

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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 Open to Public Inspection

Department of the Treasury Internal Revenue Service

HTA

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

For the 2012 calendar year, or tax year beginning 10/1/2012 and ending 9/30/2013 C Name of organization Benevolent and Protective Order o Elks of the USA **Employer Identification number** Check if applicable Doing Business As Address change Colorado Elks Association Charities, Inc. 84-1243937 Number and street (or P O. box if mail is not delivered to street address) E Telephone number Name change Initial return 1101 West 4th Street Road (970) 302-9536 Terminated City, town or post office, state, and ZIP code ÇQ 80634-1438 G Gross receipts \$ Greeley Amended return F Name and address of principal officer: Application pending H(a) Is this a group return for affiliates? Frank Sommer 7042 S Glencoe, Cenrennial, CO 80122-2348 H(b) Are all affiliates included? If "No," attach a list. (see instructions) X 501(c)(3)) (insert no.) 4947(a)(1) or 527 Tax-exempt status: Website: ▶ www.coloradoelks.org H(c) Group exemption number ► 1156 X Corporation K Form of organization: Trust Association Other > L Year of formation: M State of legal domicile 1993 CO Part I Summarv Briefly describe the organization's mission or most significant activities: To dispense funds received from the Clem Audin Memorial Fund, The Dr. Nuckoll's Scholarship Fund and the Elks National Foundation of the B.P.O. Elks of the USA for Charitable and Educational activities supported by the Activities & Governance Colorado Elks Association, Inc. Check this box | if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 13 Number of independent voting members of the governing body (Part VI, line 1b) 4 300 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 0 300 6 Total unrelated business revenue from Part VIII, column (C), line 12. 0 Net unrelated business taxable income from Form 990-T, line 34 0 **Current Year** 8 Contributions and grants (Part VIII, line 1h) . . . 226,213 223,462 9 Program service revenue (Part VIII, line 2g) 10 1.2 19.622 16,491 11 0 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 245,835 239,953 12 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 13 213,076 213,747 14 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10). 0 0 Professional fundraising fees (Part IX, column (A), line 11e) . . . 16a 0 Total fundraising expenses (Part IX, column (D), line 25) ▶ þ Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 17 2,897 5,866 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25). . . 215,973 18 219.613 19 Revenue less expenses. Subtract line 18 from line 12. 29.862 20,340 Beginning of Current Year **End of Year** 20 Total assets (Part X, line 16) . . 634,375 657,205 21 Total liabilities (Part X, line 26) . . . 37,651 40,141 Net assets or fund balances. Subtract line 21 from line 20 596,724 617,064 Signature Block 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. 2014 Sign Signature of officer Here Glenn W Tiemann Treasurer Type or print name and title Preparer's signature Print/Type preparer's name Date PTIN Check Paid SELF-PREPARED RETURN self-employed Preparer Firm's name Firm's EIN **Use Only** Firm's address > Phone no X Yes For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2012)

Form 9	90 (2012)	Benevolent and Protective Order o Elks of the USA	84-1243937	Page 2
Pa	rt III	Statement of Program Service Accomplishments		
		Check if Schedule O contains a response to any question in this Part III		. [X]
1	•	escribe the organization's mission:		
	See Par	: 1, Ln 1	***************************************	
			••••••	
2	Did the	organization undertake any significant program services during the year which were not listed on		
-		Form 990 or 990-EZ?	· · Tyes	X No
	•	describe these new services on Schedule O.		٠٠٠ رين
3	Did the	organization cease conducting, or make significant changes in how it conducts, any program		
		? <i></i>	Yes	X No
		describe these changes on Schedule O.		
4		e the organization's program service accomplishments for each of its three largest program service		
		s. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and a	llocations to others	5,
	tne total	expenses, and revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ 3,984 including grants of \$ 60,000) (Revenue		····
70	l aradon	Hall Society for Exceptional Children and Adults. This is the Major Project of the		/
		D Elks Association, Inc.		
			••••••	

4b	(Code:) (Expenses \$ including grants of \$ 60,000) (Revenue	ıe \$)
		as a total of 87 Scholarships sent to Universities, Colleges, and Technical Schools. Each	***************************************	
	Scholar	ship was sent directly to the schools for the recipients.		

