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# Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047 3

Inspection

Department of the Treasury Internal Revenue Service

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

Open to Public

^	- VI (II	e 2013 calendar year, or tax year beginning APR 1, 2013 and	enaing .	MAR 31, 2014	
В	Check if applicab	C Name of organization		D Employer identifi	cation number
	Addre	e BPOE LODGE 51			
	Name Chang	pe   Doing Business As		31-0	214080
	Initial retur	Number and street (or P 0 box if mail is not delivered to street address)	Room/suite	E Telephone numbe	er
	Termi	_ l		937-	325-4848
$\overline{\Box}$	Amer	City or town, state or province, country, and ZIP or foreign postal code	-	G Gross receipts \$	1,020,373.
F	Apple			H(a) Is this a group r	
_	— pendi — bendi			for subordinates	
		SAME AS C ABOVE			
	<del>-</del>			H(b) Are all subordinates i	
_	_		or 52	<b>-</b>	list. (see instructions)
_		te: N/A			n number ▶ 1156
		forganization Corporation Trust X Association Other ►	L Yea	r of formation 1886	M State of legal domicile OH
P	art I	Summary			
ø	1	Briefly describe the organization's mission or most significant activities: ${\color{red} {\rm TO}}$			CIPLES OF
Activities & Governance		CHARITY, JUSTICE, BROTHERLY LOVE AND FID	ELITY	; TO RECOGNI	ZE A BELIEF
Ě	2	Check this box  if the organization discontinued its operations or dispos	sed of moi	re than 25% of its net a	ssets.
Š	3	Number of voting members of the governing body (Part VI, line 1a)			2136
Ű	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	2136
Š	5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)		5	74
ijij	6	Total number of volunteers (estimate if necessary)		6	44
Ę	1	Total unrelated business revenue from Part VIII, column (C), line 12	•• •		0.
ď		Net unrelated business taxable income from Form 990-T, line 34			0.
	<del>                                     </del>	14ct differated business taxable income from 1 offit 330-1, lifte 34		Prior Year	
		Contributions and supply (Dark VIII line 4 lb)	-	138,692.	Current Year 147, 218.
e e	8	Contributions and grants (Part VIII, line 1h)	· ·	455,622.	390,426.
Revenue	9	Program service revenue (Part VIII, line 2g)	<u> </u>		
æ		Investment Income (Part VIII, column (A), lines 3, A and 7d)		542.	311.
)	11	Other revenue (Part VIII, column (A), lines 5 60 8c, 9c, 10c, and 11e)	· ·	292,989.	204,687.
<sup>3</sup> —		Total revenue - add lines 8 through 11 (must equal Fax VIII- column (A), line(2)		887,845.	742,642.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<u> </u>	3,541.	1,186.
	14	Benefits paid to or for members (Part IX, column (A) INDEN, UT		10,741.	4,308.
es	15	Salaries, other compensation, employee benefits (Part-IX, column (A), lines 5-10)		229,216.	269,408.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ğ	Ь	Total fundraising expenses (Part IX, column (D), line 25)	0.		
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	[	587,299.	507,218.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		830,797.	782,120.
	19	Revenue less expenses. Subtract line 18 from line 12		57,048.	<39,478.
00 88			В	eginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)		1,165,555.	1,167,453.
Ass	21	Total liabilities (Part X, line 26)	-	910,814.	910,964.
<u> </u>	22	Net assets or fund balances. Subtract line 21 from line 20	<u> </u>	254,741.	256,489.
		Signature Block		20271220	20072000
		alties of perjury, I declare that I have examined this return, including accompanying schedule	e and etator	ments, and to the best of m	w knowledge and helief it is
		ct, and complete. Declaration of preparer (other than officer) is based on all information of wi			y knowledge and belief, it is
tiub	, corre		ncii piepare	i lias ally knowledge	-/111
٥.		Signature of officer		1 6 / / 3 Date	1/9
Sig		l' s		Date	
Her	e	BARBARA FITZWATER, SECRETARY			
		Type or print name and title .			<del></del>
		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Paid	i	JOHN W. MCKINNON, CPA JOHN W. MCKINNON	N, CP	08/15/14 sultemploy	
Pre	parer	Firm's name CLARK, SCHEAFER, HACKETT		Firm's EIN	31-0800053
Use	Only	Firm's address 2525 N. LIMESTONE ST.			
_		SPRINGFIELD, OH 45503		Phone no 93	7-399-2000
May	the !	RS discuss this return with the preparer shown above? (see instructions)			X Yes No

Form	m 990 (2013). BPOE LODGE 51	1-0214080	Page 2
Pa	art III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission:		<u>-                                      </u>
•	TO INCULCATE THE PRINCIPLES OF CHARITY; JUSTICE; BROTHERLY	V LOVE AND	
	FIDELITY; TO RECOGNIZE A BELIEF IN GOD; TO PROMOTE THE WEI		TIC TIC
	MEMBERS; PROMOTE AMERICAN PATRIOTISM.	JEARL OF I	10
	MEMBERS; PROMOTE AMERICAN PATRIOTISM.		
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	Yes	X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X No
-	If "Yes," describe these changes on Schedule O.		
4			
4	Describe the organization's program service accomplishments for each of its three largest program services, as mea		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, t	he total expenses, a	and
	revenue, if any, for each program service reported.		
4a	/ / / / / / / / / / / / / / / / / / /		)
	TO INCULACATE THE PRINCIPLES OF CHARITY, JUSTICE, BROTHER		
	FIDELITY; TO RECOGNIZE A BELIEF IN GOD; TO PROMOTE THE WEI	FARE OF I	TS
	MEMBERS; PROMOTE AMERICAN PATRIOTISM AND SUPPORT CHARITABI	Œ	
	INSTITUTIONS.		,
		<del></del>	<del></del>
4b	(Code) (Expenses \$		<u> </u>
		<del> </del>	
		-	
4c			
40	(Code) (Expenses \$		<i>'</i>
	·		
		<del></del>	
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ including grants of \$ ) (Revenue \$	)	
4e	Total program service expenses ► 692,387.		
		Form 9!	90 (2013)
			/

