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Form **990**

Return of Organization Exempt From Income Tax

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A	For the	e 2013 cale	endar year, or tax year beginning April 1 , 201	3, and end		arch 31	, 20 14		
В		if applicable.	D Employer identification number						
	Address	s change	1	23-7131575					
	Name c	•	Doing Business As Number and street (or P O box if mail is not delivered to street address)	Room/	suite	E Telephone number			
\Box	Initial re	-	609 Kansas Avenue				9133674925		
$\overline{\sqcap}$	Termina		City or town, state or province, country, and ZIP or foreign postal code	<u> </u>			9133014923		
H		ed return						404057	
\exists			Atchison, KS 66002-2441 F Name and address of principal officer. Robert Cobleigh		1	G Gross r		101357	
ш	Арриса	mon pending	I ~		1	•	r subordinates? Yes		
_	Toy our		609 Kansas Ave. Atchison, KS 66002 501(c)(3)				es included? Yes a list (see instruction		
÷	Website	empt status		or 527_			•	•	
K			✓ Corporation ☐ Trust ☐ Association ☐ Other ► L	Vans of farm		p exemption		1156	
	art I	Summ		Year of form	ation 190	1 M State	e of legal domicile	<u>KS</u>	
	1			-					
Ф	'		escribe the organization's mission or most significant activiti	es: 10 pr	ovide chant	for vetera	ans and youth in	our	
Š		communi	<u>ıry</u>						
Governance	2	Chook th	is box ▶ ☐ if the organization discontinued its operations or					•	
8	3					- 1	its net assets.	_	
ري ح	4		of voting members of the governing body (Part VI, line 1a).	 		. 3	ļ	5	
es.	5		of independent voting members of the governing body (Part)	. 4	 	0	
Activities &	6		mber of individuals employed in calendar year 2013 (Part V,			5		0	
탾	7a		mber of volunteers (estimate if necessary)			. 6		379	
•	b		· · · · · · · · · · · · · · · · · · ·			. <u>7a</u>	 	0	
_	- 5	ivet unite	lated business taxable income from Form 990-T, line 34	<u> </u>	Prior	. 7b	Current Y	0	
	8	Contribu	tions and grants (Part VIII, line 1h)		FIIO		 		
Revenue	9		<u> </u>	92256		95808			
Ver	10		service revenue (Part VIII, Inne 2g)			0		0	
æ	11		ent income (Part VIII, column (A), lines 3, 4, and 7d)	6392	† · · · · · · · · · · · · · · · · · · ·	3264			
	12		venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e enue—add lines 8 through 11 (must equal Part VIII, column (A)			2735	1	2285	
	13			i, iiie 12)		101383		101357	
	14		nd similar amounts paid (Fart IX_column (A), lines (-3)	16121		24245			
	15		paid to or for members (Part IX, Column (A)) hh (-1)	ļ	11493	· · · · · · · · · · · · · · · · · · ·	0		
ses	16a		other compensation, employee benefits (Part IX, column 63, lin	es 5–10)		3000	4200		
Expenses	1 .	Total fun	onal fundraising fees (Part Scolumb (A) 100 (14) . 6		SCHOOL CONTRACTOR	0		0	
ă	17		(d. t. i.t.)						
	i	Tatal ave	penses (Part IX, column (A), lines 11a-11e, 111-24e) penses Add lines 13-17 (<u>must equal Part IX, column (A), li</u> ne			68894	 	92879	
	18			(25) .	ļ	99508	 	121324	
		nevenue	less expenses. Subtract line 18 from line 12		Beginning of	1875		-19967	
sets or	20	Total aga	nata (Dart V. line 16)		beginning or		†		
Asse	21		sets (Part X, line 16)		ļ 	368445		590542	
Net Ass Fund Ba	22		ts or fund balances. Subtract line 21 from line 20			1069		13308	
	art li		ture Block	· · ·	L	367376	L	577234	
_									
tru	e, correc	ct, and comp	iry, I declare that I have examined this return, including accompanying sched telp Declanation of preparer to the rithm officer) is based on all information of	iules and sta which prepa	rer has any kno	vine best of	my knowledge and	Deliet, it is	
		1	Solve G Cal 7						
Sig	n	Sign	lature of officer			Date			
He		R	Obser E. Cobter		•	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	8-14		
		Type	e or print name and title			0-	71-0		
_			pe preparer's name Preparer's signature		Date		PTIN		
Pa						Check self-em			
	epare		name >	i	7-		p.oyeu		
US	se On	ייין עיי	address >			rm's EIN ▶			
Ma	v the I		s this return with the preparer shown above? (see instruction	15)	<u>IP</u>	hone no		- Na	
_					N= 440000	· · ·		No No	
. 0	Lahel.	MONK DAGO	ction Act Notice, see the separate instructions.	Cat	No 11282Y		rom :	990 (2013)	

