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# 237131531 05/12/2014 1 28 PM

Department of the Treasury Internal Revenue Service

### **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the internal Revenue Code (except private foundations)

Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 2013 Open to Public Inspection

A	For the 2013 c	alendar year, or tax year beginning $04/01/13$ , and ending $03/31/14$			
В	Check if applicable	C Name of organization		D Emplo	yer identification number
	Address change	B.P.O. ELKS CLUB & LODGE			
	Name change	Doing Business As		23-	-7131531
$\Xi$		Number and street (or P O box if mail is not delivered to street address)	coom/suite	E Teleph	one number
片	Initial return	2111 E CLARK STREET		641	-228-1257
	Terminated	City or town, state or province, country, and ZIP or foreign postal code			
	Amended return	CHARLES CITY IA 50616		G Gross rec	eipts \$ 149,308
$\Box$	Application pending	F Name and address of principal officer	tital lathia a see		
	,, ,	LARRY MICHEHL	H(a) Is this a grou	up return for si	ubordinates? Yes X No
		605 PFEIFFER AVENUE	H(b) Are all subs	ordinates incl	uded? Yes No
		CHARLES CITY IA 50616	If "No,"	attach a list	(see instructions)
1	Tax-exempt status	501(c)(3) <b>X</b> 501(c) ( <b>8</b> ) ◀ (insert no ) 4947(a)(1) or 527			
J_	Website: ▶ N	I/A	H(c) Group exer	nption numbe	<u>· •                                     </u>
K	Form of organization		of formation		M State of legal domicile
1		ımmary			
Activities & Governance	200	scribe the organization's mission or most significant activities:  VOLENT ORGANIZATION PROVIDING ASSISTANCE TO YOUTH AND  LARSHIPS, FUND RAISERS, ETC.  is box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of voting members of the governing body (Part VI, line 1a)			400
ties	4 Number	of independent voting members of the governing body (Part VI, line 1b)		4	400
Ę	5 Total nur	nber of individuals employed in calendar year 2013 (Part V, line 2a)		5	13
Ä		nber of volunteers (estimate if necessary)		6	0
a,	1	elated business revenue from Part VIII, column (C), line 12		7a	14,488
; —	b Net unrei	ated business taxable income from Form 990-T, line-34	Prior Yea	7b	-872 Current Year
B	8 Contribut	ions and grants (Part VIII, line 1h)		488	32,972
֓֞֞֞֞֜֜֞֞֞֓֓֓֓֓֞֩֞֩֞֞֞֩֞֞֡֞֞֡		service revenue (Part VIII, line 2g)		7,157	82,988
Revenue	_	nt income (Part VIII, column (A), lines 3, 4, and 7d); MAY 1 9 2014	<del></del>	30	17
5 2		enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	61	.,888	18,270
•		enue – add lines 8 through 11 (must equal Part VIII, column (A) line 12);		,563	134,247
Ž		nd similar amounts paid (Part IX, column (A), lines 1=3)		2,000	3,739
± ₹ •	1	paid to or for members (Part IX, column (A), line 4)			0
<b>2</b> 9	15 Salanes,	other compensation, employee benefits (Part IX, column (A), lines 5–10)	4.4	,720	51,938
MAGN penses	16a Professio	nal fundraising fees (Part IX, column (A), line 11e)			0
	<b>b</b> Total fund	draising expenses (Part IX, column (D), line 25) ▶ 0	***************		
ŵ	17 Other exp	enses (Part IX, column (A), lines 11a-11d, 11f-24e)	64	1,534	64,824
	18 Total exp	enses. Add lines 13–17 (must equal Part IX, column (A), line 25)		,254	120,501
		less expenses. Subtract line 18 from line 12		7,309	13,746
Net Assets or Fund Balances	30 T-4-1-		eginning of Curr	ent Year	End of Year 118,818
Sse Bala	∠u lotalass	ets (Part X, line 16)		3,577	40,993
	21 Total liab	The state of the s		7,773	77,825
		s or fund balances. Subtract line 21 from line 20		,,,,	11,023
		perjury, I declare that I have examined this return, including accompanying schedules and statements	and to the he	et of my kn	ouledge and belief it is
		implete Declaration of preparer (other than officer) is based on all information of which preparer has			owledge and belief, it is
		101/1			16/10
Sig	ın 📗 🖥	gnature of officer		Date	71
He	1 1	6. W. Joevaer			
		pe or print name and title			
	1 1	preparer's name Preparer's signature	Date	Check	If PTIN
Pai	d 1 G	W. Joerge 1 My foreign	05/12/	14 self-em	ployed 1
	parer Firm's nar	ne > Individual	Fi	m's EIN	
Use	Only Firm's add	ress +617 15 Ave. Charles Gety In 52616	Pt	none no 64	41-228-6251
Мау	the IRS discuss	this return with the preparer shown above? (see instructions)			X Yes No
For	Paperwork Redu	ction Act Notice, see the separate instructions.			Form <b>990</b> (2013)

