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Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 2012

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

_														
<u>A</u>	For t	he 2012 calen	far year, or tax year beginning $Jul 1$, 2012, and ending	g Jun	30		2013							
В	Check	ıf applicable	C Name of organization BOURG LIONS CLUB		D Employ	er Identifi	cation Number							
	∐ A	ddress change	Doing Business As		72-	60557	96							
	N	lame change	Number and street (or P O box if mail is not delivered to street addr) Room/s	suite	E Telepho	ne numbe	r							
	Ir	nitial return	111 RETEAT DRIVE		(98	(985) 594-2054								
	Пт	erminated	City, town or country State ZIP code + 4	1	, , , ,									
	A	mended return	BOURG LA 70343-	-3414	G Gross r	eceipts \$	225,607	1.						
	\square_{A}	pplication pending	F Name and address of principal officer		a group retur									
	لــا		RANDOLPH BASCLE 111 RETREAT DR BOURG LA 70343	H(b) Are all	affiliates incl attach a list	uded?		—						
$\overline{}$	Tax	-exempt status	501(c)(3) X 501(c) (4) ◀ (insert no) 4947(a)(1) or 527	If 'No,'	attach a list	(see instri	uctions)							
÷		bsite: N/	· · · · · · · · · · · · · · · · · · ·	H(a) Craus	exemption nu	mbar ►	0239							
K		m of organization	X Corporation Trust Association Other L Year of Formal											
	art I			110n 1961	U III S	tate of leg	al domicile LA	· -						
	1	Summar Briefly descri		TTON O	ADDIDO									
		-	pe the organization's mission or most significant activities <u>ORGANIZA</u> <u>ES_TO_RAISE_FUNDS_FOR_OPERATION_OF_PHYSICAL_</u> E				SAMING							
Activities & Governance			UNDS FOR CASH GRANTS TO VARIOUS CHARITIES AND NON-PROFIT CAUSES AT											
Ĕ			TATE AND NATIONAL LEVELS.	.0.1.1.	-WOSES			. – – – .						
Š	2		x If the organization discontinued its operations or disposed of more	e than 259		t assets		. – – –						
ဗိ	3		ting members of the governing body (Part VI, line 1a)	0 41011 20	70 01 165 116	3	,	10						
∞	4		dependent voting members of the governing body (Part VI, line 1b)			4		10						
į.	5	Total number	of individuals employed in calendar year 2012 (Part V, line 2a)			5		0						
Ž	6	Total number	of volunteers (estimate if necessary)			6		16						
Ą	1		d business revenue from Part VIII, column (C), line 12			7a		0.						
	b	Net unrelated	business taxable income from Form 990-T, line 34			7b								
1				P	rior Year		Current Yo	ear						
0	8		and grants (Part VIII, line 1h)		3,2	77.	2	,258.						
Revenue	9	-	ice revenue (Part VIII line 2a)	<u> </u>				_						
9 9	10	Investment in	come (Part VIII, column (A), lines 3, 4, and 7d) NOV 1 9 2042	l		21.		548.						
, Œ	11		e (Part VIII, column (A), lines 5, 6d, 8c, 900 Oc, And 11e) 8 2013		41,3	83.	17	,188.						
·	12		- add lines o through 11 (must equal part tent column (A), line 12)		45,5	81.	19	,994.						
)	13		milar amounts paid (Part IX, column (A), lines (18)	·	23,1	73.	23	,160.						
	14	Benefits paid	to or for members (Part IX, column (A), Hine 4)											
Ø	15	Salaries, other	r compensation, employee benefits (Part IX, column (A), lines 5-10)											
Expenses	16 a	Professional	undraising fees (Part IX, column (A), line 11e)											
ē	b	Total fundrais	ing expenses (Part IX, column (D), line 25) ►0.		%.	iş. K								
ũ	17		es (Part IX, column (A), lines 11a-11d, 11f-24e)		22,2	72	1.2	,079.						
	18	,	es Add lines 13-17 (must equal Part IX, column (A), line 25)		45,4			,239.						
	19		expenses Subtract line 18 from line 12	<u> </u>		36.								
8		1101011001000	expenses outstact the remaining 12	D			End of Ye	,245.						
Net Assets	20	Total assets	Part X, line 16)	beginnin	g of Curren									
Šě	21		s (Part X, line 26)		206,6	04.	191	<u>,359.</u>						
ž	22			-										
	22		fund balances Subtract line 21 from line 20	<u> </u>	206,6	04.	191	<u>,359.</u>						
	art II	Signatui												
Unc	er pena iplete D	ilties of perjury, I d Declaration of prepa	clare that I have examined this return, including accompanying schedules and statements, and to rer (other than officer) is based or all information of which preparer has any knowledge	the best of m	ny knowledge	and belief	f, it is true, correc	t, and						
			usered Ma Harrisa	·	1110	/3								
۵.		Signatu	e of officer	Dat Dat	1-1-1-1	-/3								
51	gn ere	. 1												
П	ere	Type of	print name and title											
				1		T 107								
			reparer's name Preparer's signature Prate		Check X	ן "נ								
Pa			P. LeBOEUF MAKELWE. Selection 10/23/	13	self-employe	d P	01246576							
Pr	epar	er Firm's name												
US	e Or	11y Firm's addr			Firm's EIN	27-3	<u> 3926596</u>							
			Gibson LA 70356-3316		Phone no	(985)	575-831	78						
640	v the	IRS discuss th	s return with the preparer shown above? (see instructions)				X Yes	No						

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2012)