Cat No 11282Y

Form 99	0 (2013) Page 2
Part .	
1	Briefly describe the organization's mission:
	To provide charity to veterans and youth in our community
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ✓ No
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 2250 including grants of \$) (Revenue \$) College scholarships for 3 local students
4b	(Code:) (Expenses \$ 5661 including grants of \$) (Revenue \$) Christmas food baskets for 28 local families
4c	(Code:) (Expenses \$ 3500 including grants of \$) (Revenue \$) Drug awareness gifts to 4 local law enforcement agencies
4d	Other program services (Describe in Schedule O.) (Expenses \$ 12834 including grants of \$) (Revenue \$)
4e	Total program service expenses ► 24245

Part	V Checklist of Required Schedules			
``			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
_	complete Schedule A	1		√
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? 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	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			Ť
	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		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		/
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
_	complete Schedule D, Part III	8		✓
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			ŀ
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		✓
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	Ť		
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		✓
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	1	7.19	
_	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," complete Schedule D, Part VI	11a		1
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	114		<u> </u>
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		✓
С	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		✓
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		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
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		✓
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			/
h	Schedule D, Parts XI and XII	12a	ļ	
-	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	· · · · · · ·	1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
b				
	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	446		/
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	14b	-	Ť
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other		1	
4-	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16	<u> </u>	1
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)			,
18	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17		✓
. •	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
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		✓
20 a	• • • • • • • • • • • • • • • • • • • •	20a	 	1
D	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		1

Part	Checklist of Required Schedules (continued)			Page 4
	Delth-		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	21		1
22	Did the organization report more than \$5,000 of grants or 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	1	
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 25a	24a		1
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		√ √
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		1
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		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		1
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		1
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).		ķ	Ø,
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		✓ ✓
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		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
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		1
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		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		√
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	35b 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,			
38	Part VI	37	1	1
			m 99 0	(2013)

Part				
	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 1a 6			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	√	
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 0	Ì		
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
	- · · · · · · · · · · · · · · · · · · ·	2b		<i>Ž.</i>
За	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
_	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓
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		<u> </u>
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		'
b	If "Yes," enter the name of the foreign country: ▶			۸
_	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		✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	. 3	39	85.5
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		et 35	
	and services provided to the payor?	7a		✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year	72.00 5.00 5.00 5.00 5.00 5.00 5.00 5.00	% .	30
е	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		1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
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			Ì
	organization, have excess business holdings at any time during the year?	8		1
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		1
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		1
10	Section 501(c)(7) organizations. Enter.			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:	1		
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources	1		
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		ļ
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	120		-
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		
а	Note. See the instructions for additional information the organization must report on Schedule O.	ısa		
b	Enter the amount of reserves the organization is required to maintain by the states in which			ľ
D	All a supervised to the second day for the second d			
С		}		
	L.*** L	4.4		 ,
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	_	

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 the response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change						
•	Check if Schedule O contains a response or note to any line in this Part VI				0/13. ₹]		
Section	on A. Governing Body and Management	· · · · · · · · ·		• •			
				Yes	No		
1a	Enter the number of voting members of the governing body at the end of the tax year	1a5					
	If there are material differences in voting rights among members of the governing body, or						
	if the governing body delegated broad authority to an executive committee or similar						
	committee, explain in Schedule O.		,	`			
b							
2	Did any officer, director, trustee, or key employee have a family relationship or a business	relationship with					
_	any other officer, director, trustee, or key employee?		2		1		
3	Did the organization delegate control over management duties customarily performed by or supervision of officers, directors, or trustees, or key employees to a management company or oth				,		
		·=	3		1		
4 5	Did the organization make any significant changes to its governing documents since the prior Form 9 Did the organization become aware during the year of a significant diversion of the organization		5		-		
6	Did the organization become aware during the year of a significant diversion of the organization based in the organization based in a significant diversion of the organization become aware during the year of a significant diversion of the organization become aware during the year of a significant diversion of the organization.	on s assets r.	6	√	<u> </u>		
7a	Did the organization have members of stockholders, or other persons who had the power to	elect or appoint	۳				
	one or more members of the governing body?		7a	1			
b	Are any governance decisions of the organization reserved to (or subject to approve		<u> </u>				
-	stockholders, or persons other than the governing body?		7b		1		
8	Did the organization contemporaneously document the meetings held or written actions ur	ndertaken during					
	the year by the following:		<i>\$</i> '				
а	The governing body?		8a	✓			
b	Each committee with authority to act on behalf of the governing body?		8b	>			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cann						
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule of		9	. ,	√		
Secti	on B. Policies (This Section B requests information about policies not required by the	ne Internal Reven	ue C	Yes	No		
40-	Did the examination have local chanters branches as efficience?		100	165	1		
10a b	Did the organization have local chapters, branches, or affiliates?	of such chanters	10a		-		
	affiliates, and branches to ensure their operations are consistent with the organization's exer		10b		1		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before	re filing the form?	11a		1		
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990						
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a		1		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could gi		12b				
С	Did the organization regularly and consistently monitor and enforce compliance with the describe in Schedule O how this was done.	policy? If "Yes,"	12c				
13	Did the organization have a written whistleblower policy?		13		1		
14	Did the organization have a written document retention and destruction policy?		14		1		
15	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 deliberatio	n and decision?	1				
а	The organization's CEO, Executive Director, or top management official		15a		1		
b	Other officers or key employees of the organization		15b		1		
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		Ì				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or sim				<u></u>		
	with a taxable entity during the year?		16a		/		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take steps						
	organization's exempt status with respect to such arrangements?		16b				
Secti	on C. Disclosure		1 .00				
17	List the states with which a copy of this Form 990 is required to be filed ▶	· · · · · · · · · · · · · · · · · · ·	-				
18	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 Upon request Other (explain in So	chedule O)					
19	Describe in Schedule O whether (and if so, how) the organization made its governing docum	ents, conflict of int	erest	polic	y, and		
	financial statements available to the public during the tax year.	_	_				
20	State the name, physical address, and telephone number of the person who possesses the based on the person who person wh	ooks and records	of the	•			
	organization: ► Stephen Brull 609 Kansas Avenue Atchison, KS 66002 913-367-4925						