om 990 (2013) B	.P.O. ELKS CLUB	& LODGE 23	-7131531	Page 2
	tement of Program Servi	•	Dow! III	П
	e the organization's mission:	a response or note to any line in this	s Part III	
	•			
			•	
				•
Did the organiz	zation undertake any significant p	rogram services during the year which were n	ot listed on the	<del></del>
prior Form 990	or 990-EZ?			Yes X No
	be these new services on Schedi	ule O significant changes in how it conducts, any p		
B Did the organiz services?	zation cease conducting, or make	significant changes in now it conducts, any p	rogram	Yes X No
	be these changes on Schedule C	<b>)</b> .	•	
		complishments for each of its three largest pro	-	
		nizations are required to report the amount of	grants and allocations to others,	
the total expen	ises, and revenue, if any, for each	i program service reported		
la (Code:	) (Expenses \$	including grants of \$	) (Revenue \$	<del></del>
•				
				•
•				••
. (0.1	\/F			
(Code:	) (Expenses \$	including grants of \$	) (Revenue \$	
•				
				,
(Code:	) (Expenses \$	including grants of \$	) (Revenue \$	
				- <del></del>
=	services (Describe in Schedule 18,780 inclu		(Davidue C	,
(Expenses \$	service expenses	ding grants of \$ 3,739 ) 18,780	(Revenue \$	

	·		Yes	_No_
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			v
2	complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	1		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	_2_		
3	candidates for public office? If "Yes," complete Schedule C, Part I			x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	3_		
•	election in effect during the tax year? If "Yes," complete Schedule C, Part II	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		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	<u> </u>		
•	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	<u> </u>		
·	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8	·	X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	_10_		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	) 1	}	
	complete Schedule D, Part VI	11a	_X_	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	1 1	İ	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	<u> </u>	X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	1		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> </u>
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets		ĺ	
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<u>X</u>
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	446		X
120	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		
124	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	124		
~	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	$\neg \uparrow$	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		$\overline{\mathbf{x}}$
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			
	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 other assistance to or			
	for any foreign organization? 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 other		l	
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
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	]	_ <u>X</u> _
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		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		ł	
	If "Yes," complete Schedule G, Part III	19		<u> X</u>
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u> </u>
<u> </u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	l	

			т	
21	Pud the expanization report more than \$5,000 of grants or other equiptenes to any demands a property or		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	1	}	T.F
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States	21	-	X
	on Part IX, column (A), line 2? if "Yes," complete Schedule I, Parts I and III	22	1	x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	22	-	
20	organization's current and former officers, directors, trustees, key employees, and highest compensated	-		
	employees? If "Yes," complete Schedule J			x
242	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23		^
2-7a	\$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 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c		240	<b></b>	
·	to defease any tax-exempt bonds?	24c		
d		24d	-	
_	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	240		
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b		254		
_	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		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	1200		
	current or former officers, directors, trustees, key employees, highest compensated employees, or	1		
	disqualified persons? If so, complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	20		
	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	ĺ	x
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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	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		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	1 1		
	conservation contributions? If "Yes," complete Schedule M	30	l	<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	1		
	Part I .	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	1 1	. [	
	complete Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	1 1		
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,	1 1	ľ	
	or IV, and Part V, line 1	34		<u> </u>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	-	X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	۱ <u>۱</u>	Į	
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable		- 1	
	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,	_	}	v
	Part VI	37	<del>}</del>	<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			x
	19? Note. All Form 990 filers are required to complete Schedule O	38		