•				
				·
	10-4-) (European C. Industrial and A. C.		
4¢	(Code:) (Expenses \$ including grants of \$ 35,078) (Revenualin Fund. A total of 63 Cash Grands were awarded via Elks Lodges for Developmental,	ie \$)
		onal, and Personal Needs of children 18 years of age or younger.		
	Lucat	Sila, and 1 crossila recease of crimaron to Jeans of age of Journals.		

	•••••			
4d	Other p	rogram services. (Describe in Schedule O.)		
~~	(Expens	· ·	0)	
40		maram service evenesses by 5 866		

Part IV

			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		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	_		
_		5	-	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors		- 1	
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	_	ŀ	~
_	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	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			х
۵	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a	8		
9	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt		ŀ	
	negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted		- 1	
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a		х
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
C	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	11c		X
d	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	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
b	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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Χ
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Χ
b	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		l	
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
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		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			<u> </u>
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	- 1	X
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		<u>X</u>
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

			Yes	No
21 '	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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? If "Yes," complete Schedule J	23		×
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		x
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		$\hat{\mathbf{x}}$
	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		<u>^</u>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		<u> </u>
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		×
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 b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	28b		<u> </u>
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29	\dashv	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N.</i>	30		X
32	Part I	31	_	Х
	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		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		Х
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
þ	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		<u>х</u>
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	. 1	X
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	
		Form	990 (2042

Form 9	90 (2012) Benevolent and Protective Order o Elks of the USA 84-124	3937	P	age
Par	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	<u> </u>		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1		1
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1 .		
_	gaming (gambling) winnings to prize winners?	1c	Х	1
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	··•		\vdash
	Statements, filed for the calendar year ending with or within the year covered by this return 2a	}		1
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			\vdash
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		x
Ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			1
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		X
b	If I'Ves I' enter the same of the femige country.	<u> </u>	-	ĦŤ
_	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	1		
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6ь		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	i		
	and services provided to the payor?	7a		x
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7Ь		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		X
đ	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?.	7h		Х
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			1
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8	Ĺ	X
9	Sponsoring organizations maintaining donor advised funds.			1
а	Did the organization make any taxable distributions under section 4966?	9a		X
ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter.			1
a	Initiation fees and capital contributions included on Part VIII, line 12	4		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			1
11	Section 501(c)(12) organizations. Enter:			1
a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			l
40	against amounts due or received from them.)			l
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			l
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	-		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	1	1

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

Did the organization receive any payments for indoor tanning services during the tax year?

If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14a

14b

X

13b

13c

17	List the states with which	a copy of this Form 990 is n	equired to be filed	>	_
18	Section 6104 requires an	organization to make its Fo	rms 1023 (or 1024 if appl	licable), 990, and 990-T (Section 501(c)(3)s only)	
	available for public inspec	ction. Indicate how you made	e these available. Check	all that apply.	
	Own website	Another's website	X Upon request	Other (explain in Schedule O)	
19	Describe in Schedule O v	vhether (and if so, how), the	organization made its go	overning documents, conflict of interest	
	policy, and financial state	ments available to the public	c during the tax year.		
20	State the name, physical	address, and telephone nun	nber of the person who p	ossesses the books and records of the	
	organization: ▶	Glenn W. Tiemann		(720) 290-2300	
		8235 Elati Street, Denver	r, CO 80221-4477		
				Form 990 (20)1

