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Form **990-EZ****Short Form**
Return of Organization Exempt From Income TaxUnder 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.

Department of the Treasury
Internal Revenue Service

OMB No 1545-1150

2012**Open to Public
Inspection****A** For the 2012 calendar year, or tax year beginning May 1, 2012, and ending April 30, 2013**B** Check if applicable

- ☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization

Loyal Order of Moose International #1106

Number and street (or P O box, if mail is not delivered to street address)

1577 Oak Avenue

City or town, state or country, and ZIP + 4

Klamath Falls, OR 97601

D Employer identification number

93-016838

E Telephone number

541-883-3762

F Group Exemption

Number ▶

G Accounting Method ☒ Cash ☐ Accrual Other (specify) ▶**I** Website: ▶**J** Tax-exempt status (check only one) — ☒ 501(c)(3) ☒ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527**H** Check ☒ if the organization is not
required to attach Schedule B
(Form 990, 990-EZ, or 990-PF)**K** Check ☒ if the organization is not a section 509(a)(3) supporting organization or a section 527 organization and its gross receipts are normally
not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if
the organization chooses to file a return, be sure to file a complete return.

Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II,

line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ.

▶ \$

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)Check if the organization used Schedule O to respond to any question in this Part I ☐

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	
	2	Program service revenue including government fees and contracts	2	44745
	3	Membership dues and assessments	3	1480
	4	Investment income	4	32
	5a	Gross amount from sale of assets other than inventory	5a	
	b	Less cost or other basis and sales expenses	5b	
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6	Gaming and fundraising events		
	a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
Expenses	b	Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	
	c	Less direct expenses from gaming and fundraising events	6c	
	d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	
	7a	Gross sales of inventory, less returns and allowances	7a	
	b	Less cost of goods sold	7b	
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
	8	Other revenue (describe in Schedule O)	8	
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	46257
	10	Grants and similar amounts paid (list in Schedule O)	10	
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	
Net Assets	14	Occupancy, rent, utilities, and maintenance	14	11171
	15	Printing, publications, postage, and shipping	15	1268
	16	Other expenses (describe in Schedule O)	16	31844
	17	Total expenses. Add lines 10 through 16	17	44283
	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	1974
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	87017
	20	Other changes in net assets or fund balances (explain in Schedule O)	20	6100
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	93117

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 106421

Form **990-EZ** (2012)

Part II **Balance Sheets** (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II . . .

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	4499	22 4198
23	Land and buildings	74499	23 74499
24	Other assets (describe in Schedule O)	13570	24 14099
25	Total assets	92568	25 88919
26	Total liabilities (describe in Schedule O)	5551	26 6100
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	87017	27 93117

Part III **Statement of Program Service Accomplishments** (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose? Charity for children and needy families

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses
(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)

28	The Lodge unites its members in the bonds of fraternity benevolence and charity. This is accomplished through year round schedule of social and recreational activities for the members and their families. Estimated membership around 200 (Grants \$) If this amount includes foreign grants, check here	28a
29	(Grants \$) If this amount includes foreign grants, check here	29a
30	(Grants \$) If this amount includes foreign grants, check here	30a
31	Other program services (describe in Schedule O) (Grants \$) If this amount includes foreign grants, check here	31a
32	Total program service expenses (add lines 28a through 31a)	32

Part IV List of Officers, Directors, Trustees, and Key Employees List each one even if not compensated (see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

[illegible]

Part V 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 question in this Part V ☐