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Form	990	1201	31

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

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

- 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 no	r any relate	d org	anız	atio	n c	ompe	nsa	ited any currer	t officer, director	r, or trustee.
				(0	C) ition					
(A)	(B)	(do n	ot ch			than o	one	(D)	(E)	(F)
Name and Title	Average hours per	box,	unles	s pe	rson	is both	an	Reportable compensation	Reportable compensation from	Estimated amount of
	week (list any					or/trustee)		from	related	other
	hours for related	호호	nstit	Officer	ey (	콜	Former	the organization	organizations (W-2/1099-MISC)	compensation from the
	organizations	ecto	utio	P 4	Key employee	est c	Ē	(W-2/1099-MISC)	(**-2/1055-14113C)	organization
	below dotted	۱ ٩ ई	nal t		loye	I S				and related organizations
	1.110,	Individual trustee or director	Institutional trustee		Ф	Highest compensated employee				Organizations
			ĕ			ated				
(1) Francis Lorenz	8					<u> </u>				
(1) Francis Lorenz Trustee	<del> </del>	1						0	0	0
(2) Steve Betts	4				<del>                                     </del>		-	† <del>-</del>		•
Trustee	†i	1						l 0	l	0
(3) Dan Senecal	4						<b></b>			
Trustee	<u> </u>	✓						0	o	0
(4) Diana Servaes	4									
Trustee		✓					<u> </u>	<u> </u>	О	0
(5) Randy Gragg	4									
Trustee		<b>✓</b>	_					0	0	0
(6) Bob Cobleigh	8									
Exalted Ruler				<b>✓</b>	_			1100	0	0
(7) Kristie Hager	8			١,						
Secretary	<u> </u>	_	<u> </u>	<b>✓</b>	<b> </b>		_	900	0	0
(8) Stephen Brull	5	-		/						_
Treasurer (0) 0		-	_	ľ	┝		-	5000	0	0
(9) Sean Hundley	44	i		/	1					
Leading Knight	4	<del></del>	┢	Ť	$\vdash$	-	├	0	0	0
(10) Aldı Ensmınger Loyal Knight	<del> </del>	İ		1				_		
(11) Decord Disease	4		┢	Ť	$\vdash$		-	0	0	0
Lecturing Knight	<del>+</del>	ł		1				0	0	0
(12)	+			H	$\vdash$			·	<u>_</u>	
S7	<del>†</del>	i		ŀ						
(13)	1	ļ	Т	İΤ					i	·
***************************************	<b>†</b>	1	1							
(14)			1							<del> </del>
	1	1		1		I				