TEEA0101 05/09/13

4 e							
	(Expenses \$ Total program service expenses ▶	23,160.	· · ·			/	
4 d	Other program services (Describe in S (Expenses \$	including grants of \$) (Revenue)	ne \$			١	
					 	- - -	
					-		
				 - -			
							´
4 c	(Code:) (Expenses \$	including grants of \$) (Revenue	\$)
					. – – –	. – – .	
					· — — –	. – – .	
					. - -	. .	:
						· – – ·	:
40		AND NATIONAL CHARITIES & SCHOLARSHIPS		¥	 _	 -	
	(Code) (Expenses \$	4,500. including grants of \$ 4,500) (Revenue	s			0.)
						·	-
						. .	
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					- - -		
						· ·	
						· ·	
	CONTESTED TOWN TO ANKION	5 LION 5 CHARIILES & ACTIVITIES					
4 a	(Code:) (Expenses \$	18,660. including grants of \$ 18,660 S LION'S CHARITIES & ACTIVITIES	(Revenue	۶			<u>0.</u>)
	others, the total expenses, and revenue	e, if any, for each program service reported	amount or g	unto al	.a anot		
4	Describe the organization's program se Section 501(c)(3) and 501(c)(4) organi	ervice accomplishments for each of its three largest program zations and section 4947(a)(1) trusts are required to report the	services, as m	easured	by ex	pense	s s to
	If 'Yes,' describe these changes on Sch	nedule O					
3		or make significant changes in how it conducts, any progran	n services?		Yes	x	No
	If 'Yes,' describe these new services or	n Schedule O		Ш	Yes	N.	No
2	Did the organization undertake any sign Form 990 or 990-EZ?	nificant program services during the year which were not liste	ed on the prior		Vac	F	No
	See Form 990, Page 2, Part III, Line 1				. .	· ·	
	ORGANIZATION CARRIES ON ACTIVITIES TO RAISE FUN	_GAMING DS FOR OPERATION OF PHYSICAL PLANT AN	D PROVIDI	 E			
1	Briefly describe the organization's miss						
		response to any question in this Part III					
Par	메일 Statement of Program Se	•					
	990 (2012) BOURG LIONS CLU		72-6	0557	96		age Z

Form 990 (2012) BOURG LIONS CLUB Part V 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		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
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? <i>If 'Yes,' complete Schedule C, Part II</i>	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5	х	
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		х
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		х
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		Х
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		х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable			
á	a Did the organization report an amount for land, buildings and equipment in Part X, line 10° If 'Yes,' complete Schedule D, Part VI	11 a	Х	
ł	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	11 b		Х
(Did the organization report an amount for investments — program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		X
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		Х
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		<u> </u>
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a		X
	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		<u>x</u>
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13		X
		14a		<u>X</u>
t	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		<u>x</u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15		_X
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		X
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	х	
20 a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		Х
b	olf 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

Form 990 (2012) BOURG LIONS CLUB

Part IV | Checklist of Required Schedules (continued)

		1	Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations 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 ⁹ If 'Yes,' complete Schedule I, Parts I and III	22		Х
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 employees? <i>If 'Yes,' complete Schedule J</i>	23		х
24	a 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, and 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		х
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		-
ı	c 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		
1	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a 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		х
	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? If 'Yes,' complete Schedule L, Part I	25b		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х
27	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		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		*	
	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
ļ	b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>	28b		Х
	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		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, Parts II, III, IV, and V, line 1	34		Х
35	a 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-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, 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	
BAA		Form	990 (2012)

<u>Pal</u>	T. V. Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V				٢
		· -		Yes	No
1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a () *		
ŧ	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b (
(Did the organization comply with backup withholding rules for reportable payments to vendors (gambling) winnings to prize winners?	and reportable gaming	1 c		ļ
2 a	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	2a		3 : .	
Ŀ	If at least one is reported on line 2a, did the organization file all required federal employment		2 b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see ins		***	W , .	Á
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year	·າ	3 a	· · · · · · · · · · · · · · · · · · ·	Х
Ŀ	olf 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O		3 b		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature of financial account in a foreign country (such as a bank account, securities account, or other financial account.	or other authority over, a nancial account)?	4 a	•	х
Ŀ	olf 'Yes,' enter the name of the foreign country.		-	1	`
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Fi) ;	P &,	%
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax	7	5 a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelte	r transaction?	5 b		X
•	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5 c		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, ar solicit any contributions that were not tax deductible as charitable contributions?	nd did the organization	6 a		х
t	If 'Yes,' did the organization include with every solicitation an express statement that such coinot tax deductible?	ntributions or gifts were	6 b		
7	Organizations that may receive deductible contributions under section 170(c).		- (1 ×	7 .	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and pa services provided to the payor?	artly for goods and	7 a	* * *	× X
t	of Yes, did the organization notify the donor of the value of the goods or services provided?		7 b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for wh	ich it was required to file	7 c		х
c	If 'Yes,' indicate the number of Forms 8282 filed during the year	7d	, ;	,	
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal be		7 e	المراسدية	x
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal bene		7 f		X
	If the organization received a contribution of qualified intellectual property, did the organizatio		<u> </u>		
_	as required?		7 g		
ŀ	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the $^{\circ}$ Form 1098-C?	organization file a	7 h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting supporting organization, or a donor advised fund maintained by a sponsoring organization, ha holdings at any time during the year?	g organizations. Did the ve excess business	8	* , 	*
9	Sponsoring organizations maintaining donor advised funds.		1 1 1 1 1		
а	Did the organization make any taxable distributions under section 4966?		9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9 b		
10	Section 501(c)(7) organizations. Enter			· 1/2	·.
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		30 m	<i>(</i>)
11	Section 501(c)(12) organizations. Enter				, ,
а	Gross income from members or shareholders	11 a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11 ь	, X		3
12 a	Section 4947(a)(1) non - exempt charitable trusts. Is the organization filing Form 990 in lieu o		12a		
	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b			š.
	Section 501(c)(29) qualified nonprofit health insurance issuers.			المستند	_4_
а	Is the organization licensed to issue qualified health plans in more than one state?	_	13a		
	Note. See the instructions for additional information the organization must report on Schedule	O			•
	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	13Ь			*
	Enter the amount of reserves on hand	13c	~ *	*	`
	Did the organization receive any payments for indoor tanning services during the tax year?	0	14a		X
b	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Sc	hedule O	14b		