		-								_	
Part VII	Benevolent and Protective Order Compensation of Officers, Dire Employees, and Independent C Check if Schedule O contains a re	ctors, Truste ontractors	es, K	Ī		_		•			
Section A.	Officers, Directors, Trustees, Key I	Employees, an	d Hig	hes	st C	om	pens	ate	d Employees		
organization's	•								-		
of compensation List all List the who received organization List all \$100,000 of r List all organization,	of the organization's current officers, tion. Enter -0- in columns (D), (E), and of the organization's current key emple organization's five current highest correportable compensation (Box 5 of Formand any related organizations. of the organization's former officers, reportable compensation from the organization's former directors more than \$10,000 of reportable compensation the following order: individual trustees	(F) if no compete loyees, if any. Sompensated empty or W-2 and/or exey employees, anization and any or trustees the pensation from the sor trustees.	ensati see in ploye Box and i and i y rela at rec	ion vestruites (7 of night ated testing)	was ictio (othic For est org ed, i	pai er them 1 com yani in the	d. for denan a 099- npens zation e cap and	efiniten of MIS satens. oaci	tion of "key emp fficer, director, to C) of more than d employees what ty as a former d related organiz	loyee." rustee, or key er \$100,000 from no received mor irector or trustee ations.	mployee) the e than
	I employees; and former such persons		Houte	1001	iai ti	ıuşı	ccs,	OHIC	zers, key emploj	rees, mignest	
Check th	is box if neither the organization nor a	ny related organ	nizatio	on c	om	pen:	sated	l an	y current officer	director, or trus	stee.
	(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unle: er an	Pos neck ss pe	rson	than both softman Highest compensated	n an tee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Frank	Sommers	7.00	1								
President		12.00		┡	Х	<u> </u>	ļ	<u> </u>	0	0	0
(2) Brian C)'Neil	4.00	1		J.		ŀ			_	
1st V.P. (3) Thoma	a Croker	10.00 4.00		├	Х	-		-	0	0	0
2nd V.P.	5 Flanci	10.00	1		x				,	<u></u>	_
(4) Richard	d L. Stolte	4.00		\vdash	<u> ^</u>			<u> </u>	<u>_</u>		<u>_</u>
3rd V.P.		10.00	4		x				o	0	o
(5) John H	utson	10.00				 -			<u>_</u>		<u>~</u>
Secretary		20.00		<u></u>	х				0	<i>3,6∞</i> 4, 500	О
(6) Glenn	W. Tiemann	10.00	1								
Treasurer		15.00		_	X			_	0	1,500	0
_(7) Gary S	alberg	2.00	7								
Trustee	K D	5.00		_	X				0	0	0
(8) James	K Pierce	1.00	1		,					_	
Trustee (9) Mary R	Panedala	2.00 1.00		╁	X	-	ļ		0	0	0
Trustee	agoudie	2.00	1		x				0	a	_

1.00 2.00

1.00 2.00

1.00 2.00

1.00 2.00 X

Χ

X

X

o

0

0

0

(10) Frank Keller

(11) Allen Lenort

(12) William Lakers

(13) Raymond Ross
Past Pres on Board

(14)