Pź	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			Ī
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			ŧ
	reportable gaming (gambling) winnings to prize winners?	1c		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return  2a 13			ŧ
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	<u> </u>
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			Ī
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	_3a	X	<u> </u>
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	X	├─
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			ļ
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		X
b	If "Yes," enter the name of the foreign country: ►			I
5a	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5b		<b>├</b> ┻
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	5c		<del> </del>
- Ou	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	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		<del></del>
-	gifts were not tax deductible?	6ь		ĺ
7	Organizations that may receive deductible contributions under section 170(c).	0.0		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			Ė
	and services provided to the payor?	7a		ĺ
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		L
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<b></b>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring		1	ĺ
_	organization, have excess business holdings at any time during the year?	8		<del></del>
9	Sponsoring organizations maintaining donor advised funds.  Did the organization make any taxable distributions under section 4966?		1	
a b	Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
10	Section 501(c)(7) organizations. Enter:	30		
а	Initiation fees and capital contributions included on Part VIII, line 12		1	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b		1	į
11	Section 501(c)(12) organizations. Enter:		I	
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources	$\neg$	1	
	against amounts due or received from them.)		I	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	l	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
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.			
b	Enter the amount of reserves the organization is required to maintain by the states in which		ı	
	the organization is licensed to issue qualified health plans		1	
С	Enter the amount of reserves on hand			<u></u>
l4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	- 1	

Pa	art VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through the circumstances, processes, or changes in the circumstances, processes, or changes in	-	-						
	<ul> <li>response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes i</li> <li>Check if Schedule O contains a response or note to any line in this Part VI</li> </ul>	n Sch	edule O	. See insu	uction	is.			
Sec	ction A. Governing Body and Management								
		ایا	400	· · · · · · · · · · · · · · · · · · ·	Yes	No			
1a	<b>0 0</b> ,	1a	400			ŧ			
	If there are material differences in voting rights among members of the governing body, or					Ī			
	if the governing body delegated broad authority to an executive committee or similar					l			
	committee, explain in Schedule O.		400			ŧ			
ь		<u>1b</u>	400	<b></b> ∤		I			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with				1	٠.,			
3	any other officer, director, trustee, or key employee?			<u>2</u> _	├─	X			
3	Did the organization delegate control over management duties customarily performed by or under the direct			١.					
4	supervision of officers, directors, or trustees, or key employees to a management company or other person?			3	<del> </del> -	X			
5	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			5		X			
6	• • • • • • • • • • • • • • • • • • •								
	Did the organization have members or stockholders?			6_	<del>                                     </del>	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?					x			
b				7a	$\vdash$				
	stockholders, or persons other than the governing body?			7b		x			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	· hy the	followin			-			
a	The governing body?	Dy tile	FIGHOWIN	8a	x	ĺ			
b				8b	X				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			00	<del></del> -	<del></del>			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		x			
Sec	ction B. Policies (This Section B requests information about policies not required by the Inter	nal R	evenue		<u></u> _				
					Yes	No			
I0a	Did the organization have local chapters, branches, or affiliates?			10a		X			
þ	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?			10b					
l1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	he forr	n?	11a		X			
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990								
2a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X				
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to conf	licts?	12b	X	<u> </u>			
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"								
	describe in Schedule O how this was done			12c		X			
3	Did the organization have a written whistleblower policy?			13	х	<del></del>			
4	Did the organization have a written document retention and destruction policy?			14	X				
5	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?				/ ∦	32			
a	The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization			15a	<del></del>	$\frac{\mathbf{x}}{\mathbf{x}}$			
þ	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			15b					
e-	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement								
Va	with a taxable entity during the year?			460	l f	Х			
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			16a					
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the					É			
	organization's exempt status with respect to such arrangements?			16b	†	: 			
ec	etion C. Disclosure								
7	List the states with which a copy of this Form 990 is required to be filed ▶ NONE								
8	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501	(c)(3)s	only)						
	available for public inspection. Indicate how you made these available. Check all that apply.								
	Own website Another's website X Upon request Other (explain in Schedule O)								
9	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest	t policy	, and						
	financial statements available to the public during the tax year.								
0	State the name, physical address, and telephone number of the person who possesses the books and records of the	е							
	organization ► GERALD W 617 1ST AVENUE	_				<b>_</b>			
CH	HARLES CITY IA 5061	6	(	641-22	8-6:	<b>251</b>			

