedule O contains a response to any question in this Part III	<u> </u>	<u> </u>
1	Bnefly describe the organization's mission		
	FUNDING FOR MEDICINE AND ED		
2	Did the organization undertake any significant program services during the year which were not listed on the	_	_
	prior Form 990 or 990-EZ?	· · · · 🗌 Yes	☐ No
	If "Yes," describe these new services on Schedule O		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	_	_
	services?	· · · · 🗌 Yes	☐ No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as measure		
	expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	ners,	
	the total expenses, and revenue, if any, for each program service reported		
4a	(Code) (Expenses \$ 2,071,196 including grants of \$) (Revenue	\$ 2,046	5,760)
	PROVISION FOR FUNDS AND EQUIPMENT FOR MEDICAL AND EDUCATIONAL INSTUTIONS		
		<u></u>	
			
4b	(Code) (Expenses \$97,350 including grants of \$) (Revenue	\$ 9	7 <u>,350</u>)
	SCHOLARSHIPS FOR DESERVING STUDENTS OF HIGHER EDUCATION AND TRADE SCHOOLS		
			
			··
			
			·
	(Code) (Company Code) (Regions)		
4c	(Code) (Expenses \$ including grants of \$) (Revenue	\$	
			
			-
			
			····
44	Other program conuces (Decembe in Schedule O.)		
4d	Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$,	
4e	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses 2,168,546		
_	2,100,340		rm 990 (2012
EEA		10	(12

Form 990 (2012) OREGON STATE ELKS ASSOCIATION TRUST 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	Χ	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III · · · · · · · · · · · · · · · · ·	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I · · · · · · · · · · · · · · · · · ·	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable			
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	Χ	
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			l
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
a	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	44.		١,,
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
9	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	448		١,,
12a	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f		X
124	·	42-	v	
b	Schedule D, Parts XI and XII	12a	<u>X</u>	
-	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		v
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	-	X
14a	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,	1-70		<u> </u>
-	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	. +2	-	<u> </u>
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			_
	If "Yes," complete Schedule G, Part III · · · · · · · · · · · · · · · · ·	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Form 990 (2012) OREGON STATE ELKS ASSOCIATION TRUST

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		_X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
04-	employees? If "Yes," complete Schedule J	23		_X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than		-	
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K If "No," go to line 25	24a		<u>X</u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary penod exception?	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 250	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			.,
_	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	-	_X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	054		17
26	If "Yes," complete Schedule L, Part I	25b		_X
20	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or	00		3.7
27	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		<u>X</u>
21	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		v
28		27	_	X
20	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)			3
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	.4	- 1	v
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	28a		<u>X</u>
	Schedule L, Part IV	20h		v
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	28b		<u>X</u>
·	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		v
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		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
•	Part I · · · · · · · · · · · · · · · · · ·	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	٠.		
-	complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1 · · · · · · · · · · · · · · · · · ·	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			 -
	19? Note. All Form 990 filers are required to complete Schedule O	38	х	
			000 /	2042)

Form 990 (2012) ' OREGON STATE ELKS ASSOCIATION TRUST

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>· LL_</u>
		_	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
_	reportable gaming (gambling) winnings to prize winners?	1c	Χ	
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			٠
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Χ	
•-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		<u>X</u>
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			٠,,
	account)?	4a		X
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for Form TD F 00 33.1. Report of Foreign Bank and Financial Association			
5a	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	E-	,	.,
b	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
C	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b 5c		 ^
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	5 C		
va	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	ua_		
-	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	05		
· a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
-	and services provided to the payor?	7a		х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282? · · · · · · · · · · · · · · · · · · ·	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	.,	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		Х
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		Х
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			٠, ١
а	Did the organization make any taxable distributions under section 4966?	9a		Х
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		Х
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 · · · · · · · · · · · · · · · · 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			1
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<u></u>
ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	-		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		ļ
_	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which]
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			<u> </u>
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	i	I

Form	990 (2012) OREGON STATE ELKS ASSOCIATION TRUST 93-11172		P	age 6
Par	TVI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "	No"		
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions			
	Check if Schedule O contains a response to any question in this Part VI		. <u>.</u> .	· 🛛 🔝
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			,
	If there are material differences in voting rights among members of the governing body, or			
	If the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O	٠,٠		,
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			İ
	any other officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following		-	
а	The governing body?	8a	Х	_
b	Each committee with authority to act on behalf of the governing body?	8b		Х
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)		_	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Χ	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	'		1
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		Χ
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Χ	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	[
	describe in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	, "		م ا
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	Х	İ
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		,	'
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b	1	ļ
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed OR			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)			
	available for public inspection. Indicate how you made these available. Check all that apply			
	Own website			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy,			
	and financial statements available to the public during the tax year			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	Organization: CAROL REDRY (503) 501-7405 D.O. ROY 100 Collem OR 07300			