Form 99		eee Key E				. al L	1:-b		`amanantad F			- d)		Page <b>8</b>
,	VII Section A. Officers, Directors, Trust  (A)  Name and title	(B) Average hours per	(do n	ot ch	Pos neck s pe	c) ition more rson	than o	one n an	(D) Reportable compensation	(E) Reportable compensation fr		( <b>F)</b> Estimated amount of		
		week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MIS		comp froi orgai and	ther ensation the nization related lization	n t
(15)							ä							
(16)														
(17)														
(18)														
(19)														
(20)									· <u>.</u>			· · ·		
(21)					-			-				<del></del>		
(22)										· ·				
(23)														
(24)												, , ,		
(25)														
	Sub-total			•	•	•		<b>&gt;</b>	7000		0			0
c d	Total from continuation sheets to Part Total (add lines 1b and 1c)	VII, Sectio		•	•			<b>&gt;</b>	7000	<del></del>	0			<u>0</u> 0
2	Total number of individuals (including bur reportable compensation from the organ	t not limited	to th				above	e) w		<u> </u>	0,000	of		
3	Did the organization list any former of			or tr	nisti	ee	kev e	emr	nlovee or high	est compens	sated		Yes	No
	employee on line 1a? If "Yes," complete	Schedule J	for s	uch	ınd	ıvid	ual					3		<b> </b>
4	For any individual listed on line 1a, is the organization and related organizations individual	greater th	an \$	150,	,000	)? /	f "Ye	s, "	complete Sch	edule J for			*	
5	Did any person listed on line 1a receive of for services rendered to the organization	or accrue co	ompe	nsa	tion	fro	m any	/ ur	related organi	zation or indiv				
Section	on B. Independent Contractors		, O.I.I.		-	-						1 3	l	1~
1	Complete this table for your five highest compensation from the organization. Re year.													ax
	(A) Name and business add	dress							(B) Description of s	ervices		(C) Compens		
								F						
								$\vdash$	· · · · · · · · · · · · · · · · · · ·					
2	Total number of independent contractor received more than \$100,000 of compen							o ti	hose listed ab	ove) who				

Part VIII												
<del>,</del>		Check if Schedule O contain	s a res	ponse or note to								
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514				
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a									
ion i	ь	Membership dues	1b	20112								
S, (	С	Fundraising events	1c	905	1							
Gif ia	d	Related organizations		30571	1							
ns,	е	Government grants (contributions										
atio er (	f	All other contributions, gifts, grants										
O E	_	and similar amounts not included abov		44220								
P P	g h	Noncash contributions included in lines <b>Total.</b> Add lines 1a–1f					1					
		Total: Add lines Ta-11	<u> </u>	Business Code	95808							
Program Service Revenue	2a				<del></del>							
Rev	b											
<u>.</u> 2	c											
ě	d											
Ē	е											
ogra	f	All other program service reve										
مِّ _	g	Total. Add lines 2a-2f					•					
	3	Investment income (including										
	_	and other similar amounts) .			3264		ļ					
	4	Income from investment of tax-ex	•	*								
	5	Royalties		(ii) Personal								
	6a	Gross rents	2285	· · · · · · · · · · · · · · · · · · ·	<i>'</i>	*	Ť					
	b	Less: rental expenses	2200	'								
	C	Rental income or (loss)	2285									
	d	Net rental income or (loss) .		<b>&gt;</b>	2285							
	7a	Gross amount from sales of (i) Secu	rities	(ii) Other		<del> </del>						
		assets other than inventory										
	b	Less: cost or other basis					ļ					
		and sales expenses .										
	С	Gain or (loss)					 					
	d	Net gain or (loss)		· · · · <b>&gt;</b>	····		<del></del>	· · · · · · · · · · · · · · · · · · ·				
anne	8a	Gross income from fundraising events (not including \$	3									
Other Reve		of contributions reported on line	-									
Ę	١.	·	· a									
ō		Less: direct expenses Net income or (loss) from fund										
		Gross income from gaming act	_	events .								
	"	See Part IV, line 19	. 2									
	ь	Less: direct expenses										
	c	Net income or (loss) from gam					· · · · · · · · · · · · · · · · · · ·					
	10a	Gross sales of inventory,	less									
		returns and allowances	· a	n								
		Less: cost of goods sold										
	С	Net income or (loss) from sale	s of inv					. <del></del>				
		Miscellaneous Revenue		Business Code								
	11a						<del> </del>					
	b	***************************************			ļ		ļ					
	C	All albor unioning										
	d	All other revenue				<del></del>						
	12	Total revenue. See instructio			101357							
					10135/		1	1				

	90 (2013)				Page <b>10</b>
	X Statement of Functional Expenses				
Section	on 501(c)(3) and 501(c)(4) organizations must con	mplete all columns.	All other organization	ns must complete co	
Do no	Check if Schedule O contains a response include amounts reported on lines 6b, 7b,	(A)	ine in this Part IX	(C)	
8b, 9b	o, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				,
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	24245			,
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	Z IZ IV		1	
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	4200			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
a b	Management				
c	Accounting	5084		<u> </u>	
d	Lobbying	3004			
е	Professional fundraising services. See Part IV, line 17		5-17-18-18-18-18-18-18-18-18-18-18-18-18-18-		
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion				
13	Office expenses	7816			
14	Information technology				
15 16	Royalties				
17	Occupancy	39081	<u> </u>		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	3379			
20	Interest	0075			
21	Payments to affiliates				· . · ·
22	Depreciation, depletion, and amortization .	14236			
23	Insurance	4585			
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	Liquor Tax	11324			
b	National Dues	6048	<del></del>		-
C	State Dues	1323			
d					·
e 25	All other expenses  Total functional expenses. Add lines 1 through 24e	10100			
25 26	Joint costs. Complete this line only if the	121324			
	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)  If provided the solicitation is provided to the solicitation in the solicitation is provided to the solicitation in the solicitation is provided to the solicitation in the solicitation is provided to the solicitation in the solicitation is provided to the solicitation in the solicitation is provided to the solicitation in the solicitation is provided to the solicitation in the solicitation is provided to the solicitation in the solicitation is provided to the solicitation in the solicitation is provided to the solicitation in the solicitation is provided to the solicitation in the solicitation is provided to the solicitation in the solicitation is provided to the solicitation in the solicitation is provided to the solicitation in the solicitation is provided to the solicitation in the solicitation is provided to the solicitation in the solicitation is provided to the solicitation in the solicitation in the solicitation is provided to the solicitation in the solicitation in the solicitation is provided to the solicitation in the solicitation is provided to the solicitation in the solicitation in the solicitation is provided to the solicitation in the solicitation is provided to the solicitation in the solicitation is provided to the solicitation in the solicitation in the solicitation is provided to the solicitation in the solicitation is provided to the solicitation in the solicitation is provided to the solicitation in the solicitation in the solicitation is provided to the solicitation in the solicitation in the solicitation in the solicitation in the solicitation in the solicitation in the solicitation in the solicitation in the solicitation in the solicitation in the solicitation in the solicitation in the solicitation in the solicitation in the solicitation in the solicitation in the solicitation in the solicitation in the solicitation in the				