72-6055796 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 X Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a 10 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad 3 authority to an executive committee or similar committee, explain in Schedule O **b** Enter the number of voting members included in line 1a, above, who are independent 10 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee? 2 X 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 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 X 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? 7 a Х b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? 7 b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? Х 8 a b Each committee with authority to act on behalf of the governing body? 8 h Х Is there any officer, director or 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code No Yes 10 a Did the organization have local chapters, branches, or affiliates? 10 a Х b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10 b Х 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11 a **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? 12h c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 12c 13 Did the organization have a written whistleblower policy? 13 X 14 Did the organization have a written document retention and destruction policy? Х 14 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? a The organization's CEO, Executive Director, or top management official 15a X **b** Other officers of key employees of the organization 15h X 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 Х 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 taken steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed Louisiana Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you make these available. Check all that apply Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year State the name, physical address, and telephone number of the person who possesses the books and records of the organization 111 RETREAT DR BOURG <u>LA _ 70343 _ _ _ (985) 594-4810</u>

orm	990	(2012)	BOURG	LIONS	CLUB

72-6055796

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Part VII | Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1 a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of 'key employee'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees; officers, key employees, highest compensated employees; and former such persons

Check this box if neither the organization	on nor any i	elated	lorg	ganız	atio	on com	pens	sated any current offic	cer, director, or truste	e
(A) Name and Title	(B) Average	ge one box, unless person is both an Reportable Reportable								(F) Estimated
	hours per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director		Officer	Key employee	Highest compensated employee		compensation from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(1) CURRY MATHERNS PRESIDENT	5.00			х				0.	0.	0.
(2) LERYES USIE SECRETARY	3.00			х				0.	0.	0.
(3) DOUGLAS BASCLE TREASURER (4)	4.00			х				0.	0.	0.
(6)										
<u></u>										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)						_				
(14)	-									

Form 990 (2012) BOURG LIONS CLUB Part VII. Section A. Officers, Directors, Trus		<u> </u>	E	le				d Winhart Com	72-60557	
Part VILISection A. Officers, Directors, Trus	(B)						anc			
(A) Name and title	Average hours per week	box, office	unle: cer ar	heck ss pe nd a	more rson direct	than or/trus	an tee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	Estimated amount of other compensation
	(list any hours for related	or director	nstututor	Officer	Key employee	righest c	omer	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
	organiza - tions below dotted line)	individual trustee or director	nstitutional trustee		loyee	Highest compensated employee				
(15)										
(16)						ļ				
(17)										
(18)										
(19)					-					
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
1 b Sub-total c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)	A						^ ^	0.	0	
2 Total number of individuals (including but not limiter from the organization	d to thos	se lis	ted	abo	ve) v	who r	ece			
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such ii			еу е	empl	oye	e, or	hıgl	hest compensated	employee	Yes No
For any individual listed on line 1a, is the sum of re the organization and related organizations greater to such individual.	portable	com	ipen 02 <i>li</i>	satı f 'Ye	on a	and o	ther ete	compensation fro Schedule J for	om	4 X
5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,' or	ompens	ation	froi edu	m ai le J	ny u <i>for</i> .	nrela such	ted <i>per</i>	organization or in	dıvıdual	5 X
1 Complete this table for your five highest compensation from the organization Report compe	ed inder	ende	ent d	cont	racte	ors th	at i	received more tha	n \$100,000 of	tax vear
(A) Name and business addres						, va.		(B) Description o		(C) Compensation
			-							
2 Total number of independent contractors (including \$100,000 in compensation from the organization ▶		lımıte	ed to	the	se I	ısted	abo	ove) who received	more than	

Check if Schedule O contains a response to any question in this Part VIII										
					1	(A) al revenue	(B) Related or exempt	(C) Unrelated business	(D) Revenue excluded from tax	
				* **		3		function revenue	revenue	under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a	Federated campaigns	T I	1 a		漫步		36	****	3
S S		Membership dues		1 b	686.					*
S S		Fundraising events	ł	1 c	000.	-	****	,		٩
등위		Related organizations		1 d			. Vî	7 9		
S E		Government grants (contribution	nns)	1 e						
5 2		-	ł			- 3	(), (· 1. ·	1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	.,
盟盟	f	All other contributions, gifts, g similar amounts not included	rants, and	1 f	1 570	* /	,		1	
200		Noncash contributions include			1,572.	-	1.4	*	1:3	
중록		Total. Add lines 1a-1f	u 111 1115 1a-1	f \$_						3.5%
		Total. Add lines 1a-11			Business Code	1	2,258.		3# C	11.
Ē	2 -			ŀ	Business Code					
뛴	2 a			- – –						ļ
띨	b			-		 		-		<u> </u>
8	C			-						
S	d			-	<u>. </u>	ļ				
꾩	е					<u> </u>				"
PROGRAM SERVICE REVENUE	t	All other program service	e revenue	; [<u>.</u>	ļ				
<u>-</u>	g	Total. Add lines 2a-2f			· · · · · · · · · · · · · · · · · · ·			7 W 3.	. i ida,	
	3	Investment income (incl	uding divi	dends,	, interest and					
İ		other similar amounts)					<u>548.</u>	548.	0.	0.
Í	4	Income from investment	t of tax-ex	empt t	oona proceeas 🕨					
	5	Royalties	0.0	1	1 ()	-	37 M58		. %	,
			(ı) Re		(II) Personal			A Secretary of the Secretary		*
		Gross rents		300	•		- ?" (1 ' 2	1.1.4	13*,
		Less rental expenses				-		~ ·		
		Rental income or (loss)		300	<u>. l</u>					
	d	Net rental income or (lo					300.	300.	0.	0.
	7 a	Gross amount from sales of	(ı) Secu	rities	(ii) Other	` *	N.			
		assets other than inventory				.]	, *	` *	~	
-	b	Less cost or other basis						*		/ 🔻
ĺ		and sales expenses				- 45	, 14	,,,,,	1.45	
		Gain or (loss)				%11.	<u>````</u>			****
	d	Net gain or (loss)			•	<u> </u>				
ш	8 a	Gross income from fund	raising ev	ents			*	*		
3		(not including \$					(e		**	
Ě		of contributions reported	on line I	c)			.			χ ⁸ , €
OTHER REVEN		See Part IV, line 18		a)		.a.	[, i	
둙		Less direct expenses		t	-					
	С	Net income or (loss) from	m fundrais	sing ev	vents ►	ļ		*18		
	9 a	Gross income from gam See Part IV, line 19	ing activit	ies			. 🗞 «.	 		
					217/231.	1	```\\\			
ł		Less: direct expenses		Ł	200,010.				<u> </u>	
- [C	Net income or (loss) from	m gamıng	activit	ties		13,618.	13,618.	0.	0.
- 1	10 a	Gross sales of inventory	, less retu	ırns			šž.	8,35	,	
		and allowances		a	27007.					A 4 1 1
		Less cost of goods sold		t	1		~ 	12	×	
	c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a			2,807.	2,807.	0.	0.			
-					*					
			ļ				<u> </u>			
	b					ļ				<u></u>
	С	T				<u> </u>		· · · · · · · · · · · · · · · · · · ·		
		All other revenue					463.	463.	0.	0.
	е	Total. Add lines 11a-11d			•		463.	. 5	*	, , , ,
l	12	Total revenue. See instr	uctions			<u> </u>	19,994.	17,736.	0.	0.