•											
Form 990 (20		ASSOCIAT	ION	TRU	JST					93-11172	
Part VII	Compensation of Officers, Direct Independent Contractors	tors, Trus	stees	, K	ey	Em	ploy	ees	s, Highest Con	npensated Em	ployees, and
	Check if Schedule O contains a response to	any question	ın this	Par	t VII	l					
Section A.	Officers, Directors, Trustees, Key Employ				_						
1a Complete organization's	this table for all persons required to be listed tax year	Report comp	ensatio	on fo	r the	e cal	endar	yea	r ending with or with	nin the	
List all compensation	of the organization's current officers, directors Enter -0- in columns (D), (E), and (F) if no co	, trustees (whompensation	nether was pa	ındıv aid	ridua	als o	r orgar	nızat	ions), regardless o	f amount of	
_ List all c	of the organization's current key employees, if	any See ins	tructio	ns fo	or de	finiti	on of "	'key	employee "		
who received	organization's five current highest compensa reportable compensation (Box 5 of Form W-2 nd any related organizations	ted employee and/or Box 7	s (other	er th m 10	an a 099-	n of MIS	ficer, d C) of n	lirec nore	tor, trustee, or key or than \$100,000 from	employee) m the	
List all o \$100,000 of re	of the organization's former officers, key emplor portable compensation from the organization	oyees, and hi and any relat	ghest ed org	com	pens atıor	sated	d empl	oye	es who received mo	ore than	
List all o	f the organization's former directors or trus t nore than \$10,000 of reportable compensation	tees that rece n from the org	eived, i ganizat	n the	e cap and a	pacit any	ty as a related	form d org	ner director or trust janizations	ee of the	
List persons in	the following order individual trustees or dire	ctors, institut	ional tr	uste	es,	offic	ers; ke	y er	nployees, highest		
'	employees, and former such persons										
Check this	box if neither the organization nor any related	d organization	comp	ens	ated	апу	curre	nt of	ficer, director, or tru	stee	
	(A)	(B)			(0	C)			(D)	(E)	(F)
	Name and Title		box, u	ıniess	pers	ore th	an one both an		Reportable compensation from the organization	Reportable compensation from related organizations (W-2/1099-MISC)	Estmated amount of other compensation from the
		related organizations below dotted line)	I t d n r i d u r i s e v t c	l t n r s u t s i t	Office	K e y e m	H c e l c m p h p l e e o s n y t s e t e d	F o r m e r	(W-2/1099-MISC)		organization and related organizations
(1) CAROL I		40.00				х				40 475	•
EXEC SI		40.00		_		^			0	42,475	0
(3)											
(4)											
(5)											
(6)											
(7)			-						-	-	
(8)			-					-			

(9)

(10)

(11)

(12)

(13)

(14)

	(A) Name and title		(B) (C) werage xurs per k (list any xurs for						(D) Reportable compensation from the	(E) Reportable compensation from related organizations	com	(F) timated nount of other pensatio	on
		related organizations below dotted line)	v t c	n r s u t s ı t	f f c e	Key employee	H c e m g p e o y e e s s e e t e d	F or mer	organization (W-2/1099-MISC)	(W-2/1099-MISC)	org an	om the anizatio d related anization	i
(15)				<u> </u>									
(16)			ļ		-						<u> </u>		
(17)													
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(20)													
(21)											 		
(22)												-	
(23)						-							
(24)				ļ									
(25)	-										-		
1b c	Sub-total			• •		• •		>	0	42,475			0
2	Total number of individuals (including but not limited reportable compensation from the organization		ed abo	ve) v	who	rece	ived n	nore		0			
3	Did the organization list any former officer, director, employee on line 1a? If "Yes," complete Schedule J					•	•	•	ensated		3	Yes	No
4	For any individual listed on line 1a, is the sum of reporganization and related organizations greater than individual	ortable comp \$150,000? If	ensati "Yes,"	on a	and o	other e Sc	comp	ensa e J fo	ation from the or such				X
5	Did any person listed on line 1a receive or accrue or for services rendered to the organization? If "Yes," or	ompensation	from a	any L	ınre	ated	orgar	nızatı	on or individual		5		X
1	on B. Independent Contractors Complete this table for your five highest compensation compensation from the organization Report compensation.												
	(A) Name and business address								(8) Description of			(C) ensatio	n
2	Total number of independent contractors (including received more than \$100,000 of compensation from			ose	liste	d ab	ove) w	/ho					