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

Check if Schedule O contains a response or note to any line in this Part VII

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

- 1a 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 nor any related organizations compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any	bo off	x, unle îcer a	Pos check ess pe	rson	than one is both a	n	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) LARRY MICHEHL							_			
	20.00				Ī	} [				
SECRETARY	0.00			X	<u> </u>			0		0
(2) G W JOERGER										
	4.00				}	li				
TREASURER	0.00	<u>L</u>		X				0	0	0
(3) ERIKA TROYNA		1								
	2.00						Ì			
TRUSTEE	0.00	<u> </u>		X				0	0	0
(4) JEREMY FLOOD		1					i			
	2.00	1								
PRESIDENT	0.00	<u> </u>		X				0	0	0
(5) ANN TROGE								· · · · · · · · · · · · · · · · · · ·		
	2.00		1							
LEADING KNIGHT	0.00	1		X			╛	0	0	0
(6) TOMMY JOSACK		1				i i				
	2.00	1				}	1	•		
LOYAL KNIGHT	0.00	<u> </u>		X				0	0	0
(7) GENE HEITZ						1 1	ļ			
	2.00	l ,					ı			
TRUSTEE	0.00	<u> </u>		X				0	0	0
(8) JASON WEBSTER						1	Ì			
	2.00									
TRUSTEE	0.00			X			_	0	0	0
(9) DENNIS DONOVAN										
	2.00						Į			1
TRUSTEE	0.00	<u></u>		X				0	0	0
(10) STEPHEN SHANNON										
	2.00	1				1	İ		•	
TRUSTEE	0.00	L.,		X				0	0	0
(11) ERIC ISSACS						}				
	2.00							ĺ		
LECTURING KNIGHT	0.00	$oxed{oxed}$		X				0	0	0
DAA										Form <b>990</b> (2013)

<u>Pa</u>	rt VII Section A. Officer	rs, Directors, Tru	stee	s, K	ey E	mpl	oyee	s, a	and Highest Compensated	Employees (continued)				
	(A) Name and title	(B) (C) Average hours per (do not check more than o box, unless person is both officer and a director/truste hours for						an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	cor	(F) Estima amoun othe mpens from ti	ted t of r ation	
		related organizations below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(N-21033-MIGC)	or aı	rganiza nd rela ganiza	ation ated	
(12)							=							
(13)			 											
(14)		<del> </del>	-											
(15)														
(16)			-	-		-								
(17)			-											_
(18)			-		-									
(19)					-						<del></del>			
1b c	Sub-total  Total from continuation sho	eets to Part VII,	Sect	ion A		l <u>.</u>	<u> </u>	<b>&gt;</b>						
d	Total (add lines 1b and 1c) Total number of individuals (i				hose	liste	ed ab	ove	) who received more than \$	5100,000 in				_
	reportable compensation from  Did the organization list any f											$\dashv$	Yes	No
4	employee on line 1a? If "Yes, For any individual listed on lin organization and related organ	" complete Sched ne 1a, is the sum o	ule . of rep	for : oorta	such ble d	ındı omp	vidua ensa	i ation	and other compensation fr	om the		3		Х
5	individual Did any person listed on line for services rendered to the o	1a receive or acci	ue c	omp	ensa	ition	from	any	unrelated organization or i			5		X
Section 1	ion B. Independent Contract								A Al A Al	\$400,000 of				
	Complete this table for your fi compensation from the organ	ization. Report co	mpe	nsat	ion f	or th	e cal	enda I	ar year ending with or withir	the organization's tax year	·		(C)	
	Name an	(A) d business address				-			Descript	(B) tion of services	_	Con	(C) npensat	tion
		<del></del>						_						
							_							
	Total number of independent	contractors (inclu	ding	but i	not li	mite	d to t	hose	e listed above) who					
DAA	received more than \$100,000	of compensation	from	the	orga	nıza	tion i	<u> </u>		0		C	aan	(2012)