Trustee

Trustee

Trustee

0

ol

•	(A) Name and title	(B) Average hours per	box,	unle	Pos eck is pe	erson	e than is bot	h an tee)	compensation	(E) Reportable compensation	Est	(F) amated ount of
		week (list any hours for related organizations below dotted line)	individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	comp fro orga and	other pensation om the inization related nizations
(15)						-						
(16)												
(17)												
(18)			-	-		-						~
(19)								_				
(20)				-							· · · · ·	
(21)				-								
(22)						-		_				·
(23)											•	
			<u> </u>	_		_						
(25)								<u> </u>				
1b	Sub-total				<u>.</u>					0.000		
C	Total from continuation sheets to Part VII, S	Section A						•	0	0		0
<u>d</u> 2	Total (add lines 1b and 1c)	mited to those li		abo	/e) '				d more than \$10			0
	reportable compensation from the organization				0						\	res No
3	Did the organization list any former officer, din employee on line 1a? <i>If "Yes," complete Sched</i>					ее, с ·	or hig 	hes	st compensated		3	x
4	For any individual listed on line 1a, is the sum the organization and related organizations greated individual.										4	x
5	Did any person listed on line 1a receive or acc											
Sec	for services rendered to the organization? If "Y tion B. Independent Contractors	es, complete S	cnea	uie .	ι τοι	suc	cn pe	rso	<u>n</u>	<u> </u>	5	<u> </u>
1	Complete this table for your five highest compensation from the organization. Report of year.	ensated indepen empensation for	dent the c	con aler	trac dar	tors yea	that ar end	rec ding	eived more than with or within th	\$100,000 of ne organization's	tax	
	(A) Name and business add	Iress							(B) Description of ser	vices C	(C) ompens	ation
												0
												0
	····											0
2	Total number of independent contractors (inclumore than \$100,000 of compensation from the		ted to	tho	se	liste	ed abo	ove) who received			0
												00

Form 990 (2012) Statement of Revenue Part VIII (D) Related or Revenue Total revenue Unrelated exempt business excluded from function revenue tax under sections revenue 512, 513, or 514 Contributions, Gifts, Grants 1b 0 and Other Similar Amou 1c 0 d Related organizations 1d 223,462 Government grants (contributions) . . . 1e f All other contributions, gifts, grants, and similar amounts not included above . . . 1f Noncash contributions included in lines 1a-1f. \$ Total. Add lines 1a-1f 223,462 Business Code Program Service Revenue 0 0 0 0 All other program service revenue 0 Total. Add lines 2a-2f. . 3 Investment income (including dividends, interest, and other similar amounts) 16,491 Income from investment of tax-exempt bond proceeds . . . (ii) Personal **6a** Gross rents **b** Less: rental expenses c Rental income or (loss). . . 0 d Net rental income or (loss). . (i) Securities (ii) Other 7a Gross amount from sales of assets other than inventory . . . 0 0 b Less: cost or other basis and sales expenses c Gain or (loss) 0 0 Other Revenue 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 **b** Less: direct expenses 0 c Net income or (loss) from fundraising events . 9a Gross income from gaming activities. See Part IV, line 19. a 0 c Net income or (loss) from gaming activities . ▶ 0 10a Gross sales of inventory, less returns and allowances a **b** Less: cost of goods sold 0 c Net income or (loss) from sales of inventory. Miscellaneous Revenue **Business Code** 11a 0 b 0 0 d All other revenue 0

0

239,953

Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must complete a	ll columns. All other	organizations mus	st complete columi	n (A).
	Check if Schedule O contains a response to any				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	213,747			
2	Grants and other assistance to individuals in the				
	United States. See Part IV, line 22	0		·	
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,				
	trustees, and key employees	0		· · · · · · · · · · · · · · · · · · ·	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	0			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions).	0	·		
9	Other employee benefits	0			
10	Payroll taxes	0			
11	Fees for services (non-employees):				
а	Management	0			
Ь	Legal	0	·······		
C	Accounting	0		<u> </u>	
d	Lobbying	0			
e	Professional fundraising services. See Part IV, line 17	0		·	
f	Investment management fees	0			
g	Other. (If line 11g amount exceeds 10% of line 25, column	•			
	(A) amount, list line 11g expenses on Schedule O.)	0			
12	Advertising and promotion			· · · · · · · · · · · · · · · · · · ·	
13	Office expenses	1,882	1,882		<u> </u>
14	Information technology	<u>o</u>			
15	Royalties	0			
16	Occupancy	0			
17	Travel	0		······································	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0		· · · <u> </u>	
19	Conferences, conventions, and meetings	3,984	3,984		
20	Interest	0			<u></u>
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	0	0	0	0
23	Insurance	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		İ		
	(A) amount, list line 24e expenses on Schedule O.)				
a					
b		0		•	
C		0		· · · · · · · · · · · · · · · · · · ·	<u> </u>
d	All other expenses	0	· · · · · · · · · · · · · · · · · · ·	 .	
e 25	All other expenses	0			<u> </u>
25	Total functional expenses. Add lines 1 through 24e .	219,613	5,866	0	0
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs		l		
	from a combined educational campaign and	1			1
	fundraising solicitation. Check here if		Į		
	following SOP 98-2 (ASC 958-720)	<u> </u>			L