Part VIII

Statement of Revenue

		Check if Scredule O contain	is a response	e to an	y question in this i	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ats ats	1a	Federated campaigns · · ·		1a	· · · · · · · · · · · · · · · · · · ·				
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership dues		1b	4,299				
ο E	С	Fundraising events		1c	, , , , , , , , , , , , , , , , , , ,				
ift. ar,	d	Related organizations		1d	2,235,691	· ´			
%,E ⊡:E	е	Government grants (contribution	ons) · ·	1e					
Sis	f	All other contributions, gifts, gr	•						
ibe Fe		and similar amounts not includ		1f	:				
ξÖ	g	Noncash contributions included	d in lines 1a-	-1f \$					
and and	1 -	Total. Add lines 1a-1f · ·				2,239,990			
1,1,0					Business Code	2,233,330			
92	2a								
9,	ь								
8	c								·
3	d								
S E	е		·						
Program Service Revenue	f	All other program service reven	ue · · · ·	 .					
ď		Total. Add lines 2a-2f							
	3	Investment income (including di	vidends inte	erest				 	
	•	3 Investment income (including dividends, interest, and other similar amounts)				1,757	1,757		
	4	Income from investment of tax-e	exempt bond	proce	eds · · ·		-/.9.		
	5	Royalties							
		,	(ı) Real		(ii) Personal	-		,	
	6a	Gross rents	():::=		(1)				
	ь	Less rental expenses				j .			
	1	Rental income or (loss) · · ·						-	
		Net rental income or (loss)							1
	1	Gross amount from sales of	(ı) Secuntii		(II) Other	13			
	""	assets other than inventory	()		28,167				
	ь	Less cost or other basis							
		and sales expenses · · · ·							
	С	Gain or (loss)			28,167		· · · · · · · · · · · · · · · · · · ·		
	d	Net gain or (loss)				28,167	28,167		
ē	8a	Gross income from fundraising				=	•		
evenue		events (not including \$							
		of contributions reported on line	1c)			,			}
Other R		See Part IV, line 18 · · · · ·	•	. а		ļ			
ŧ	Ь	Less direct expenses							
	С	Net income or (loss) from fundra	aising events	s .		i 1			
	1	Gross income from gaming acti	_					,	
		See Part IV, line 19		. а			-		
	b	Less direct expenses		. ь		1			-
	С	Net income or (loss) from gamin	ng activities						
	10a	Gross sales of inventory, less							
		returns and allowances · · ·		. а					
	ь	Less cost of goods sold · ·		. ь		1			
	_ c	Net income or (loss) from sales	of inventory	<u>.</u>]	_		
		Miscellaneous Revenue			Business Code		•	, were "	
	11a	MISCELLANEOUS'			900099	151,926	151,926	l '	
	b								
	С								
	d	All other revenue		• •					
	е	Total. Add lines 11a-11d ·			· · · · · · · · · · · ·	151,926		p. St.	
	12	Total revenue. See instructions				2,421,840	181,850	C	0

Part IX Statement of Functional Expenses

Check of Schedule Q contains a response to any question on this Part IX On not include amounts reported on lines 8b, 7b, 60 (N) 8b, 9b, and 10b of Part VIII. Grants and other assistance to governments and organizations in the United States See Part IV, line 21 Crants and other assistance to anothorusis in the United States See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals in the United States See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, line 22 Compensation of current officers, direction, trustees, and key employees Compensation of current officers, direction, trustees, and key employees Compensation of current officers, direction, trustees, and key employees Compensation of current officers, direction, trustees, and key employees Portion of current officers, direction, trustees, and key employees Compensation of current officers, direction, trustees, and key employees Portion of current officers, direction, trustees, and key employees Portion of current officers, direction, trustees, and key employees Portion of current officers, direction, trustees, and key employees Portion of current officers, direction, trustees, and key employees Particular and values Particular	Sect	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)							
8b. 9b. and 10b of Part VIII. Grarts and the best resustance to governments and organizations in the United States See Part IV, line 21 2 Crartis and other assistance to individuals in the United States See Part IV, line 21 Corriers and other assistance to individuals in the United States See Part IV, line 21 Corriers and other assistance to individuals in the United States See Part IV, line 22 Corriers and other assistance to individuals in the United States See Part IV, line 22 Corriers and other assistance to individuals in the United States See Part IV, line 15 Compensation, and individuals outside the United States See Part IV, line 15 and 16 Compensation of current officers, direction, truttees, and key employees Compensation of current officers, direction, truttees, and key employees Personal discontined in section 4958(n)(3)(8) Other employee benefits Personal plan accrusia and contributions (include section 495(n) and 400(b) employee benefits Personal plan accrusia and contributions (include section 495(n) and 400(b) employee contributions) Personal functions and compensation of the plan accrusia and contributions (include section 495(n) and 400(b) employee contributions) Personal search and accrusia and contributions (include section 495(n) and 400(b) employee contributions) Personal functions and contributions (include section 495(n) and 400(b) employee contributions) Personal functions and contributions (include section 495(n) and 400(b) employees) Personal functions and contributions (include section 495(n) and 400(b) employees) Personal functions and accrusia services (include section 495(n) and 495(n		Check if Schedule O contains a response to any quest	ion in this Part IX						
85, 95, and 106 of Part VIII. Grants and other assistance to governments and organizations in the United States See Part IV, line 21 Grants and other assistance to individuals in the United States See Part IV, line 21 Grants and other assistance to individuals in the United States See Part IV, line 21 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, line 22 United States See Part IV, line 12 United States See Part IV, line 15 and 16 Benefits paid to or for members Compression of current officers, directors, trustees, and key employees Compression on tincluded above, to disqualified persons (as defined under section 4958)(11) and persons disacticed in section 4958(11) and persons disacticed an section 4958(11) and 493(1) employer contributions (enclude section 4018) and 403(10) employers and 4018 and 40	Do n	ot include amounts reported on lines 6b, 7b,							
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2 Grants and other assistance to individuals in the United States SeP earl K, Ime 22 3 Grants and other assistance to governments, organizations, and individuals outsade the United States SeP earl K, Ime 15 and 16 4 Benefits pad to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons discribed an section 4958(f)(1)) and persons discribed an section 4958(f)(1)) and persons discribed an section 4958(f)(1)) and persons discribed an section 4958(f)(1) and persons discribed an section 4958(f)(1)) and persons discribed an section 4958(f)(1) and 403(f) employer contributions (include section 4918(f)) nd 403(f) employer contributions (include s	1	~							
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18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest	16	Occupancy · · · · · · · · · · · · · · · · · · ·							
for any federal, state, or local public officials 19	17								
19 Conferences, conventions, and meetings	18	Payments of travel or entertainment expenses							
20 Interest		for any federal, state, or local public officials							
21 Payments to affiliates		_							
22 Depreciation, depletion, and amortization									
23 Insurance		-							
Other expenses I I I I I I I I I I I I I I I I I I		• • •	1,731		1,731				
above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) a ADMINISTRATIVE b PUBLIC RELATIONS c COMMITTEE d OTHER d OTHER All other expenses Total functional expenses. Add lines 1 through 24e organization reported in column (8) joint costs from a combined educational campaign and fundraising solicitation Check here In the state of the state of the line of the li			-						
line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) a ADMINISTRATIVE b PUBLIC RELATIONS c COMMITTEE d OTHER d OTHER All other expenses Total functional expenses. Add lines 1 through 24e 20,376,592 2,168,546 208,046 0 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	24	•							
(A) amount, list line 24e expenses on Schedule O) a ADMINISTRATIVE b PUBLIC RELATIONS c COMMITTEE d OTHER e All other expenses Total functional expenses. Add lines 1 through 24e organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ADMINISTRATIVE 63,800 63,800 COMMITTEE 20,740 20,740 20,740 21,740 20,740 22,76,592 2,168,546 208,046 0									
a ADMINISTRATIVE b PUBLIC RELATIONS c COMMITTEE 20,740 d OTHER 142,515 e All other expenses Total functional expenses. Add lines 1 through 24e 27,376,592 27,168,546 208,046 0 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									
b PUBLIC RELATIONS C COMMITTEE D OTHER All other expenses Total functional expenses. Add lines 1 through 24e - 2,376,592 2,168,546 208,046 0 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here if	_			_		, set			
C COMMITTEE 20,740 20,740 d OTHER 142,515 142,515 e All other expenses 2,376,592 2,168,546 208,046 0 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 if					63,800				
d OTHER e All other expenses 25 Total functional expenses. Add lines 1 through 24e · 2,376,592 2,168,546 208,046 0 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									
e All other expenses 25 Total functional expenses. Add lines 1 through 24e · 2,376,592 2,168,546 208,046 0 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				20,740	440				
Total functional expenses. Add lines 1 through 24e - 2,376,592 2,168,546 208,046 0 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			142,515		142,515	 			
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		*	0.376.505	0.160.715					
organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here			2,3/6,592	2,168,546	208,046	0			
fundraising solicitation. Check here if		organization reported in column (B) joint costs							
following SOP 98-2 (ASC 958-720)		F							