Statement of Revenue Part VIII Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated (D) Revenue (A) Total revenue exempt function business excluded from tax under sections revenue 512-514 ifts, Grants ir Amounts 1a Federated campaigns 1a 1b 32,972 b Membership dues c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f g Noncash contributions included in lines 1a-1f 32,972 h Total. Add lines 1a-1f Program Service Revenue Busn. Code 52,436 52,436 2a NON-TAXABLE SALES 12,145 12,145 MISC INCOME 7,360 7,360 RESERVATION INCOME 6,000 6,000 GRANT INCOME FURNACE 5,047 5,047 f All other program service revenue 82,988 g Total. Add lines 2a-2f 3 Investment income (including dividends, interest, 17 17 and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (II) Personal (i) Real 12,194 6a Gross rents 6,904 **b** Less rental exps 5,290 Rental inc or (loss) 5,290 5,290 Net rental income or (loss) ▶ Gross amount from (i) Securities (II) Other sales of assets other than inventor **b** Less cost or other basis & sales exps c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 b Less: direct expenses b c Net income or (loss) from gaming activities  $\blacktriangleright$ 10a Gross sales of inventory, less 17,355 returns and allowances 8,157 b Less: cost of goods sold b 9,198 9,198 c Net income or (loss) from sales of inventory  $\triangleright$ Miscellaneous Revenue **Busn Code** 2,977 2,977 LINEN INCOME 11a 805 805 b INITIATION INCOME d All other revenue 3,782 e Total. Add lines 11a-11d 86,787 134,247 14,488 Total revenue. See instructions

## Form 990 (2013) B.P.O. ELKS CLUB & LODGE

Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must cor Check if Schedule O contains a respo			ete column (A)	
	not include amounts reported on lines 6b, Bb, 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		DAPOTISUS	general expenses	сарензез
2	organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in	<del></del>			
2	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,			•••••••••••••••••••••••••••••••••••••••	***************************************
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16	3,739	3,739		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	1,200		1,200	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				<del></del>
7	Other salaries and wages	46,847		46,847	·
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	3 001			
10	Payroll taxes	3,891	<del></del>	3,891	
11	Fees for services (non-employees):	1	Ì	İ	
a b	* F			<del></del>	<del></del> .
c	Accounting	3,130		3,130	<del></del>
d	· · · · · · · · · · · · · · · · ·	= 7200		3,230	
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g					
_	(A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	205	205		
13	Office expenses	2,950		2,950	
14	Information technology				
15	Royalties	17 500		17 500	
16	Occupancy	17,502		17,502	
17	Travel	<del></del>	<del></del>		
18	Payments of travel or entertainment expenses				
19	for any federal, state, or local public officials Conferences, conventions, and meetings	3,515	3,515	<del></del>	
20	Interest	112	3,313	112	
21	Payments to affiliates	7,372	7,372		<del></del>
22	Depreciation, depletion, and amortization	986	986		
23	Insurance	5,637		5,637	
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)				
а	REPAIR & MAINT	9,393		9,393	<del></del>
b	MISC	6,331		6,331	<del></del>
C	RE TAXES YOUTH ACTIVITIES	3,250 2,963	2,963	3,250	
d		1,478	2,303	1,478	<del></del>
e 25	All other expenses  Total functional expenses. Add lines 1 through 24e	120,501	18,780	101,721	0
25 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)				
DAA				<del></del>	Form 990 (2013)

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 6,420 Cash-non-interest bearing 2,471 28,887 28,33 Savings and temporary cash investments 2 Pledges and grants receivable, net 3 4 Accounts receivable, net 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 organizations (see instructions). Complete Part II of Schedule L 6 Notes and loans receivable, net 1,600 1,600 Inventories for sale or use 8 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or 469,286 other basis. Complete Part VI of Schedule D 10a 382,870 119,443 86,416 b Less: accumulated depreciation 10b 10c 11 Investments—publicly traded securities 11 12 Investments-other securities See Part IV, line 11 12 Investments-program-related. See Part IV, line 11 13 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 15 156,350 118,818 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 38,577 40,993 17 17 Accounts payable and accrued expenses 18 18 Grants payable 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 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 38,577 40,993 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here ▶ **Fund Balances** complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets 27 27 28 Temporarily restricted net assets 28 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here Net Assets or complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund 77,825 117,773 32 32 Retained earnings, endowment, accumulated income, or other funds 117,773 77,825 33 33 Total net assets or fund balances 118,818 156,350 Total liabilities and net assets/fund balances