		Check if Schedule O contains a response to any question in this Part X .	<u></u> .		<u> </u>
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	22,001	1	1,685
	2	Savings and temporary cash investments	612,374	2	603,367
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	0	4	3,265
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section			
		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			
8		organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net	0	7	0
¥	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a 0	j		
	ь	Less: accumulated depreciation 10b 0	o	10c	0
	11	Investments—publicly traded securities	0	11	48,888
	12	Investments—other securities. See Part IV, line 11	0	12	0
	13	Investments—program-related. See Part IV, line 11	0		0
	14	Intangible assets	0		0
	15	Other assets. See Part IV, line 11	0		0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	634,375		657,205
	17	Accounts payable and accrued expenses	00 1,070	17	001,200
	18	Grants payable	31,049		33,582
	19	Deferred revenue	6,602		6,559
	20	Tax-exempt bond liabilities	0,002	20	0,000
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ø	22	Loans and other payables to current and former officers, directors,			
Liabilities		trustees, key employees, highest compensated employees, and			
喜	l	disqualified persons. Complete Part II of Schedule L		22	
퍨	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
_	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third			
	25	parties, and other liabilities not included on lines 17-24). Complete			
		Part X of Schedule D	0	25	o
	26	Total liabilities. Add lines 17 through 25	37,651		40,141
	20_		37,001	20	40,141
Net Assets or Fund Balances		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.			
ă	27	Unrestricted net assets		27	•
æ	28	Temporarily restricted net assets		28	
귳	29	Permanently restricted net assets		29	
Ë	1	Organizations that do not follow SFAS 117 (ASC958), check here			
5	l	complete lines 30 through 34.			
8	20			20	
380	30	Capital stock or trust principal, or current funds		30	
Ă	31	Retained earnings, endowment, accumulated income, or other funds .	F06 704	31	047.004
Ž	32 33	Total net assets or fund balances	596,724 506,724		617,064
_	l .	Total liabilities and net assets/fund balances	596,724		617,064
	34	i utai ilauliiues aliu liet assetsifuliu ualditues	634,375	<u> </u>	657,205

Form 9	90 (2012) Benevolent and Protective Order o Elks of the USA	84-1243	937	Pag	ge 12
Part	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		239	9,953
2	Total expenses (must equal Part IX, column (A), line 25)	2		219	9,613
3	Revenue less expenses. Subtract line 2 from line 1	3		20),340
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		596	5,724
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	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
		10		617	7,064
Part					
	Check if Schedule O contains a response to any question in this Part XII			.	Ш
				Yes	No
1	Accounting method used to prepare the Form 990:				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				i
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	[2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:	İ			
	Separate basis Consolidated basis Both consolidated and separate basis				1
b	Were the organization's financial statements audited by an independent accountant?		2ь	х	1
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a	-			
	separate basis, consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight (.			ļ
C	the audit, review, or compilation of its financial statements and selection of an independent accountant?	,	_	х	
	If the organization changed either its oversight process or selection process during the tax year, explain in	· · · · -	2c	-	
	Schedule O.		i		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
va	the Single Audit Act and OMB Circular A-133?		3a	ļ	
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	· · · · -	Ja		
-	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.] ,	зь		
•				990	(2012)

-

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

►See separate instructions.