		Check if Schedule O contains a response to any question in this Part X	 		<u> </u>
			(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	171,761	1	213,696
	2	Savings and temporary cash investments	325,037	2	326,761
	3	Pledges and grants receivable, net	<u> </u>	3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors	-		
		trustees, key employees, and highest compensated employees			
		Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section			
		4985(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and			
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
		organizations (see instructions) Complete Part II of Schedule L		6	
,,	7	Notes and loans receivable, net		7	
Assets	8	Inventones for sale or use		8	
As	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or			
		other basis Complete Part VI of Schedule D 10a 12, 997			
	b	Less accumulated depreciation 10b 5, 662	5,746	10c	
	11	Investments - publicly traded securities		11	.,,000
	12	Investments - other securities See Part IV, line 11		12	
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	502,544	16	547,792
	17	Accounts payable and accrued expenses		17	347,732
	18	Grants payable		18	
	19	Deferred revenue	·· - ·	19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
S	22	Loans and other payables to current and former officers, directors,			
Liabilities		trustees, key employees, highest compensated employees, and			
api		disqualified persons Complete Part II of Schedule L		22	
<u> </u>	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties	· · · · · · · · · · · · · · · · · · ·	24	
	25	Other liabilities (including federal income tax, payables to related third			_ _
		parties, and other liabilities not included on lines 17-24) Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0	26	0
		Organizations that follow SFAS 117 (ASC 958), check here			
Ses		complete lines 27 through 29, and lines 33 and 34.			
anc	27	Unrestricted net assets	43,557	27	55,039
Bal	28	Temporanly restricted net assets	458,987	28	492,753
2	29	Permanently restricted net assets		29	
J.		Organizations that do not follow SFAS 117 (ASC 958), check here		 	
ا ق		complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets of Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds		32	
z	33	Total net assets or fund balances	502,544	33	547,792
	34	Total liabilities and net assets/fund balances	502,544	34	547,792

rom	1 990 (2012) OREGON STATE ELKS ASSOCIATION TRUST	<u>93-11.</u>	1/289	<u> </u>	P8	ige 12
Pa	rt XI Reconciliation of Net Assets			_		
	Check if Schedule O contains a response to any question in this Part XI	<u></u>				· 🛛 _
1	Total revenue (must equal Part VIII, column (A), line 12)	. 1		2,4	21,8	40
2	Total expenses (must equal Part iX, column (A), line 25)	. 2		2,3	76,5	92
3	Revenue less expenses Subtract line 2 from line 1	- 3			45,2	48
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	. 4		5	02,5	44
5	Net unrealized gains (losses) on investments	. 5				
6	Donated services and use of facilities	. 6				
7	Investment expenses					
8	Pnor period adjustments	. 8_				
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		5	47,7	792
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII	<u>.</u>				<u>. 🗅</u>
					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," 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 separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		\cdots	2b	Χ	
	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					
Ç	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	Χ	
	If the organization changed either its oversight process or selection process during the tax year, explain in					ļ
	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		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		į			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		'	3h		