P	art X	Balance Sheet			
	•	Check if Schedule O contains a response or note to any line in this Par	tX		🗖
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	43735	1	82931
	2	Savings and temporary cash investments	164222	2	166767
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	···
	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			
		sponsonng organizations of section 501(c)(9) voluntary employees' beneficiary			
ţ		organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net	·	7	193800
ĕ	8	Inventories for sale or use	6683	8	5256
	9	Prepaid expenses and deferred charges	4131	9	
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a 310431			,
	b	Less: accumulated depreciation 10b 213923	96508	10c	84482
	11	Investments – publicly traded securities	53166	11	57306
	12	Investments – other securities. See Part IV, line 11		12	
	13	Investments – program-related. See Part IV, line 11	**	13	
	14	Intangible assets		14	· · · · · · · · · · · · · · · · · · ·
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	368445	16	590542
	17	Accounts payable and accrued expenses	1069		1490
	18	Grants payable		18	
	19	Deferred revenue		19	11818
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
S	22	Loans and other payables to current and former officers, directors,			
ij		trustees, key employees, highest compensated employees, and			
Liabilities		disqualified persons. Complete Part II of Schedule L	·	22	
Ë	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	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	
	26	Total liabilities. Add lines 17 through 25	1069	26	13308
		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and	· · · · · · · · · · · · · · · · · · ·		
ĕ		complete lines 27 through 29, and lines 33 and 34.		.	
ä	27	Unrestricted net assets		27	
Bal	28	Temporarily restricted net assets		28	
ᅙ	29	Permanently restricted net assets		29	
Ę		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☑ and ☐			
Net Assets or Fund Balances	1	complete lines 30 through 34.			
\$	30	Capital stock or trust principal, or current funds		30	
SSe	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ä	32	Retained earnings, endowment, accumulated income, or other funds .	367376	32	577234
Š	33	Total net assets or fund balances	367376		577234
_	34	Total liabilities and net assets/fund balances	368445	34	590542

	90 (2013)			Pa	ge <b>12</b>
Par	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				<b>4</b>
1	Total revenue (must equal Part VIII, column (A), line 12)	1			01357
2	Total expenses (must equal Part IX, column (A), line 25)	2		1:	31324
3	Revenue less expenses. Subtract line 2 from line 1	3			19967
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	-	36	57376
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		22	29825
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		57	77234
Part	XII Financial Statements and Reporting	•			
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990:  Cash Accrual Other		3833		\$ E. A
	If the organization changed its method of accounting from a prior year or checked "Other," ex	olaın in			
	Schedule O.		<u> </u>		252
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<b>✓</b>
	If "Yes," check a box below to indicate whether the financial statements for the year were comp	oiled or		333	3000 s
	reviewed on a separate basis, consolidated basis, or both:		117.八	3.347.18	
	Separate basis Consolidated basis Both consolidated and separate basis		2	12	
b	Were the organization's financial statements audited by an independent accountant?		2b		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	d on a		8012	201
	separate basis, consolidated basis, or both:		W. S. W.		
	Separate basis Consolidated basis Both consolidated and separate basis		D. J.	<u> </u>	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	ersight	.		
	of the audit, review, or compilation of its financial statements and selection of an independent account		2c		
	If the organization changed either its oversight process or selection process during the tax year, ex	plaın ın			4
	Schedule O.		5.7.3	\$ 15	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in			
	the Single Audit Act and OMB Circular A-133?		3a		<b>✓</b>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under		1		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits.	3b		
			Forr	n <b>990</b>	(2013)

## SCHEDULE D (Form 990)

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.