Form 99	90 (2013) B.P.O. ELKS CLUB & LODGE 23-7131531			_ Pa	age 12
Part	XI Reconciliation of Net Assets				
	· Check if Schedule O contains a response or note to any line in this Part XI				X
1 T	otal revenue (must equal Part VIII, column (A), line 12)	1	1:	34,	247
2 T	otal expenses (must equal Part IX, column (A), line 25)	2	12	20,	501
3 R	Revenue less expenses. Subtract line 2 from line 1	3		13,	746
4 N	let assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1:	17,	773
5 N	let unrealized gains (losses) on investments	5			
6 D	Conated services and use of facilities	6			
7 Ir	nvestment expenses .	7			
8 P	rior period adjustments	8			
9 C	Other changes in net assets or fund balances (explain in Schedule O)	9		53,	694
10 N	let assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line	1 1			
	3, column (B))	10	<u> </u>	<u>77, </u>	825
Part					
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
	ccounting method used to prepare the Form 990:		_	:	
	the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.			į	Ī
	Vere the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	"Yes," check a box below to indicate whether the financial statements for the year were compiled or				
re	eviewed on a separate basis, consolidated basis, or both.				ŧ
Ĺ.	Separate basis Consolidated basis Both consolidated and separate basis				I
	Vere the organization's financial statements audited by an independent accountant?		2b		X
	"Yes," check a box below to indicate whether the financial statements for the year were audited on a				İ
Se	eparate basis, consolidated basis, or both				I
L	Separate basis Consolidated basis Both consolidated and separate basis				ŧ
	"Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight			ł	
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	·····	<u> </u>
	the organization changed either its oversight process or selection process during the tax year, explain in			1	Ī
	chedule O.			1	l
	s a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	ne Single Audit Act and OMB Circular A-133?		3a		<u> </u>
	"Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
re	equired audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		<u></u>
			Form	ո <b>99</b> 0	(2013)

### 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, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 Open to Public

Employer Identification number

B.P.O. ELKS CLUB & LODGE 23-7131531 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. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically importar cland area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) Yes No (i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 \$ (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Sche	edule D (Form 990) 2013 B.E.O. E	TV2 CTOP &	שטטע	<u> </u>		<u> 23-1</u>	121221		Page:
Pa	irt # Organizations Maintainii	ng Collections of	f Art, Hi	storical T	reasures,	or Othe	r Similar Ass	sets (continued	)
3	Using the organization's acquisition, access collection items (check all that apply):	sion, and other record	s, check a	ny of the follo	owing that are	e a signific	ant use of its		
а	Public exhibition	d 🗍	Loan or e	exchange pro	grams				
b	Scholarly research	e 🗍	Other	•	•				
С	Preservation for future generations								
4	Provide a description of the organization's	collections and explain	n how they	further the o	rganization's	exempt p	urpose in Part		
	XIII.								
5	During the year, did the organization solicit assets to be sold to raise funds rather than					imilar		□ <b>v</b> 「	٦
Pa	art IV Escrow and Custodial A		art or the	organization	s collection?			Yes	No
	Complete if the organization 990, Part X, line 21.		" to For	m 990, Pai	rt IV, line 9	, or repo	orted an amou	unt on Form	
1a	Is the organization an agent, trustee, custos	dian or other intermed	iary for co	ntributions or	other assets	not		<del></del>	
	included on Form 990, Part X?		•					Yes	No
ь	if "Yes," explain the arrangement in Part XII	I and complete the fol	lowing tab	ole.					
_	and the second s	a.r.a complete alle re-						Amount	
С	Beginning balance						1c		
	Additions during the year						1d		
e	Distributions during the year	•					1e		
f	Ending balance						1f		
2a	Did the organization include an amount on	Form 990. Part X. line	21?				<del></del>	Yes	No
	If "Yes," explain the arrangement in Part XII			has been pro	vided in Par	XIII			┥"
	ert V Endowment Funds.		<u> </u>	у о о о р . о					
	Complete if the organization	on answered "Yes	" to For	m 990. Par	t IV. line 1	0.			
		(a) Current year		Prior year	(c) Two yea		(d) Three years b	ack (e) Four years	back
1a	Beginning of year balance	<del></del>							
	Contributions			··········					
C	Net investment earnings, gains, and	<del></del>							
	losses								
d	Grants or scholarships								
	Other expenditures for facilities and								
	programs								
f	Administrative expenses								
a	End of year balance								
2	Provide the estimated percentage of the cui	rrent vear end balance	e (line 1a.	column (a)) h	eld as.				
а	Board designated or quasi-endowment ▶	%	(						
b	Permanent endowment ▶ %								
С	Temporarily restricted endowment ▶	%							
	The percentages in lines 2a, 2b, and 2c sho	ould equal 100%.							
3a	Are there endowment funds not in the posse	·	tion that a	re held and a	dministered	for the			
	organization by.							Yes	No
	(i) unrelated organizations							3a(i)	
	(ii) related organizations							3a(ii)	1
b	If "Yes" to 3a(ii), are the related organization	ns listed as required or	n Schedul	e R?				3b	
4	Describe in Part XIII the intended uses of th	·						<u> </u>	<del></del> -
Pa	rt VI Land, Buildings, and Equ								
	Complete if the organization	•	" to Forr	n 990, Par	t IV, line 1	1a. See	Form 990, Pa	art X, line 10.	
	Description of property	(a) Cost or other i		(b) Cost or o			ccumulated	(d) Book value	
		(investment)		(othe	er)	de	preciation		
1a	Land				67,677			67.	677
	Buildings				15,556		315,556		
	Leasehold improvements								
	Equipment			1	86,053		67,314	18,	739
	Other								
	. Add lines 1a through 1e (Column (d) must	equal Form 990, Part	X, column	(B), line 10(d	c).)		<b>•</b>	86,	416