EEA

Form 990 (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.

See separate instructions.

2012

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

Employer identification number Name of the organization OREGON STATE ELKS ASSOCIATION TRUST 93-1117289 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii), (Attach Schedule E) П 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 図 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi), (Complete Part II) An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross 9 receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2), (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the 11 purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h b Type II a Type I c Type III-Functionally integrated d Type III-Non-funtionally integrated e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting f organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the g following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and Yes No (iii) below, the governing body of the supported organization? 11a(i) (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s) (i) Name of supported (II) EIN (iii) Type of organization (iv) is the organization (v) Did you notify (vi) Is the (vii) Amount of monetary organization (described on lines 1-9 in col (i) listed in your the organization in organization in col support above or IRC section governing document? col (i) of your (i) organized in the (see instructions)) Yes No Yes No Yes (A) (B) (C) (D) (E) į Total

Section A. Public Support

Part II

90 or 990-EZ) 2012 OREGON STATE ELKS ASSOCIATION TRUST 93-1117289
Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Caler	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants ")	1,944,907	2,015,919	1,980,162	2,155,875	2,221,912	10,318,775
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	1,944,907	2,015,919	1,980,162	2,155,875	2,221,912	10,318,775
5	The portion of total contributions by	,		•	,	, ,	
	each person (other than a						
	governmental unit or publicly					·	
	supported organization) included on		·				
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						5,553,874
6	Public support. Subtract line 5 from line 4 · ·			·			4,764,901
Sec	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4 · · · · · · · ·	1,944,907	2,015,919	1,980,162	2,155,875	2,221,912	10,318,775
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	16 477	0.010	2 222	3.056	1 757	07 100
	sources	16,477	2,819	3,383	3,056	1,757	27,492
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	9,733	9,049	6,918	5,181	1,233	32,114
11	Total support. Add lines 7 through 10	57.55		7,5=0	0/101		10,378,381
12	Gross receipts from related activities, etc. (s	ee instructions)	• • • • • • • • •			12	
13	First five years. If the Form 990 is for the or organization, check this box and stop here	rganization's first, s					
Sec	tion C. Computation of Public Su	pport Percent	tage				
14	Public support percentage for 2012 (line 6, c	column (f) divided b	y line 11, column (f))		14	45.91 %
15	Public support percentage from 2011 Sched	ule A, Part II, line 1	4			15	65.70 %
16a	• • • • • • • • • • • • • • • • • • • •						_
	box and stop here. The organization qualifie	es as a publicly sup	ported organization				· · · · 🕨 🖾
b	33 1/3% support test - 2011. If the organization						_
	check this box and stop here. The organiza						▶ 📙
17a	10%-facts-and-circumstances test - 2012						
	10% or more, and if the organization meets				-		
	Part IV how the organization meets the "fact			•			_
	organization						▶ 📙
b	10%-facts-and-circumstances test - 2011. 15 is 10% or more, and if the organization m	•				e	
	Explain in Part IV how the organization mee	ts the "facts-and-cii	rcumstances" test.	The organization q	ualifies as a publicl	у	
18	supported organization						· · · · ▶ □
	instructions						m

990 or 990-EZ) 2012 OREGON STATE ELKS ASSOCIATION TRUST
Support Schedule for Organizations Described in Section 509(a)(2) Part III

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

Se	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or bus under sec 513 · · · ·						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	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 for the year						
C	Add lines 7a and 7b · · · · · · · · · · ·						
8	line 6)			***			
	ction B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6				<u> </u>		
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b · · · · · · · · · ·						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
	First five years. If the Form 990 is for the organization, check this box and stop here						
	ction C. Computation of Public Su						
15	Public support percentage for 2012 (line 8, co		•	•			<u>%</u>
16	Public support percentage from 2011 Schedu				• • • • • • • • • • • • • • • • • • • •	. 16	%
	ction D. Computation of Investme			(0)		1.4=1	
17 18	Investment income percentage for 2012 (line Investment income percentage from 2011 Sc			olumn (f))		· 17	<u>%</u>
	33 1/3% support tests - 2012. If the organiza	ation did not checi	k the box on line 14	, and line 15 is mo	re than 33 1/3%, a	ind line	
b	17 is not more than 33 1/3%, check this box a 33 1/3% support tests - 2011. If the organization 18 is not more than 33 1/3%, check this b	ation did not checl	k a box on line 14 c	r line 19a, and line	16 is more than 3	3 1/3%, and	□
20	Private foundation. If the organization did no	•	-	•	• • •		<u>* </u>

SCHEDULE C' (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below.