OMB No 1545-0047 Open to Public

Inspection Internal Revenue Service **Employer Identification number** Name of the organization Benevolent and Protective Order o Elks of the USA 84-1243937

Pa	rt I	Reason	for Public Ch	arity Status (All org	anizatio	ns must c	complete	this par	t.) See ir	struction	ns.		
he	o <u>rga</u> r	ization is not	a private founda	ation because it is: (Fo	or lines 1	through 1	1, check	only one	box.)				
1	Ш	A church, co	nvention of chu	rches, or association of	of churche	es describ	ed in sec	tion 170	(b)(1)(A)(i	i).			
2		A school des	cribed in secti o	on 170(b)(1)(A)(ii). (At	tach Sch	edule E.)							
3		A hospital or	a cooperative h	nospital service organi	zation de	scribed in	section	170(b)(1)	(A)(iii).				
4	\sqcap	A medical re	search organiza	ition operated in conju	ınction wi	th a hospi	tal descri	bed in se	ction 170)(b)(1)(A)	(iii). En	ter the	
			me, city, and sta	•		-				. (-)(-)(-)	(,-		
5		An organizat	ion operated for	the benefit of a collec	ge or univ	ersity owr	ed or ope	erated by	a govern	mental u	nit desc	ribed	
6				(Complete Part II.) emment or governme	ntal unit d	lescribed i	in section	170(b)(1)(A)(v)				
7	区	An organizat	ion that normall	y receives a substanti	al part of					or from th	e gener	al pub	lic
_				(1)(A)(vi). (Complete I	-	\	54 U.V						
8	님	_		l in section 170(b)(1)(-	•						
9	LJ	receipts from support from	n activities relate gross investme	y receives: (1) more the doto its exempt function its exempt function in income and unrelated after June 30, 1975.	ons—subj ted busin	ject to cer ess taxabl	tain exce _l le income	ptions, ar (less sec	nd (2) no i ction 511	nore thar	33 1/3	% of it	
10		An organizat	tion organized a	nd operated exclusive	ly to test	for public	safetv. Se	ee sect io	n 509(a)(4).			
11	H	•	•	nd operated exclusive	•	•	•		` ' '	•	TV OUT #	ne	
e		509(a)(3). Cl a Type By checking persons other 509(a)(1) or If the organiz	heck the box that I b T this box, I certifer than foundation section 509(a)(2 zation received a	y that the organization on managers and other 2). a written determination	of support of III—Func of is not co or than on or from the	ing organi tionally in introlled di e or more e IRS that	zation an tegrated irectly or i publicly s	d comple d T indirectly supported	te lines 1 ype III—N by one or l organiza	1e throug on-function more distinctions des	ph 11h. onally in squalifie scribed i	tegrate d	ed
		_	, check this box										
g		_		the organization acce	pted any	gift or con	tribution 1	from any	of the				
		following per		iiitht			AL 44				İ		
		• •	•	or indirectly controls, verning body of the su		_		•		• • •	44	Yes	No
		•	•	person described in (i		_					11g(i)		X
				y of a person describe							11g(ii) 11g(iii)		X
h				ation about the suppor					• • •		[119(0)]		
		of supported anization	(ii) EIN	(III) Type of organization (described on lines 1–9 above or IRC section (see Instructions))	(iv) is the o	organization sted in your document?	(v) Did y the organ col. (i)	ou notify nization in of your port?	organiza (i) organ	Is the tion in col. ized in the S.?	(viii) Am	ount of mo support	onetary
					Yes	No	Yes	No	Yes	No	1		
A)													
ara	don l	Hall Society, 5	84-0412621	5	X		X		X		<u> </u>	6	0,000
B)											ŀ		
C)													
D)					1						1		
E)					,					 		······································	
 Fota		1											 0 000