Form 990 (2012) BOURG LIONS CLUB Part IX | Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must comp

360	Check if Schedule O contains a r			must complete column (A).
		(A)	(B)	(C)	(D)
Do 1 7b,	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	23,160.	23,160.		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	25,100.	23,100.	* *	
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members		·		7 7 7
5	Compensation of current officers, directors, trustees, and key employees				* 1 de 1
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
a	Management		•		
	Legal				
	: Accounting	350.	0.	350.	0.
	Lobbying	330.	<u> </u>	330.	
	Professional fundraising services See Part IV, line 17		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	Investment management fees		* * * * * * * * * * * * * * * * * * * *	\$ '% _ /*	
g	Other. (If line 11g amt exceeds 10% of line 25, column (A) amt, list line 11g expenses on Sch 0) Advertising and promotion		-		
13					
14	Information technology				
15	Royalties		·		
16	Occupancy	6,650.	0.	6,650.	0
17	1	0,030.		6,630.	. 0.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings Interest	1,307.	1,307.	0.	0.
21	Payments to affiliates				
22	-	1,206.	0.	1,206.	0
	Insurance	1,200.		1,200.	0.
24	Other expenses Itemize expenses not		. \ \		*
	covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10%	,			
	of line 25, column (A) amount, list line 24e	* `*			
	expenses on Schedule O)	·^	A STATE OF THE STA	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	* (, , , , , , , , , , , , , , , , , , ,
а	DUES	944.	944.	0.	0.
b	SUPPLIES	82.	0.	82.	0.
C	TO RECONCILE	4.	0.	4.	0.
d					_
е	All other expenses	1,536.	0.	1,536.	0.
25	Total functional expenses. Add lines 1 through 24e	35,239.	25,411.	9,828.	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 following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check, if Schedule O contains a response to any question in this Part X (A) (B) Beginning of year End of year Cash - non-interest-bearing 1 1,756. 2,667 2 Savings and temporary cash investments 2 186,653 173,525. 3 Pledges and grants receivable, net 3 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 Notes and loans receivable, net 7 Inventories for sale or use R 8 9 Prepaid expenses and deferred charges 9 Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 1 to 1 10 a 115,887 b Less: accumulated depreciation 10b 10 c 99,809 17,284 16,078 Investments - publicly traded securities 11 11 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 13 Intangible assets 14 14 Other assets See Part IV, line 11 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 206,604 16 191,359 Accounts payable and accrued expenses 17 17 18 Grants payable 18 Deferred revenue 19 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, trustees, ş key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 24 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 25 26 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here ▶ ͺ·≮ **\$** 13 and complete lines 27 through 29, and lines 33 and 34. 4 Unrestricted net assets 27 27 Temporarily restricted net assets 28 28 Permanently restricted net assets 29 29 P Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. POZD Capital stock or trust principal, or current funds 30 30 Paid-in or capital surplus, or land, building, or equipment fund 31 B 31 32 Retained earnings, endowment, accumulated income, or other funds 206,604 32 191,359. Total net assets or fund balances 33 33 206,604 191,359. 34 Total liabilities and net assets/fund balances 206,604 34 191,359.

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Form 990 (2012)

Forr	m 990 (2012) BOURG_LIONS_CLUB	72-605579	6	Pa	ige 1 :		
Pa	rt XI Reconciliation of Net Assets						
	Check, if Schedule O contains a response to any question in this Part XI						
1	Total revenue (must equal Part VIII, column (A), line 12)	1		19,9	994.		
2	Total expenses (must equal Part IX, column (A), line 25)	2		35,2			
3	3 Revenue less expenses Subtract line 2 from line 1						
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		<u>15,2</u> 06,6			
5	Net unrealized gains (losses) on investments	5					
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain in Schedule O)	9					
10				-			
	column (B))	10	1	91,3	359.		
Pa	rt:XII Financial Statements and Reporting						
	Check if Schedule O contains a response to any question in this Part XII						
				Yes	No		
1	Accounting method used to prepare the Form 990 Cash Accrual Other		\$.X.	3.00	ý 1 ₈		
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain		177		*		
	in Schedule O				, *		
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a	Х			
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie separate basis, consolidated basis, or both'	wed on a			. * \$		
	Separate basis Consolidated basis Both consolidated and separate basis						
	b Were the organization's financial statements audited by an independent accountant?		2 ь		Х		
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa	arate		, , , , , , , , , , , , , , , , , , ,	3> °		
	basis, consolidated basis, or both			er e	~ 2		
	X Separate basis Consolidated basis Both consolidated and separate basis		3-14 25				
1	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of review, or compilation of its financial statements and selection of an independent accountant?	of the audit,	2 c	х			
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				u		
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in t	ne Single	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
	Audit Act and OMB Circular A-133?		3 a		X		
I	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the re or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired audit	3ь				

Form 990 (2012)

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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