See separate instructions.

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

	Section 501(c)(4), (5), or (6) organizations	Complete Part III				
Nam	e of organization			Employer	identification number	
	EGON STATE ELKS ASSOCIATION			93-111		
Pa	rt I-A Complete if the organ	ization is exempt under section	on 501(c) or is	a section 527 org	anization.	
1	Provide a description of the organization's					
2	Political expenditures	• • • • • • • • • • • • • • • • • • • •		· · · · · · · · •		
3	Volunteer hours	• • • • • • • • • • • • • • • • • • • •		<i></i>		
Pa		ization is exempt under secti				
1	Enter the amount of any excise tax incurre	ed by the organization under section 495	5			
2	Enter the amount of any excise tax incurre	ed by organization managers under secti	on 4955 · · ·	\$		
3	If the organization incurred a section 4955	tax, did it file Form 4720 for this year?	• • • • • • • •		· 🗌 Yes 🗵 No	
4a	Was a correction made?	• • • • • • • • • • • • • • • • • • • •			· · 🗌 Yes 🔃 No	
_b	If "Yes," describe in Part IV					
		ization is exempt under section		ept section 501(c)	[3).	
1	Enter the amount directly expended by the	e filing organization for section 527 exem	pt function			
	activities			· · · · · · ·		
2	Enter the amount of the filing organization	-				
	527 exempt function activities · · · · ·			· · · · · · · · ▶ \$		
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL,					
	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b · · · · · · · · · · · · · · · · · · ·					
4						
5	Enter the names, addresses and employe	` ,			•	
	organization made payments For each or					
	the amount of political contributions receiv		•			
	as a separate segregated fund or a politic	al action committee (PAC) If additional s	space is needed, pi	ovide information in Part	IV	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If	
					none, enter -0-	
(1)						
(2)						
(3)						
(4)						
(5)						
(6)			··· · · · · · · · · · · · · · · · ·			

Sche	dule C (Form 990 or 990-EZ) 2012 OREGON STATE	ELKS ASSOCIA	TION TRUST		93-11172	
Pa	rt II-A Complete if the organizatio	n is exempt un	ider section 50	1(c)(3) and filed	Form 5768 (elec	tion under
	section 501(h)).					
A	Check If the filing organization belongs to				mber's	
	name, address, EIN, expenses, ar			•		
В	Check If the filing organization checked be			у	,	
		bying Expenditures			(a) Filing	(b) Affiliated
	(The term "expenditures" n	neans amounts pai	d or incurred.)		organization's totals	group totals
1a	Total lobbying expenditures to influence public op	inion (grass roots lo	bbying) · · · ·			
þ	Total lobbying expenditures to influence a legislat	ive body (direct lobb	yıng) · · · · ·			
С	Total lobbying expenditures (add lines 1a and 1b)					
d	Cirio, exempt par page experience					
е	Total exempt purpose expenditures (add lines 1c	and 1d) · · · ·				
f	Lobbying nontaxable amount Enter the amount f	rom the following tal	ble in both			
	columns					<u> </u>
	If the amount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amoun	t is:		
	Not over \$500,000	20% of the am	ount on line 1e		. 1	
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess of	over \$500,000	·	
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess of	over \$1,000,000		•
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess ov	er \$1,500,000		
	Over \$17,000,000	\$1,000,000.				
g	Grassroots nontaxable amount (enter 25% of line	e 1f) • • • • • •				
h	Subtract line 1g from line 1a If zero or less, enter	r-0- · · · · ·				
j	Subtract line 1f from line 1c If zero or less, enter	-0-				
j	If there is an amount other than zero on either line	e 1h or line 1i, did th	ie organization file F	orm 4720		
	reporting section 4911 tax for this year?					Yes No
	(Some organizations that	made a section 50				
	Lobb	ying Expenditures	During 4-Year Aver	aging Period		
	Calendar year (or fiscal year	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
	beginning in)					
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column (e))					
С	Total lobbying expenditures					
d	Grassroots nontaxable amount					
е	Grassroots ceiling amount (150% of line 2d, column (e))				,	
f	Grassroots lobbying expenditures					

Page 3 OREGON STATE ELKS ASSOCIATION TRUST 93-1117289 Schedule C (Form 990 or 990-EZ) 2012 Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)). (b) (a) For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed Yes No Amount description of the lobbying activity Dunng the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of Χ Volunteers? Х Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Χ Χ d Mailings to members, legislators, or the public? Х Publications, or published or broadcast statements? Х Grants to other organizations for lobbying purposes? X g Direct contact with legislators, their staffs, government officials, or a legislative body? Χ Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Х Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? Х 2a If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section Part III-A 501(c)(6). Yes No 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section Part III-B 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2c Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3 3 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying Supplemental Information Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

SCHEDULE D. (Form 990)

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.

2012

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Attach to Form 990. See separate instructions.