	Yes	No
33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O		✓
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)		✓
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)?		✓
b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O		✓
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		✓
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		✓
37a Enter amount of political expenditures, direct or indirect, as described in the instructions	37a	N/A
b Did the organization file Form 1120-POL for this year?	37b	✓
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a	✓
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	N/A
39 Section 501(c)(7) organizations Enter		
a Initiation fees and capital contributions included on line 9	39a	N/A
b Gross receipts, included on line 9, for public use of club facilities	39b	N/A
40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911	N/A	
section 4912	N/A	
section 4955	N/A	
b Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	✓
c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		N/A
d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization		N/A
e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	✓
41 List the states with which a copy of this return is filed	Oregon	
42a The organization's books are in care of	Garry Lane	Telephone no
Located at	1577 Oak Avenue, Klamath Falls, OR	ZIP + 4
		541-883-3762
		97601
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	✓
If "Yes," enter the name of the foreign country		
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts .		
c At any time during the calendar year, did the organization maintain an office outside the U S ?	42c	✓
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 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year	43	<input type="checkbox"/>
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	✓
b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b	✓
c Did the organization receive any payments for indoor tanning services during the year?	44c	✓
d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d	✓
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	✓
45b 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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b	✓

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

	Yes	No
46		<input checked="" type="checkbox"/>

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47–49b and 52, and complete the tables for lines 50 and 51

Check if the organization used Schedule O to respond to any question in this Part VI ☐

47 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

	Yes	No
47		<input checked="" type="checkbox"/>

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

48		<input checked="" type="checkbox"/>
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49a Did the organization make any transfers to an exempt non-charitable related organization?

49a		<input checked="" type="checkbox"/>
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b If "Yes," was the related organization a section 527 organization?

49b		<input checked="" type="checkbox"/>
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50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

(a) Name and title of each employee paid more than \$100,000	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
N/A				

f Total number of other employees paid over \$100,000 **►** _____

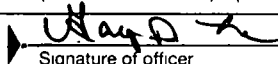
51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
N/A		

d Total number of other independent contractors each receiving over \$100,000 **►** _____

52 Did the organization complete Schedule A? **Note** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A **►** ☐ Yes ☒ No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here		12-13-13
	Signature of officer	Date
	Garry Lane Administrator	
	Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Nancy L. Miller EA				P00446503
	Firm's name ►	Firm's EIN ►			
	Firm's address ►	Phone no ►			

May the IRS discuss this return with the preparer shown above? See instructions **►** ☒ Yes ☐ No

	A	B	C	E
1	KLAMATH FALLS LOYAL ORDER OF MOOSE LODGE #1106			
2	FYE 4-30-13			
3				
4				
5				
6	OFFICERS			
7				
8	NAME	TITLE	HOURS	COMPENSATION
9	Doby Stork	Governor	10	0
10	Steve Warner	Past Governor	8	0
11	Dave Morton	Jr. Governor	5	0
12	Tom Yon	Prelate	2	0
13	Garry Lane	Administrator	15	0
14	Dale Musgrove	Treasurer	8	0
15	Phil Plumondore	Trustee 1 yr	2	0
16	Jake Strunk	Trustee 2 yr	2	0
17	Ernie Johnson	Trustee 3 yr	2	0

KLAMATH FALLS LOYAL ORDER OF MOOSE LODGE #1106

FYE 4-30-13

Form 990 – ez Line 20: Prior year adjustments to Liabilities

LOYAL ORDER OF MOOSE				
FORM 990-EZ WORKSHEETS				
BALANCE SHEET (PART 1)				
		EMPLOYER IDENTIFICATION		
		93-016838		
Cash Savings and Investments			Beg Yr	End Yr
Actual cash in checking			448	1997
Actual cash in savings			3701	1701
Petty cash			350	500
		Total (to part II line 22)	4499	4198
Land and Buildings				
Amount invested in Lodge home & other Real Estate			74499	74499
Furniture and Fixtures, Paaraphanalia			12042	12892
		Total (to part II line 23)	86541	87391
Other Assets:				
Inventory Social Quarters Merchandise			1207	1207
Inventory Kitchen Merchandise			321	321
Inventory Lodge Merchandise				
Emblems				
NSF checks				
		Total (to part II Line 24)	1528	1528
Total Liabilities:				
First Mortgage indebtedness on Real Estate				
Other Mortgage indebedness				
Notes Payable				
Indebtedness on Furniture & Fixtures				
Compensation due Administrator				
Other lodge bills				
Indebtedness House Committee Merchandise				
Other Unpaid House Committee Bills				
Moose International indebtedmess			7400	6100
		Total (to part II Line 26)	7400	6100