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

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 35a (Proxy Tax), then

		rganizations Complete Part III	·					
Name	of organization			Employer identific	ation number			
BO	URG LIONS CLUB			72-605579	96			
Pa	rt I-A Complete if the o	rganization is exempt under secti	on 501(c) or is a	section 527 organi	zation.			
1	Provide a description of the	organization's direct and indirect political ca	impaign activities in F					
2	Political expenditures			► Ş	S			
3	Volunteer hours				· · · · · · · · · · · · · · · · · · ·			
Pa		rganization is exempt under secti						
1	•	ise tax incurred by the organization under s		► \$	S			
2	Enter the amount of any exci	se tax incurred by organization managers i	ınder section 4955	► \$	S			
3	If the organization incurred a	section 4955 tax, did it file Form 4720 for t	his year?		Yes No			
4 :	a Was a correction made?				Yes No			
	b If 'Yes,' describe in Part IV							
Pai	rt I-C Complete if the o	rganization is exempt under secti	on 501(c) , excep	t section 501(c)(3)	•			
1	Enter the amount directly exp	pended by the filing organization for section	527 exempt function	activities ► \$				
2	2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities							
3	3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ► \$							
4	4 Did the filing organization file Form 1120-POL for this year?							
5	Enter the names, addresses organization made payments amount of political contribute	and employer identification number (EIN) of For each organization listed, enter the amons received that were promptly and directly laction committee (PAC) If additional space	ount paid from the fil delivered to a separ	ing organization's funds ate political organization	Also enter the			
	(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)			-		-			

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2012

Schedule C ((Form 990 or	· 990-EZ) 2012	BOTTRC	TIONS	CTIIR

72-6055796 Page **2**

Part II-A Complete if section 501	(h)).	is exempt under sec	ction 501(c)(3) an	d filed Form 5768 (election under		
A Check ► ☐ If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name,							
	_	hare of excess lobbying e		3 ,			
B Check ► I If the fill	ng organization checke	ed box A and 'limited cont	rol' provisions apply.				
(The tern	Limits on Lobbying	g Expenditures s amounts paid or incurre	ed.)	(a) Filing organization's totals	(b) Affiliated group totals		
1 a Total lobbying expenditi	ures to influence public	opinion (grass roots lobb	oying)				
b Total lobbying expendition	ures to influence a legi	slative body (direct lobbyi	ing)				
c Total lobbying expenditi	ures (add lines 1a and	1b)			- '-		
d Other exempt purpose of	expenditures						
e Total exempt purpose e	expenditures (add lines	1c and 1d)					
f Lobbying nontaxable an both columns	nount Enter the amou	nt from the following table	e in				
If the amount on line 1e, col	lumn (a) or (b) is T	he lobbying nontaxable a	mount is	15. 10.	9 1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		
Not over \$500,000	20	0% of the amount on line 1e					
Over \$500,000 but not over \$1	\$1,000,000	100,000 plus 15% of the excess of	over \$500,000		and the state of t		
Over \$1,000,000 but not over		175,000 plus 10% of the excess of					
Over \$1,500,000 but not over		225,000 plus 5% of the excess or	ver \$1,500,000				
Over \$17,000,000		,000,000			A 5. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.		
g Grassroots nontaxable	·	•					
h Subtract line 1g from lin	•						
i Subtract line 1f from lin	,			L	<u> </u>		
j If there is an amount ot section 4911 tax for this		r line 1h or line 1i, did the	organization file Form	1 4720 reporting	П., П.,		
					Yes No		
(Sor	4- me organizations that i	Year Averaging Period Ur made a section 501(h) ele below. See the instructio	ction do not have to o		Yes No		
(Sor	4- ne organizations that columns	made a section 501(h) ele	ection do not have to cons for lines 2a throug	h 2f.)	Yes No		
Calendar year (or fiscal year beginning in)	4- ne organizations that columns	made a section 501(h) ele below. See the instructio	ection do not have to cons for lines 2a throug	h 2f.)	(e) Total		
Calendar year (or fiscal	4- ne organizations that columns Lobbyi	made a section 501(h) ele below. See the instructio ng Expenditures During 4	ection do not have to cons for lines 2a through- Pyear Averaging Peri	h 2f.) od			
Calendar year (or fiscal year beginning in) 2 a Lobbying non-taxable amount	4- ne organizations that columns Lobbyi	made a section 501(h) ele below. See the instructio ng Expenditures During 4	ection do not have to cons for lines 2a through- Pyear Averaging Peri	h 2f.) od			
Calendar year (or fiscal year beginning in) 2 a Lobbying non-taxable amount b Lobbying ceiling	4- ne organizations that columns Lobbyi	made a section 501(h) elebelow. See the instruction general Expenditures During 4 (b) 2010	ection do not have to cons for lines 2a through- Pyear Averaging Peri	h 2f.) od			
Calendar year (or fiscal year beginning in) 2 a Lobbying non-taxable amount	ne organizations that columns Lobbyi (a) 2009	made a section 501(h) ele below. See the instruction ng Expenditures During 4 (b) 2010	ection do not have to cons for lines 2a through-Year Averaging Periodic (c) 2011	h 2f.) od			
Calendar year (or fiscal year beginning in) 2 a Lobbying non-taxable amount b Lobbying ceiling amount (150% of line	ne organizations that columns Lobbyi (a) 2009	made a section 501(h) ele below. See the instruction mg Expenditures During 4 (b) 2010	ection do not have to cons for lines 2a through-Year Averaging Periodic (c) 2011	(d) 2012			
Calendar year (or fiscal year beginning in) 2 a Lobbying non-taxable amount b Lobbying ceiling amount (150% of line 2a, column (e)) c Total lobbying	ne organizations that columns Lobbyi (a) 2009	made a section 501(h) ele below. See the instruction mg Expenditures During 4 (b) 2010	ection do not have to cons for lines 2a through-Year Averaging Periodic (c) 2011	(d) 2012			
Calendar year (or fiscal year beginning in) 2 a Lobbying non-taxable amount b Lobbying ceiling amount (150% of line 2a, column (e)) c Total lobbying expenditures d Grassroots nontaxable	ne organizations that columns Lobbyi (a) 2009	made a section 501(h) ele below. See the instruction ng Expenditures During 4 (b) 2010	ection do not have to cons for lines 2a through-Year Averaging Periodic (c) 2011	(d) 2012			
Calendar year (or fiscal year beginning in) 2 a Lobbying non-taxable amount b Lobbying ceiling amount (150% of line 2a, column (e)) c Total lobbying expenditures d Grassroots nontaxable amount e Grassroots ceiling amount (150% of line	deme organizations that a columns Lobbyi (a) 2009	made a section 501(h) ele below. See the instruction ng Expenditures During 4 (b) 2010	ection do not have to cons for lines 2a through-Year Averaging Period (c) 2011	(d) 2012			