Open to Public Inspection

	of the organization	Employer identification number		
	GON STATE ELKS ASSOCIATION TRUST	93-1117289		
Pa	Organizations Maintaining Donor Advised Funds or Other Similar Funds or Account	ts. Complete if the		
	organization answered "Yes" to Form 990, Part IV, line 6.			
	(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 to the organization's exclusive legal control?			
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used			
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose			
	conferring impermissible private benefit?			
Pai				
1	Purpose(s) of conservation easements held by the organization (check all that apply)			
	Preservation of land for public use (e.g., recreation or education) Preservation of an historically	Important land area		
	Protection of natural habitat	•		
	Preservation of open space			
2	2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the 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 easements	2b		
С	Number of conservation easements on a certified historic structure included in (a)	2c		
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a			
_	historic structure listed in the National Register	2d		
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization			
	tax year	autori during trie		
4	Number of states where property subject to conservation easement is located			
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of			
	violations, and enforcement of the conservation easements it holds?			
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the	— —		
•	the state and volunteer hours devoted to monitoring, inspecting, and emotioning conservation casements during the	year		
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year			
•	\$			
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)			
•	(i) and section 170(h)(4)(B)(ii)? $\cdots \cdots	— — — — — — — — — — — — — — — — — — —		
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense statements			
•	balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that of			
	organization's accounting for conservation easements	rescribes trie		
Pa	rt III Organizations Maintaining Collections of Art, Historical Treasures, or Oth	er Similar Assets		
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8			
	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and	halance sheet		
	works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furth			
	public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items			
ь	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and bala			
-	works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furth			
	public service, provide the following amounts relating to these items			
	(i) Revenues included in Form 990, Part VIII, line 1	c		
,	(ii) Assets included in Form 990, Part X	· · · · · · • • • • • • • • • • • • • •		
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, pr	rovide the		
	following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	•		
a	Revenues included in Form 990, Part VIII, line 1	P ————		
_ь	Assets included in Form 990, Part X	· · · · · , \$		

	tle D (Form 990) 2012 * OREGON STATE ELKS			93-1117	
Pai	t III Organizations Maintaining Colle	ections of Art, Histo	rical Treasures, o	or Other Similar Ass	ets (continued)
3	Using the organization's acquisition, accession, and o	ther records, check any of	the following that are a	significant use of its	
	collection items (check all that apply)				
а	Public exhibition	d Loan or exchai	nge programs		
b	Scholarly research	e Dother			
С	Preservation for future generations				
4	Provide a description of the organization's collections	and explain how they furth	er the organization's ex	empt purpose in Part	
	XIII				
5	During the year, did the organization solicit or receive	donations of art, historical	treasures, or other simi	lar	
	assets to be sold to raise funds rather than to be mail	ntained as part of the orgai	nization's collection?		Yes No
Pai	assets to be sold to raise funds rather than to be mail t IV	nents. Complete if t	he organization ar	swered "Yes" to For	m 990, Part IV,
	line 9, or reported an amount on F	orm 990, Part X, line	2 1.		
1a	Is the organization an agent, trustee, custodian or oth	er intermediary for contribi	utions or other assets no	ot	
	included on Form 990, Part X?				Yes No
b	If "Yes," explain the arrangement in Part XIII and com	plete the following table			
				Am	ount
С	Beginning balance			· 1c	
d	Additions during the year			. 1d	
9	Distributions during the year				
f	Ending balance				
2a	Did the organization include an amount on Form 990,				· · Yes No
b	If "Yes," explain the arrangement in Part XIII Check h		been provided in Part XI	III	
Pai					
	 ·- <u>-</u>) Current year (b) Prid	· · · · · · · · · · · · · · · · · · ·	<u> </u>	(e) Four years back
1a	Beginning of year balance	, , , , , , , , , , , , , , , , , , , ,	(0) (100)	(4)	(3) (32) (32)
b	Contributions				
c	Net investment earnings, gains, and				
_	losses				
d	Grants or scholarships				
e	Other expenditures for facilities and				
•	programs				
f	Administrative expenses				
g	End of year balance				
2	Provide the estimated percentage of the current year	end halance (line 1g. colu	mn (a)) held as		
- a	Deard decimated as allege and surpost	%	mm (a)) neid as		
h	2				
•	Temporarily restricted endowment	%			
·	The percentages in lines 2a, 2b, and 2c should equal				
3a	Are there endowment funds not in the possession of it		ald and administered for	the	
Ju	organization by	ine organization that are th	cia ana aaministerea for	uic	Yes No
	(i) unrelated organizations · · · · · · · · · · · · · · · · · · ·				. 3a(i)
	(ii) related organizations				. 3a(ii)
b	• •	required on Schodule P3	· · · · · · · · · · · · · · · · · · ·		
b	If "Yes" to 3a(ii), are the related organizations listed as				. 3b
Par	Describe in Part XIII the intended uses of the organization Land, Buildings, and Equipmen		rt Y Juno 10		
rai					
	Description of property	(a) Cost or other basis	(b) Cost or other basis	(c) Accumulated	(d) Book value
_		(investment)	(other)	depreciation	
1a	Land				
b	Buildings				
C	Leasehold improvements				
d	Equipment		12,997	5,662	7,335
<u>e</u>	Other		<u> </u>		
<u>Total</u>	. Add lines 1a through 1e (Column (d) must equal Fo	rm 990, Part X, column (B), line 10(c)) · · ·		7,335