Open to Public Inspection

OMB No. 1545-0047

2013

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

BPOE	odge # 647		23-7131575
Par		or Advised Funds or Other Similar Fu	
	Complete if the organization answ	vered "Yes" to Form 990, Part IV, line 6	
	Table 1 4 1 4	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2 3	Aggregate contributions to (during year) .		
4	Aggregate grants from (during year) Aggregate value at end of year		
5		donor advisors in writing that the assets	held in donor advised
•		ect to the organization's exclusive legal cont	
6		onors, and donor advisors in writing that gr	— · · · · · · · · · · · · · · · · · · ·
		e benefit of the donor or donor advisor, or	
	conferring impermissible private benefit?		· · · · · · · · · · · · · · · · · · ·
Part	Conservation Easements.		
		vered "Yes" to Form 990, Part IV, line 7	
1	Purpose(s) of conservation easements held		
		recreation or education) $\ \ \square$ Preservation	
	Protection of natural habitat	☐ Preservation	of a certified historic structure
^	Preservation of open space		
2	complete lines 2a through 2d if the organiz easement on the last day of the tax year.	ation held a qualified conservation contribut	· · · · · · · · · · · · · · · · · · ·
_			Held at the End of the Tax Year
a b			
C		ertified historic structure included in (a)	
ď		ded in (c) acquired after 8/17/06, and no	
		ster	
3	Number of conservation easements modifie	ed, transferred, released, extinguished, or te	
	tax year ▶	•	, ,
4	Number of states where property subject to		
5	Does the organization have a written po	licy regarding the periodic monitoring, ir	- · · · · · · · · · · · · · · · · · · ·
_		ation easements it holds?	<b>—</b> —
6	Staff and volunteer hours devoted to monitor	oring, inspecting, and enforcing conservation	n easements during the year
7	Amount of owners incomed a manifesture		
7	<ul><li>Amount of expenses incurred in monitoring</li><li>\$</li></ul>	, inspecting, and enforcing conservation ear	sements during the year
8	***************************************	on line 2(d) above satisfy the requirements	of section 170/h)//)/R)
•		· · · · · · · · · · · · · · · · · · ·	
9		eports conservation easements in its revenu	
		e text of the footnote to the organization's f	
	organization's accounting for conservation		
Part	Organizations Maintaining Coll	ections of Art, Historical Treasures, o	or Other Similar Assets.
		vered "Yes" to Form 990, Part IV, line 8	
1a	If the organization elected, as permitted ur	ider SFAS 116 (ASC 958), not to report in i	ts revenue statement and balance sheet
	works of art, historical treasures, or other	similar assets held for public exhibition, of the footnote to its financial statements the	education, or research in furtherance of
<b>.</b>			
b	works of art historical treasures or other	under SFAS 116 (ASC 958), to report in its similar assets held for public exhibition, or	s revenue statement and balance sheet
	public service, provide the following amoun		education, or research in furtherance of
			<b>. ▶</b> . <b>\$</b>
	(ii) Assets included in Form 990. Part X	I, line 1	<b>&gt;</b> \$
2	If the organization received or held works	of art, historical treasures, or other simil	ar assets for financial gain, provide the
	following amounts required to be reported	under SFAS 116 (ASC 958) relating to these	items:
а	Revenues included in Form 990, Part VIII, li	ne 1	▶ \$_
b	Assets included in Form 990, Part X		<b>&gt;</b> \$

Part	III Organizations Maintaining Colle							
3,	Using the organization's acquisition, access collection items (check all that apply):	ssion, and oth	er recor	ds, chec	k any of the	e follow	ving that are a si	gnificant use of its
а	Public exhibition				or exchang			
b	Scholarly research		е [	Other				***
c	☐ Preservation for future generations							
4	Provide a description of the organization's XIII.	collections ar	nd expla	in how th	ney further	the org	anization's exem	pt purpose in Part
5	During the year, did the organization solici assets to be sold to raise funds rather than							
Part	IV Escrow and Custodial Arranger	ments.						
	Complete if the organization answ 990, Part X, line 21.						•	
1a	Is the organization an agent, trustee, cust included on Form 990, Part X?							t Yes No
b	If "Yes," explain the arrangement in Part XII	II and complet	e the fol	lowing ta	able [.]			
							Ar	mount
С	Beginning balance					1c		
d	Additions during the year					_1d		
е	Distributions during the year					1e		
f	Ending balance					1f		
2a	Did the organization include an amount on Form 990, Part X, line 21?							
	b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII							
Part V Endowment Funds.								
	Complete if the organization answ							T
		Current year	(b) Pric	r year	(c) Two year	s back	(d) Three years back	(e) Four years back
1a	Beginning of year balance							·
b	Contributions							<u> </u>
С	Net investment earnings, gains, and losses							
d	Grants or scholarships							
е	Other expenditures for facilities and programs						_	
f	Administrative expenses				-			
g	End of year balance							
2	Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:							
а	Board designated or quasi-endowment ▶		%					
b	Permanent endowment ▶%							
С	Temporarily restricted endowment ▶	%						
	The percentages in lines 2a, 2b, and 2c sho							
3a	Are there endowment funds not in the pos	session of the	organiz	zation tha	at are held	and ad	ministered for th	e
	organization by:							Yes No
	(i) unrelated organizations							3a(i)
	(ii) related organizations							3a(ii)
b	If "Yes" to 3a(II), are the related organization	ns listed as re	quired o	n Sched	ule R? .			3b
4	Describe in Part XIII the intended uses of the		n's endo	wment fu	unds.			
Par								
	Complete if the organization ans	wered "Yes"	to Forn	n 990, P	art IV, line	11a. S	See Form 990,	Part X, line 10.
	Description of property	(a) Cost or oth (investment			or other basis ther)		Accumulated epreciation	(d) Book value
1a	Land		3000					3000
b	Buildings		276355				205730	70625
С	Leasehold improvements							
d	Equipment		33286				22429	10857
е	Other							
Total.	Add lines 1a through 1e. (Column (d) must e	equal Form 99	0, Part )	(, columr	(B), line 10	)(c).)	•	84482