Part II-E	Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	file	d Fo	rm 57	68		
		(a	a)		(b)	
For each of the lobb	es' response to lines 1a through 1i below, provide in Part IV a detailed description ying activity	Yes	No		Amo	unt	
legis throu	g the year, did the filing organization attempt to influence foreign, national, state or local atton, including any attempt to influence public opinion on a legislative matter or referendum, ghather use of						; ; ,,,
	staff or management (include compensation in expenses reported on lines 1c through 1i)?						<u> </u>
	ngs to members, legislators, or the public?						
	cations, or published or broadcast statements?						
	s to other organizations for lobbying purposes?						
	t contact with legislators, their staffs, government officials, or a legislative body?						
h Rallie	es, demonstrations, seminars, conventions, speeches, lectures, or any similar means?						
	Add lines 1c through 1i	234.35°C	NA 3				
-	ne activities in line 1 cause the organization to be not described in section 501(c)(3)?	. 2 35	***	onia. E	ČC Z	> 3	*
	s,' enter the amount of any tax incurred under section 4912	76 4 0-2003	£MC12	2783			
	s, enter the amount of any tax incurred under section 4912 s, enter the amount of any tax incurred by organization managers under section 4912	77.44	88 × 95				
	filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			3, 316,	5.187	£. ;	
		->/=>		33 3 2 6 1	ta-v		* -
- art iii-z	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	C)(5)	, or 				
				_		Yes	No
	substantially all (90% or more) dues received nondeductible by members?				1	X	<u> </u>
	ne organization make only in-house lobbying expenditures of \$2,000 or less?				2		X
	ne organization agree to carry over lobbying and political expenditures from the prior year?				3		X
L'aut, iii-i	Complete if the organization is exempt under section 501(c)(4), section 501(c) (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b) Parswered 'Yes.'	c)(5), art II	ors I-A,	section line 3	n 50 , is	1(c)	
1 Dues	assessments and similar amounts from members		1				
	on 162(e) nondeductible lobbying and political expenditures (do not include amounts of political asses for which the section 527(f) tax was paid).		Line I				
a Curre	nt year		2 a				
b Carry	over from last year	ſ	2b				
c Total		Ì	2с				
3 Aggre	gate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3				
does	ces were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political iditure next year?		4				
5 Taxa	ole amount of lobbying and political expenditures (see instructions)	Ì	5				
	Supplemental Information						
Complete t Part II-A, II	nis part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5; Part I ne 2, and Part II-B, line 1 Also, complete this part for any additional information	I-A (a		ed grou	p list)		
					· — — -		- - -

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection
Employer identification number

BO	JRG LIONS CLUB			72-6055796			
Par	Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete If the organization answered 'Yes' to Form 990, Part IV, line 6.						
	trie organization answered Yes	, - · - · · · · · · · · · · · · · · · · 					
	Total acceptance to the	(a) Donor advised fun	ds ((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		<u> </u>				
5	Did the organization inform all donors and don are the organization's property, subject to the			ed funds Yes No			
6	Did the organization inform all grantees, donor for charitable purposes and not for the benefit impermissible private benefit?	s, and donor advisors in writing the of the donor or donor advisor, or f	nat grant funds can be it for any other purpose c	used only onferring Yes No			
Par	till : Conservation Easements. Comp	lete if the organization ans	wered 'Yes' to For	m 990. Part IV. line 7.			
1	Purpose(s) of conservation easements held by						
	Preservation of land for public use (e.g., re	ecreation or education)	Preservation of an hist	orically important land area			
	Protection of natural habitat	⊢	Preservation of a certif	-			
	Preservation of open space	. ⊔					
2	Complete lines 2a through 2d if the organization last day of the tax year	n held a qualified conservation co	ntribution in the form o	f a conservation easement on the			
			<u> </u>	Held at the End of the Tax Year			
á	Total number of conservation easements		2 a				
ŧ	Total acreage restricted by conservation easen	nents	2 b				
(Number of conservation easements on a certification	ed historic structure included in (a	a) 2 c				
(Number of conservation easements included in structure listed in the National Register	(c) acquired after 8/17/06, and no	ot on a historic				
3	Number of conservation easements modified, t tax year ▶	ransferred, released, extinguished	, or terminated by the	organization during the			
4	Number of states where property subject to con	nservation easement is located >					
5	Does the organization have a written policy regand enforcement of the conservation easemen	garding the periodic monitoring, instant the particular straight the periodic monitoring, instant the particular straight the periodic monitoring, instant the periodic monitoring in the periodic monitoring monitoring in the periodic monitoring in the periodic monitoring monitoring in the periodic monitoring in the periodic monitoring	spection, handling of vi	olations, Yes No			
6	Staff and volunteer hours devoted to monitoring	g, inspecting, and enforcing conse	rvation easements dur	ing the year			
7	Amount of expenses incurred in monitoring, ins	specting, and enforcing conservati	on easements during th	ne year			
8	Does each conservation easement reported on and section 170(h)(4)(B)(ii)?	line 2(d) above satisfy the require	ements of section 170(h	n)(4)(B)(i) Yes No			
9	In Part XIII, describe how the organization repo include, if applicable, the text of the footnote to conservation easements	the organization's financial stater	ments that describes th	e organization's accounting for			
Par	t III Drganizations Maintaining Colle Complete if the organization ans	ctions of Art, Historical Tro wered 'Yes' to Form 990, P	easures, or Other art IV, line 8.	Similar Assets.			
1 a	If the organization elected, as permitted under art, historical treasures, or other similar assets in Part XIII, the text of the footnote to its finance	held for public exhibition, educati	on, or research in furth	ent and balance sheet works of erance of public service, provide,			
t	b) If the organization elected, as permitted under historical treasures, or other similar assets hel- following amounts relating to these items:	SFAS 116 (ASC 958), to report in d for public exhibition, education, of	its revenue statement or research in furtherar	and balance sheet works of art, ice of public service, provide the			
	(i) Revenues included in Form 990, Part VIII,	line 1		►\$			
	(ii) Assets included in Form 990, Part X			► \$			
2	If the organization received or held works of ar amounts required to be reported under SFAS 1	t, historical treasures, or other sim 16 (ASC 958) relating to these iter	nilar assets for financia ms	gain, provide the following			
a	Revenues included in Form 990, Part VIII, line	1		►\$			
b	Assets included in Form 990, Part X			► \$			