1.	(a) Description of liability	(b) Book value
(1) Federal	income taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		-
(8)		
(9)		
(10)		
(11)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	

2. FIN 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Par	rt XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	Retur	n
1	Total revenue, gains, and other support per audited financial statements	1	2,421,840
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	1	
С	Recovenes of pnor year grants	1	
d	Other (Describe in Part XIII)]	
е	Add lines 2a through 2d · · · · · · · · · · · · · · · · · ·	2e	
3	Subtract line 2e from line 1 · · · · · · · · · · · · · · · · · ·	3	2,421,840
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)	1	
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	2,421,840
Par	t XII Reconciliation of Expenses per Audited Financial Statements With Expenses	er Re	turn
1	Total expenses and losses per audited financial statements	1	2,376,592
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities]	
b	Pnor year adjustments]	
С	Other losses]	
d	Other (Describe in Part XIII.)]	
8	Add lines 2a through 2d	2е	
3	Subtract line 2e from line 1	3	2,376,592
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]	
b	Other (Describe in Part XIII)		
C	Add lines 4a and 4b · · · · · · · · · · · · · · · · · ·	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	2,376,592
Par	t XIII Supplemental Information		
Part \	plete 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 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 addition		
HIOH	nation		
-			

Page 4

Schedule D (Form 990) 2012

93-1117289

' OREGON STATE ELKS ASSOCIATION TRUST

Schedule D (Form 990) 2012

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SCHEDULEI (Form 990)

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

OMB No 1545-0047 2012

Open to Public

Department of the Treasury Internal Revenue Service

Internal Revenue Service		4	Attach to Form 990.			-	Inspection
Name of the organization		•				Employer identification number	number
Į.	TRUST					93-1117289	
Parti General Information on Grants and Assistance	Grants and ASSIR	stance					
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	o substantiate the amou	ınt of the grants or assıst	tance, the grantees' eliq	jibility for the grants or	assistance, and		
the selection criteria used to award the grants or assistance?	rants or assistance?						· 🔯 Yes 🗆 No
흸	cedures for monitoring	the use of grant funds in	the United States				
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization Part IV line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	tance to Governr sciplent that receiv	nents and Organiz ed more than \$5.00	zations in the Un 00. Part II can be c	ited States. Comp Jublicated if addition	and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, re than \$5,000. Part II can be duplicated if additional space is needed	tion answered "Y	es" to Form 990,
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation (book, FMV, appraisal,	(g) Description of non-cash assistance	(h) Purpose of grant
(1)CAMP MEADOWOOD SPRINGS					other)		
PO BOX 1025 97801	93-6033853	501 (C) (3)	25,150				OPERATIONAL
(2)							
(3)							
(4)							
(5)							
(9)							
(7)							
(8)							
(6)							
(10)							
(11)							
(12)	1						
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3 Enter total number of other organizations listed in the line 1 table	nd government organizations	ations listed in the line 1 t	able			▲ .	
تفا	e Instructions for Forn	n 990.				ŭ	Schedule I (Form 990) (2012)

EEA

Page 2 (f) Description of non-cash assistance 990/2012) OREGON STATE ELKS ASSOCIATION TRUST
Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional (e) Method of valuation (book, FMV, appraisal, other) non-cash assistance (d) Amount of The monies are sent directly to the schools(universities or trade schools) for tuition assistance. If the individual does not use the money towards paying (c) Amount of cash grant tuition then the school issues a refund to the organization. Part III can be duplicated if additional space is needed 1. Monitoring procedures (Part I, line 2) (b) Number of recipients (a) Type of grant or assistance information. Schedule I (Form 990) (2012)
Part III Grants Part IV

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Schedule I (Form 990) (2012)

SCHEDULE O (Form 990 or 990-EZ)

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.

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization Attach to Form 990 or 990-EZ.

Name of the organiza	ion	Employer identification number						
OREGON STA	REGON STATE ELKS ASSOCIATION TRUST 93-1117289							
01. Committee meeting documentation (Part VI, line 8b)								
OI. COMM	ricee meeting documentation (Part VI, line 8D)	<u> </u>						
Committee	Committee meeting makes procedural recommendations to governing body							
								
	· · · · · · · · · · · · · · · · · · ·							
02. Form	990 governing body review (Part VI, line 11)							
Treasurer	eviews form 990 and reviews with governing body							
02 0= 0		10.						
U3. Conf	lict of interest policy compliance (Part VI, line	12C)						
Executive .	ecretary and Treasurer monitors and reports to governing body a	ny transaction						
that would	violate conflict of interest policy. Governing body has final a	pproval.						
0.4 000		12 15-1						
04. CEO,	executive director, top management comp (Part VI	., line iba)						
The govern	ng body reviews all key employees and their compensation package	ge.						
<u> </u>								
05. Othe	r officer or key employee compensation (Part VI,	line 15b						
		. •						
ror key em	ployees and other officer compensation the governing body review	s their						
compensati	n package.							
								
06. Gove	rning documents, etc, available to public (Part V	/I, line 19)						
0								
Governing	ocuments are available to the public and membership.							



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