LOYAL ORDER OF MOOSE			
FORM 990-EZ WORKSHEETS			
BALANCE SHEET (PART 2)			
		EMPLOYER IDENTIFICATION	
		93-016838	
Actual Cash-General Checking	1997		
Actual Cash-Other Auth. Checking			
Escrow			
Petty Cash	500		
N S F Checks			
Inventory-Social Quarters	1207		
Inventory-Food Services	321		
Inventory-Other			
Lodge Home/Building	74499		
Other Property/Real Estate			
Furniture & Fixtures	12892		
Leasehold/Bldg. Improvements			
Other Receivables			
Security Deposits			
CD's Savings etc	1701		
TOTAL ASSETS (Sum of Lines 1-21)	93117		
Accounts Payable			
Notes Payable			
Indebtedness on Furniture & Fixtures			
Moose International Indebtedness	6100		
Life Membership			
Endowment Fund			
Compensation due Administrator			
Monies Due to Other Units			
Unpaid Interest			
Real Estate Tax			
First Mortgage Indebtedness on Real Estate			
Other Mortgage Indebtedness			
Certificate of Indebtedness			
TOTAL LIABILITIES (Sum of Lines 1-19)	6100		
NET ASSETS (Total Asseets less Total Liabilities)	87017		
TOTAL (Must be same as TOTAL ASSETS)	93117		

LOYAL ORDER OF MOOSE			
FORM 990-EZ WORKSHEETS			
Receipts			
EMPLOYER IDENTIFICATION			
93-016838			
DESCRIPTION			
A. Collections for Mooseheart or Moosehaven the Endowment Fund, Lodge Building fund, Charities, etc.			
TOTAL (To Part 1, Line 1)		0	
B. Entertainment			
Merchandise Sales		27330	
Member Gaming			
Other Fund Raisers (List separately)		17415	
TOTAL (To Part 1, Line 2)		44745	
C. Membership Dues		1480	
Enrollment and Other Fees			
Life Membership Fees			
TOTAL (To Part 1, Line 3)		1480	
D. Interest on Investments-including savings accounts		32	
TOTAL (To Part 1, Line 4)		32	
E. Income from Sales of Assets (other than inventory)			
Gross Sales Price			
Less: Cost or other basis and sales expenses			
Gain (Loss) (To Part 1, Lines 5 a,b, & c)			
Net Income or (Loss) (To part 1, Lines 6 a,b, & C)		46257	

LOYAL ORDER OF MOOSE						
FORM 990-EZ WORKSHEETS						
Expenses						
		EMPLOYER IDENTIFICATION				
		93-016838				
DESCRIPTION		AMOUNT		DESCRIPTION		AMOUNT
F Moose International				K Printing & Publications		447
Mht/Mhn Endowment Fund				Shipping & Postage		821
Life Membership Fee						
Donations				TOTAL (To Line 15)		1268
Miscellaneous Donations						
				L Other Expenses		
TOTAL (To Line 10)		0		Conferences/Conventions & Meetings		370
G Sick Benefits				Interest on Indebtedness		
Funerals				Repairs		1050
				Entertainment		794
				State Association Dues		622
TOTAL (To Line 13)				Advertising		50
				State Tax		
J Bar, Office, & Other expenses	1078			Other Taxes		50
Telephone				Flowers		
Other Utilities	7243			Prizes		
Other Insurance	2850			Bank Charges		239
Equipment Rental & Maintenance				Licenses		261
Rents				Paid for Merchandise		16808
Real Estate Taxes				Other (List)		
				Internet		161
TOTAL (To Line 14)	11171			Cash over/short		-18
				Fund Raising Expenses		11285
				Special Project		172
				TOTAL (To Line 16)		31844