•							
Schedule D (Form 990) 2012 BOURG	LIONS CLUB			72-60	55796		Page
Part III Organizations Maintain	ing Collection	s of Art, Hist	orical Treasures,			ontini	
Using the organization's acquisition items (check all that apply)	, accession, and o	ther records, che	eck any of the following	that are a significant us	se of its c	ollectic	on n
a Public exhibition		d Loan	or exchange programs				
b Scholarly research		e Other	5, 5				
c Preservation for future generation	ons	L		***			
4 Provide a description of the organiz Part XIII	ation's collections	and explain how	they further the organ	ization's exempt purpose	e in		
5 During the year, did the organization to be sold to raise funds rather than	to be maintained	as part of the or	ganization's collection?	•	Yes	[No
Part IV Escrowand Custodial Ar reported an amount on	rangements. Co Form 990, Par	omplete if the tX, line 21.	organization answe	red 'Yes' to Form 990), Part I	√, line	9, or
1 a Is the organization an agent, trustee on Form 990, Part X?	e, custodian, or oth	ner intermediary	for contributions or oth	er assets not included	Yes		No
b If 'Yes,' explain the arrangement in	Part XIII and comp	olete the followin	ig table		J	_	_
					Amount		
c Beginning balance				1 c			
d Additions during the year				1 d			
e Distributions during the year				1 e			
f Ending balance				1 f			
2 a Did the organization include an amo					Yes		No
b If 'Yes,' explain the arrangement in	Part XIII Check he	ere if the explant	tion has been provided	ın Part XIII	_]
Part V Endowment Funds. Cor	mplete if the or	ganization ai	nswered 'Yes' to F	orm 990, Part IV, II	ne 10.	-	
	(a) Current	(b) Prior ye		(d) Three years		our yea	rs
1 a Beginning of year balance							
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	f the current year e	end balance (line	g 1g, column (a)) held a	as			
a Board designated or quasi-endowme	ent ►	8					
b Permanent endowment	8						
c Temporarily restricted endowment	<u> </u>	ક્ર					
The percentages in lines 2a, 2b, and	d 2c should equal	100%					
3 a Are there endowment funds not in the organization by	ne possession of th	ie organization t	hat are held and admin	ustered for the	٢	Yes	No
(i) unrelated organizations					3a(i)		
(ii) related organizations					3a(ii)		
b If 'Yes' to 3a(ii), are the related orga	anizations listed as	required on Sch	nedule R?		3b	_	
4 Describe in Part XIII the intended us					<u>' </u>		
Part VI Land, Buildings, and Ed	uipment. See	Form 990, P.	art X, line 10.				-
Description of property	(a) Cos	t or other basis nvestment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) B	Book va	lue
1 a Land		10,000.				10.	,000.
b Buildings		63,466.	· <u></u>	63,466.			0.
c Leasehold improvements							
d Equipment				1			

TEEA3302 06/07/12

343. 6,078. 16,078. Schedule **D** (Form 990) 2012

36,343.

e Other 42,421.

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

e Other

BAA

Sche	dule	G (Form 990 or 990-EZ) 2012 BOURG	LIONS CLUB			55796 Page 2
Par		Fundraising Events. Complete if more than \$15,000 of fundraising List events with gross receipts gr	event contribution	nswered 'Yes' to Fo s and gross income	rm 990, Part IV, I on Form 990-EZ,	ine 18, or reported , lines 1 and 6b.
		List events with gross receipts gr	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add column (a)
R			(event type)	(event type)	(total number)	through column (c))
**************************************	1	Gross receipts				
E	2	Less Charitable contributions				
						
	3	Gross income (line 1 minus line 2)				
ľ	4	Cash prizes				
	5	Noncash prizes				<u> </u>
D I R E C T	6	Rent/facility costs				
E C T	7	Food and beverages				
E X	8	Entertainment				
EXPENSES	9	Other direct expenses				
Ĕ		о но спостокроново	.,	<u> </u>		
	10 11		. ,		•	•
Par		Gaming. Complete if the organiza	ation answered 'Ye	s' to Form 990, Par	t IV. line 19. or re	ported more than
		\$15,000 on Form 990-EZ, line 6a				
REVERUE			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
Ü E	1	Gross revenue	96,218.	123,013.		219,231.
	2	Cash prizes	84,708.	101,445.		186,153.
D X	3	Non-cash prizes	224.			
P R E E N C S T E	•	100% p. 1200	224.			224.
T E S	4	Rent/facility costs	4,175.	7,825.		12,000.
	5	Other direct expenses	3,620.	3,620.		7,240.
	6	Volunteer labor	X Yes 100.00% No	X Yes 100.00% No	Yes	100 B
	7	Direct expense summary Add lines 2 thro	ough 5 in column (d)			205 - 617

9 Enter the state(s) in which the organization operates gaming activities <u>Louisiana</u> a is the organization licensed to operate gaming activities in each of these states? **b** If 'No,' explain

8 Net gaming income summary Combine lines 1, column (d) and line 7

10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

BAA

b If 'Yes,' explain

205,617.

13,614.