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(Iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

	on A. Public Support					 	
Caler	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and					1	
	membership fees received. (Do not	t					
	include any "unusual grants.")	209,045	235,200	222,421	242,948	223,462	1,133,076
2	Tax revenues levied for the organization's						
_	benefit and either paid to or expended on					İ	
	its behalf					į	0
3	The value of services or facilities			····			
	furnished by a governmental unit to the	ŀ					
	organization without charge						0
4	Total. Add lines 1 through 3	209,045	235,200	222,421	242,948	223,462	1,133,076
5	The portion of total contributions by each	200,040	200,200		212,010	220,102	1,100,070
J	person (other than a governmental unit					l	
	or publicly supported organization)	į				ł	
	included on line 1 that exceeds 2%						
	of the amount shown on line 11,					ŀ	
_	column (f)						4 400 070
6	Public support. Subtract line 5 from line 4.	1		l		L	1,133,076
	ion B. Total Support					T	
Cale	ndar year (or fiscal year beginning in) 🕟	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	209,045	235,200	222,421	242,948	223,462	1,133,076
8	Gross income from interest, dividends,		ŀ				
	payments received on securities loans,	İ					
	rents, royalties and income from similar						
	sources	22,941	22,638	22,548	19,622	16,491	104,240
9	Net income from unrelated business						
	activities, whether or not the business is						
	regularly carried on						0
10	Other income. Do not include gain or						
-	loss from the sale of capital assets						
	(Explain in Part IV.)						0
11	Total support. Add lines 7 through 10.					Ì	1,237,316
12	Gross receipts from related activities, etc. (s	ee instructions	.)			12	0
13	First five years. If the Form 990 is for the or						
	organization, check this box and stop here						
04							<u> </u>
	ion C. Computation of Public Support		1-4 b. 15- 44			44	04.500/
14	Public support percentage for 2012 (line 6, c					14	91.58%
15	Public support percentage from 2011 Sched					15	0.00%
16a	• • • • • • • • • • • • • • • • • • • •			•		•	
	and stop here. The organization qualifies as		•				
þ	33 1/3% support test—2011. If the organization						
	box and stop here. The organization qualified		•	<i>-</i>			
17a	10%-facts-and-circumstances test-2012	_			•	•	
	is 10% or more, and if the organization mee	ts the "facts-an	id-circumstanc	es" test, check	this box and s	top here. Expl	ain in
	Part IV how the organization meets the "fact	s-and-circums	tances" test. 11	he organization	qualifies as a	publicly suppo	rted
	organization						▶[¨¯
b	10%-facts-and-circumstances test-2011.	. If the organiza	ation did not ch	eck a box on li	ne 13, 16a, 16	b, or 17a, and	line
	15 is 10% or more, and if the organization m						
	Part IV how the organization meets the "fact			-		•	-
	supported organization			•	•		▶□
18	Private foundation. If the organization did r						- —
10			•				
	instructions						· · · 🖊 📖

Schedule A (Form 990 or 990-EZ) 2012 Benevolent and Protective Order o Elks of the USA Part III

Support Schedule for Significations possible in economic costa/(-)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.
If the organization fails to qualify under the tests listed below, please complete Part II.)

	ion A. Public Support		· · · · · · · · · · · · · · · · · · ·				
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						0
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						0
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						0
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf					:	0
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0
6	Total. Add lines 1 through 5	0	0	0	O	0	0
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						0
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						0
8 C	Add lines 7a and 7b	0	0	0	0	0	0
Sec	tion B. Total Support	<u> </u>	L	· · · · · · · · · · · · · · · · · · ·	<u></u>		
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6	ا ا	o	o	o	0	o
10a	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar sources						0
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
c	Add lines 10a and 10b	0	0	0	0	0	0
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)			•			0
13	Total support. (Add lines 9, 10c, 11, and 12.)	0	0	0	0	0	0
14	First five years. If the Form 990 is for the organization, check this box and stop here	•		or fifth tax year a	•	:)(3)	▶□
Sec	tion C. Computation of Public Support	Percentage					
15	Public support percentage for 2012 (line 8, column				1	15	0.00%
16	Public support percentage from 2011 Schedule A,			 	<u> </u>	16	0.00%
	tion D. Computation of Investment Inco			(0)		4= 1	0.000/
17	Investment income percentage for 2012 (line 10c,					17	0.00%
18 19a	Investment income percentage from 2011 Schedul 33 1/3% support tests—2012. If the organization				•		0.00%
130	not more than 33 1/3%, check this box and stop h						
b	33 1/3% support tests—2011. If the organization	-			_		
	line 18 is not more than 33 1/3%, check this box a						▶ 🗀
20	Private foundation. If the organization did not che	ck a box on line	14, 19a, or 19b,	check this box a	nd see instruction	ns	▶ [