Part VII	Investments—Other Securities.	one OOO Boot IV live	Page 3
•	Complete if the organization answered "Yes" to Formula (a) Description of security or category	(b) Book value	(c) Method of valuation
	(including name of security)		Cost or end-of-year market value
(1) Financial			
	eld equity interests	7-7-1	
(3) Other			
(B)			<del> </del>
(C)			
(D)	•••••••••••••••••••••••••••••••••••••••		
(E)			
(F)			
(G)			
(H)			
	b) must equal Form 990, Part X, col. (B) line 12.)		
Part VIII	Investments – Program Related.	000 D - 4 IV I'	11 O F 000 D 1 V II 10
	Complete if the organization answered "Yes" to Formula (a) Description of investment		
	(a) Description of Investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)	· · · · · · · · · · · · · · · · · · ·		<u> </u>
(2)			
(3)			
(4)			
(5)			
(6)	· · · · · · · · · · · · · · · · · · ·		<u></u>
(7)	<del></del>		
(8)			<del></del>
(9) Total, (Column (I	b) must equal Form 990, Part X, col. (B) line 13 ) ▶		
Part IX	Other Assets.	<u> </u>	
	Complete if the organization answered "Yes" to Fo	rm 990, Part IV, line	11d. See Form 990, Part X, line 15.
	(a) Description		(b) Book value
_(1)			
(2)			
(3)			
(4)			
(5) (6)			
(7)	and a second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second sec		
(8)			
(9)			
Part X	Other Liabilities.		
	Complete if the organization answered "Yes" to Fo	rm 990, Part IV, line	11e or 11f. See Form 990, Part X,
<del>1.</del>	line 25.  (a) Description of liability (b) Book value		The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s
(1) Federal in			
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(6)			
(7)			
(8)			
(9)	b) must const from 000 Part V and (P) Land C()		
	b) must equal Form 990, Part X, col. (B) line 25.) ► r uncertain tax positions. In Part XIII, provide the text of the foot	note to the exercises.	financial statements that we are the
organization's	s liability for uncertain tax positions under FIN 48 (ASC 740). Ch	eck here if the text of the	e footnote has been provided in Part XIII

Part	<del></del>	Return.	
	Complete if the organization answered "Yes" to Form 990, 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	]	
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
e	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	<u> </u>	
b	Other (Describe in Part XIII.)		
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	
Part		er Return	•
	Complete if the organization answered "Yes" to Form 990, 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	_	
b	Prior year adjustments	_	
C	Other losses	_	
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line <b>2e</b> from line <b>1</b>	3	
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	4 , 1	
b	Other (Describe in Part XIII.)	ا ــــــــــــــــــــــــــــــــــــ	
C	Add lines 4a and 4b		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	
2; Par	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional i		
·	······································		
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SCHEDULEI