Pan VII	Complete if the organization answered "Y	es" to Form 990 Part IV line	11h See Form 990 Part	X line 12
	(a) Description of security or category	(b) Book value	(c) Method of val	
	(including name of security)	(-,	Cost or end-of-year m	
(1) Financial o	derivatives			
(2) Closely-he	eld equity interests			
(3) Other				
(A)				
(B)	·			
(C)				
. <b>(D)</b>				
(E)				
(F)				
(G)			<u> </u>	
(H)				
	n (b) must equal Form 990, Part X, col (B) line 12.) ▶		<u> </u>	
Part VIII	Investments—Program Related.		44 0 5 000 5 .	V 11 4 4
	Complete if the organization answered "Y			
	(a) Description of investment	(b) Book value	(c) Method of vali Cost or end-of-year m	
(1)			Cost of enu-or-year m	CO. Talud
(1)				
(3)			<del> </del> -	<del></del>
(4)		<del></del>	<del></del>	<del></del>
(5)		<del></del>		<del></del>
(6)			<del> </del>	<del></del>
(7)	<del></del>		<del> </del>	
(8)				<del> </del>
(9)				
	n (b) must equal Form 990, Part X, col. (B) line 13 )			<del></del>
Part IX	Other Assets.		<u> </u>	
·	Complete if the organization answered "Ye	es" to Form 990, Part IV, line	11d. See Form 990, Part	X, line 15.
	(a) Descrip	ption		(b) Book value
(1)				
(2)	<u></u>			
(3)				
(4)				
(5)				
(6)				
(7)	<del></del>	<del></del>		
(8)				
(9)	(h) must oqual Form 000. Best V and (B) line 45.	-		
Part X	n (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities.			
Talla	Complete if the organization answered "Ye	es" to Form 990 Part IV line	11e or 11f See Form 00/	) Part Y
	line 25.	os to ronn 990, Fait IV, IIIIe	THE OF THE OCCUPING 990	2, 1 alt 7,
 I.	(a) Description of liability	(b) Book value		
	income taxes			
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
rotal. (Column	n (b) must equal Form 990, Part X, col (B) line 25 ) ▶			, <u></u>
	uncertain tax positions. In Part XIII, provide the text of t	the footnote to the organization's fin-	ancial statements that reports the	•

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Sche	dule D (Form 990) 2013 B.P.O. ELKS CLUB & LODGE		-7131531	Page 4
Pa	at XI Reconciliation of Revenue per Audited Financial Sta		ue per Return.	
	Complete if the organization answered "Yes" to Form 99	00, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			_
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	
Pa	at XII Reconciliation of Expenses per Audited Financial St	atements With Expe	nses per Return.	
	Complete if the organization answered "Yes" to Form 99	00, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	_	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
C	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1	, ,	3	<u> </u>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1.			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
C	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			
Part XIII Supplemental Information				

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4, Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

DA

Part XIII Supplemental Information (continued)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

2013

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization

B.P.O. ELKS CLUB & LODGE

Employer Identification number 23-7131531

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 NO REVIEW WAS OR WILL BE CONDUCTED.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION NO DOCUMENTS AVAILABLE TO THE PUBLIC

FORM 990, PART XI - ADDITIONAL INFORMATION
ADJUSTMENT MADE FOR ACCRUED DEPRECIATION