Schedule A (Form	n 990 or 990-EZ) 2012	Benevolent and Protective Order o Elks of the USA	84-1243937	Page 4
Part IV	Supplemental	Information. Complete this part to provide the explanations required or 17b; and Part III, line 12. Also complete this part for any additional	by Part II, line 10	;
· · · · ·	instructions).			
	•	······		
	•••••			

			······	
•••••			*	

				•••••
	······································			*******
				•••••
•••••				
•••••			***************************************	
•••••				
***************************************	••••••		•••••	
			••••••	•

SCHEDULE (Form 990)

Internal Revenue Service

Department of the Treasury

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

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

Attach to Form 990.

545-0047	2	
8	T	(
MB No. 1	20	
0		

Open to Public

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, **2** (h) Purpose of grant or assistance Inspection Employer Identification number Major Project X Yes 84-1243937 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation (book, FMV, appraisal, dher. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (e) Amount of non-cash assistance Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. 80,000 (d) Amount of cash grant the selection criteria used to award the grants or assistance?.... Enter total number of other organizations listed in the line 1 table. General Information on Grants and Assistance (c) IRC section If applicable ည Benevolent and Protective Order o Elks of the USA 84-0412621 (P) EIN 5100 Lincoln Ave Denver, CO 80216 1 (a) Name and address of organization (1) Laradon Hall Society or government Name of the organization Part I Part II

€;

€

3

€.

€;

8

€

For Paperwork Reduction Act Notice, see the instructions for Form 990.

Schedule ! (Form 990) (2012)

€:

€:

Page 2

Benevolent and Protective Order o Elks of the USA

benevolent and Protective Order Schedule I (Form 890) (2012)

(f) Description of non-cash assistance Grants and Other Assistance to Individuals In the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance (c) Amount of cash grant Part III can be duplicated if additional space is needed (b) Number of reciplents (a) Type of grant or assistance information Part III Part IV ю 8

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

2012

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Benevolent and Protective Order o Elks of the USA

Employer Identification number 84-1243937

Form 990 Part III Line Line 4d Program Service Expenses. Program Expenses: 1,882 Other Grants
58,669 See following.
Form 990 Part III Section 4d Drug and Alcohol Awareness: 14,348
Form 990 Part III Section 4d Hoop Shoot for Children 8 to 14: 6,245
Form 990 Part III Section 4d Soccer Shoot for Children 8 to 14: 5,262
Form 990 Part III Section 4d National Western Stock Show booth to promote activities and
programs for Children and Adults that the Elks provide: 3,738
Form 990 Part III Section 4d Stock Show and Rodeo for Children to participate: 9,54
Form 990 Part III Section 4d Veterans Programs, i.e. Wounded Veterans Sports Clinic, Veterans
Services: 9,305
Form 990 Part III Section 4d Community Projects such as Sunshine Foundation, Kempe Center for
Abused Children, Colorado Special Olympics, Books and special events: 8,700
Form 990 Part III Section 4d Americanism Committee to to promote Americanism: 2,017
Form 990 Part VI Section c Copies of the 990 is in the hands of the current President,
Secretary and TreasurerAll members of the Governing Body are aware that if a Public inspection
is asked for, they will contact those persons for a copy.