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Short Form
Return of Organization Exempt From Income Tax

OMB No 1548-1150

2012

Open to Public
InspectionDepartment of the Treasury
Internal Revenue Service

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

► 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.

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	D Employer identification number 93-016838
Number and street (or P O box, if mail is not delivered to street address) 1577 Oak Avenue	Room/suite 541-883-3762
City or town, state or country, and ZIP + 4 Klamath Falls, OR 97601	F Group Exemption Number ► 83 0002

G Accounting Method Cash Accrual Other (specify) ►

I Website: ►

J Tax-exempt status (check only one) — 501(c)(3) 501(c)(4) (insert no) 4947(a)(1) or 527

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	
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	
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)

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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
23 Land and buildings	74499	23
24 Other assets (describe in Schedule O)	13570	24
25 Total assets	92568	25
26 Total liabilities (describe in Schedule O)	5551	26
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 ► <input type="checkbox"/>	28a
29	_____	
30	_____	
31	Other program services (describe in Schedule O) (Grants \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	31a
32	Total program service expenses (add lines 28a through 31a) ► <input type="checkbox"/>	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

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
SEE ATTACUED SCHEDULE				

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	33	✓
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)	34	✓
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a	✓
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	35b	✓
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c	✓
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36	✓
37a Enter amount of political expenditures, direct or indirect, as described in the instructions ► 37a N/A	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	39a	N/A
a Initiation fees and capital contributions included on line 9	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	40b	✓
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		
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 ► 541-883-3762	
Located at ► 1577 Oak Avenue, Klamath Falls, OR	ZIP + 4 ► 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)? If "Yes," enter the name of the foreign country ►	Yes	No
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts .	42b	✓
c At any time during the calendar year, did the organization maintain an office outside the U.S.? If "Yes," enter the name of the foreign country ►	Yes	No
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 – Check here ► <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ► 43		
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	✓

		Yes	No
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	46	✓

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

		Yes	No
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	47	✓
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	✓
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a	✓
b	If "Yes," was the related organization a section 527 organization?	49b	✓
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 ► _____

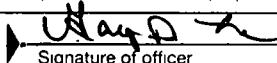
51	Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"
----	---

(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
	► <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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	Date
	Signature of officer	Garry Lane Administrator		
	Type or print name and title			
Paid Preparer Use Only	Print/Type preparer's name Nancy L. Miller EA	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed PTIN P00446503
	Firm's name ►	Firm's EIN ►		Phone no
	Firm's address ►			

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 indebtedness				
Notes Payable				
Indebtedness on Furniture & Fixtures				
Compensation due Administrator				
Other lodge bills				
Indebtedness House Committee Merchandise				
Other Unpaid House Committee Bills				
Moose International indebtedness		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		
NS 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 Assets 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