Patient to Form 800,	Form 990)		Governments omplete if the orga	s, and Individ	uals in the L	Governments, and Individuals in the United States Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.	. 0	2013
Tell General Information on Grants and Assistance  Does the organization maintain records to substantiate the amouthe selection criteria used to award the grants or assistance?  Describe in Part IV the organization's procedures for monitoring the Part IV, line 21, for any recipient that received more the and address of organization orgovernment  (a) Name and address of organization orgovernment  (b) EIN (c) IRC section organization orgovernment  (a) Name and address of organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization	rtment of the Treasury	► Infor	mation about Sche	► Attach to dule I (Form 990) an	Form 990. Id its instructions is	s at www.irs.gov/fo	т990.	Open to Fublic Inspection
Tell General Information on Grants and Assistance  Does the organization maintain records to substantiate the amou the selection criteria used to award the grants or assistance?  Describe in Part IV the organization's procedures for monitoring that and other Assistance to Governments and Part IV, line 21, for any recipient that received more that or government  (a) Name and address of organization  (b) EiN  (c) IRC section  (d) applicable  (e) IRC section  (f) applicable  (g) Rection or government organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organiz	e of the organization							yer identification number
The caeneral information of draits and passistance to selection criteria used to award the grants or assistance to Bescribe in Part IV, line 21, for any recipient that received more the applicable of government  (a) Name and address of organization  (b) EIN  (c) IRC section  (d) Rich section  (e) IRC section  (f) applicable  (g) Einer total number of section 501(c)(3) and government organization  (h) Section 1 (h) Einer total number of section 501(c)(3) and government organization  (h) Section 2 (h) Einer total number of section 501(c)(3) and government organization  (h) Section 2 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Einer 1 (h) Ei	)E Lodge # 647		Accioca					23-7131575
the selection criteria used to award the grants or assistance?  Describe in Part IV the organization's procedures for monitoring that selection criteria used to award the grants or assistance?  Part IV, line 21, for any recipient that received more that or government  (a) Name and address of organization  or government  (b) EiN  if applicable  if applicable  Enter total number of section 501(c)(3) and government organization  the contraction assistance?  (c) IRC section for any recipient that received more that any recipient that received more than any recipient that received more than any recipient that received more than any recipient that received more than any recipient that received more than any recipient that received more than any recipient that received more than any recipient that received more than any recipient that received more than any recipient that received more than any recipient that received more than any recipient that received more than any recipient that received more than any recipient that received more than any recipient that received more than any recipient that received more than any recipient that received more than any recipient than any received more than any received more than any received more than any received more than any received more than any received more than any received more than any received more than any received more than any received more than any received more than any received more than any received more than any received more than any received more than any received more than any received more than any received more than any received more than any received more than any received more than any received more than any received more than any received more than any received more than any received more than any received more than any received more than any received more than any received more than any received more than any received more than any received more than any received more than any received more than any received more than any received more than any received	General Informat	ion on Grants and	Assistance	of the great of	o odt oogstaisse	rantoos' olioibility	or the grants or assistant	Pan a
Describe in Part IV the organization's procedures for monitoring that and Part IV, line 21, for any recipient that received more than or government  (a) Name and address of organization or government  (b) EIN (c) IRC section or government  (c) IRC section or government  (a) Name and address of organization (b) EIN (c) IRC section or government  (b) EIN (c) IRC section (c) IRC section organization (c) IRC section  Does the organization ma the selection criteria used	intain records to substonate to award the grants	stantiate the arriou or assistance?	in or the grants or	assistance, the g			√Yes	
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(a) Name and address of organization (b) EIN (c) IRC section (d) Amount of resh assistance (e) Description of appraisal, nor-cash assistance (e) Description of the line 1 table		Assistance to Go	vernments and received more the	Organizations in \$5,000. Part	in the United SI	tates. Complete ated if additional	if the organization ansv space is needed.	vered "Yes" to Form 990,
	(a) Name and address of organization or government	( <b>b</b> ) EiN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
		tion 501(c)(3) and gov	vernment organiza	tions listed in the l	ine 1 table			<b>A</b>

Schedule I (Form 990) (2013)

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.	ividuals in the Ul space is needed.	I <b>nited States.</b> Com _. I.	plete if the organiza	ation answered "Yes" to	Form 990, Part IV, line 22.	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance	
1 Scholarships	က	2250				
	78	5661				
3 Dring Awareness to local law enforcement agencies	4	3500				
4 Food Pantry	100	2000				
5 Civic Projects under \$500 each	0006	10834				
9						
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	the information r	equired in Part I, line	e 2, Part III, column	(b), and any other additi	onal information.	
All donations are approved and voted on by the membership at the semi-monthly meetings.	ship at the semi-mo	nthly meetings				
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
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					Schedule I (Form 990) (2013)	

#### **SCHEDULE 0** (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.

OMB No 1545-0047 2013

► Attach to Form 990 or 990-EZ. **Employer identification number** 

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

BPOE Lodge # 647	23-7131575
Part III, Line 4d County Food Pantry, \$2000, benefiting at least 100 families More than 20 civic projects	s of less than \$500 each, \$10834,
benefiting the community of over 9000 citizens.	
Part VI, line 6 We have 379 members	
Part VI, line 7a Members of the governing body are elected annually by the members of the lodge	
Part VI, line 11b In order to file this report by the due date it is not possible for the governing body to re	eview the form before filing. A copy of
the completed form and all schedules is given to the governing body at the first meeting after the form	n filing deadline
Part VI, line 19 We are a private fraternal organization. All members may see the documents. The public	c is not provided with a copy of the
form	
Part XI, line 9 The Elks lodge in Hiawatha, KS was merged into the Atchison, KS lodge on April 1, 2013	The amount of net assets merged
into the Atchison lodge was \$229825	