12 Is the organization operate gaming activities with nonmembers? 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? 13 Indicate the percentage of gaming activity operated in a The organization's facility b An outside facility 13a 13b 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records: Name * RANDOLPH BASCLE Address * 111 RETREAT DRIVE BOURG, LA 70343 15a Does the organization have a contact with a third party from whom the organization receives gaming revenue? bif Yes,' enter the amount of gaming revenue received by the organization * \$ and the amount of gaming revenue retained by the third party * \$ cit Yes,' enter name and address of the third party Name * Address * 16 Gaming manager information Name * Gaming manager compensation * \$ Description of services provided * Director/officer	Sche	edule G (Form 990 or 990-EZ) 2012 BOURG LIONS CLUB	72-605	5796	Page 3
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to diminister charitable gaming? 13 Indicate the percentage of gaming activity operated in a The organization's facility bAn outside facility 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records: Name * RANDOLPH BASCLE Address * 111 RETREAT DRIVE BOURG LA 7.0343 15a Does the organization have a contact with a third party from whom the organization receives gaming revenue? bit 'ves,' enter the amount of gaming revenue received by the organization * \$ and the amount of gaming revenue retained by the third party * \$ cit 'ves,' enter name and address of the third party. Name * Address * and the amount of seming manager information Name * Description of services provided * Independent contractor 17 Mandatory distributions a is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year * \$ Partitives Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, Columns (iii) and (v), and Part III, line 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable, Also complete			12 000		X No
a The organization's facility b An outside facility 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records' Name RANDOLPH BASCLE Address 111 RETREAT DRIVE BOURG, LA 70343 15a Does the organization have a contact with a third party from whom the organization receives gaming revenue? Yes bif Yes, enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$ set of Yes, enter name and address of the third party. Name Address Add	12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity for administer charitable gaming?	ormed to	Yes	X No
a The organization's facility b An outside facility 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records' Name RANDOLPH BASCLE Address 111 RETREAT DRIVE BOURG, LA 70343 15a Does the organization have a contact with a third party from whom the organization receives gaming revenue? Yes bif Yes, enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$ set of Yes, enter name and address of the third party. Name Address Add	13	Indicate the percentage of gaming activity operated in	1 1		
b An outside facility 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records' Name RANDOLPH BASCLE Address 111 RETREAT DRIVE BOURG, LA 70343 15a Does the organization have a contact with a third party from whom the organization receives gaming revenue? Yes bif 'Yes,' enter the amount of gaming revenue received by the organization * \$ and the amount of gaming revenue retained by the third party \$ and the amount of gaming revenue retained by the third party. Name Address Ad			13a		ક
Name RANDOLPH BASCLE Address 111 RETREAT DRIVE BOURG, LA 70343 15a Does the organization have a contact with a third party from whom the organization receives gaming revenue? Yes for Yes, enter the amount of gaming revenue received by the organization * \$ and the amount of gaming revenue received by the organization * \$ and the amount of gaming revenue retained by the third party. Name Address 16 Gaming manager information Name Gaming manager compensation \$ bircetor/officer			 		
Address 111 RETREAT DRIVE BOURG, LA 70343 15a Does the organization have a contact with a third party from whom the organization receives gaming revenue? Yes X is if Yes, enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$ and the amount of gaming revenue retained by the third party. Name		·			
15a Does the organization have a contact with a third party from whom the organization receives gaming revenue? b if "Yes," enter the amount of gaming revenue received by the organization \$ \$		Name RANDOLPH BASCLE			
b If 'Yes,' enter the amount of gaming revenue received by the organization \$ \$ and the amount of gaming revenue retained by the third party \$ \$ \$ c If 'Yes,' enter name and address of the third party' Name \$ Address \$ 16 Gaming manager information Name \$ Caming manager compensation \$ S Caming manager compensation		Address 111 RETREAT DRIVE BOURG, LA 70343			
Address 16 Gaming manager information Name Gaming manager compensation \$ Description of services provided Director/officer Employee Independent contractor 17 Mandatory distributions a is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete	ŧ	b If 'Yes,' enter the amount of gaming revenue received by the organization \(\bar{\sigma} \) \(\bar{\sigma} \) an of gaming revenue retained by the third party \(\bar{\sigma} \) \(\bar{\sigma} \)			X No
Address 16 Gaming manager information Name Gaming manager compensation \$ Description of services provided Director/officer Employee Independent contractor 17 Mandatory distributions a is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete		Name •			
Gaming manager compensation \$ Description of services provided Director/officer Employee Independent contractor 17 Mandatory distributions a is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete					
Director/officer Employee Independent contractor Mandatory distributions a is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year Partive Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete	16	Gaming manager information			
Director/officer		Name •			
Director/officer		Gaming manager compensation \$			
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ Part V Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete		Description of services provided			
a is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete		Director/officer Employee Independent contractor			
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$ Part V Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete		•			
organization's own exempt activities during the tax year \$ Part Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete		state gaming license?			X No
Part Value Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete	r.		spent in tr	ne	
	Par	Supplemental Information. Complete this part to provide the explanations required columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as app	red by Pa blicable.	art I, line 2 Also comp	2b, plete
			·		
				 	
			 -		

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

2012

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

BOURG LIONS CLUB	72-6055796
Pt_VI,_Line_6 ORGANIZATION_HAS_INDIVIDUALS_AS_GENERAL_ME	EMBERS
Pt_VI,_Line_7aALL_GENERAL_MEMBERS_HAVE_VOTING_RIGHTS	
Pt_VI, Line 7b ALL GOVERNING BOARD DECISIONS ARE SUBJECT TO RA	TIFICATION BY GENERAL MEMBERSHIP
Pt_VI, Line 10b _ THE CENTRAL ORGANIZATION HAS WRITTEN POLICIES & PROCE	DURES GOVERNING AFFILIATE ACTIVITIES
Pt VI, Line 11b A COPY OF THE FORM 990 IS AVAILABLE TO ALI	_ MEMBERS BEFORE FILING.
-	

Schedule O (Form 990), Supplemental Information to Form 990, Form 990, Page 2, Part III, Line 1 (continued)

Briefly describe the organization's mission:

FUNDS FOR CASH GRANTS TO VARIOUS CHARITIES AND NON-PROFIT CAUSES AT LOCAL, STATE AND NATIONAL LEVELS.