Pa	rt IV 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		X
2	Is the organization required to complete Schedule B, Schedule of Contributors	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Ĺ
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or		f	1
	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 have the right to			l
	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,			
	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		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			1
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			ĺ
	as applicable.			İ
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			ĺ
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
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		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	$\vdash \vdash \vdash$	X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		,,	ĺ
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			v
	Schedule D, Parts XI and XII	12a	$\vdash$	X
þ	Was the organization included in consolidated, independent audited financial statements for the tax year?			v
	If "Yes," and if 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	$\vdash\vdash\vdash$	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
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			v
45	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	4.		Х
46	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		
16	on fan fancian in dividual 20 K BVon Brancolate Cabadula E. Dade III and IV	46	, ,	Х
17		16		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	,,		Х
10	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	46		Х
19	1c and 8a? If "Yes," complete Schedule G, Part II	18		
13	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	,,	х	
20->	complete Schedule G, Part III	19 20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		
		,		

Form **990** (2013)

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Pa	rt IV Checklist of Required Schedules (continued)			
			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		X
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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's curre			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	i		
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as o	· · · · · ·		
	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		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defeas			
_	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a				
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, an			
_	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			ĺ
	Schedule L. Part I	25b		ĺ
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	235		
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,		,	
	complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	20	<del>                                     </del>	
21	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	_		
	of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28		. 21	<u> </u>	··· <del>·····</del>
20	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
_	Instructions for applicable filing thresholds, conditions, and exceptions)  A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
a		•		X
b	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an o			
C	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	1		Х
29		<u>28c</u> 29		X
30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	· ·· · · —	$\vdash$	
30	contributions? If "Yes," complete Schedule M	i		X
21		30		
31	Did the organization liquidate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule N, Part I	31		Х
32				
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		х
33	Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	. 32		
33	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	99		Х
24		33		
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			Х
25-		. 34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	+-+	
D	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entire the manager of parties 513(h)(12)3 (f "Yes" appropriate Sabartule R. Part V transaction with a controlled entire statement of parties and parties are statement of parties and parties are statement.	051		
26		35b	┼┤	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization.	I I		
27	If "Yes," complete Schedule R, Part V, line 2	<u>36</u>	1-1	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			Х
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	. 37	1 1	Λ

X Form **990** (2013)

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

Note. All Form 990 filers are required to complete Schedule O

Pai	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V				$\Box$
	<u> </u>	<del></del>		Yes	No
1a	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	11			
b	b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	7			
С	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gam	ing			
	(gambling) winnings to prize winners?		1c	X	
2a	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				-
	filed for the calendar year ending with or within the year covered by this return 2a	74			ŧ
b	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				
За	a Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X
b	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		
4a	a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over	, a		'	
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		X
þ	b If "Yes," enter the name of the foreign country:				
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		ł		
5a	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b			5b		X
	c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c	$\vdash$	<u> </u>
6a	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization	ı solicit			
	any contributions that were not tax deductible as charitable contributions?	· · · · .	6a	<b>—</b> —	X
þ	b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts				
_	were not tax deductible?	-	6b	ļļ	
7	•		_		v
a	, , , , , , , , , , , , , , , , , , ,	o the payor?	7a		X
	b If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		<del> </del>
С	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required		<b>.</b>		х
a	to file Form 8282?		7c		
			7e		х
e f			7 <del>f</del>		X
g		· · · ·	7g	-	
h		· .	7h		
8					
•	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during	- I	8		Х
9		,			
а	a Did the organization make any taxable distributions under section 4966?		9a		X
b	b Did the organization make a distribution to a donor, donor advisor, or related person?		9ь		X
10					
а	a Initiation fees and capital contributions included on Part VIII, line 12				
b	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:				
a	a Gross income from members or shareholders				
b	b Gross income from other sources (Do not net amounts due or paid to other sources against				ŧ
	amounts due or received from them.)				-
12a	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a		
b	b If "Yes," enter the amount of tax-exempt interest received or accrued during the year				Į.
13	V. 71			<b></b>	<b></b>
а	a Is the organization licensed to issue qualified health plans in more than one state?		13a	ļ	ļ
	Note. See the instructions for additional information the organization must report on Schedule O.				ŧ
Ь	b Enter the amount of reserves the organization is required to maintain by the states in which the				,
	organization is licensed to issue qualified health plans				ŧ
	c Enter the amount of reserves on hand				
	a Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
b	b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		14b	000	(0040)
			LOUD	フラリ	(2013)

BPOE LODGE 51 31-0214080 Page 6 Form 990 (2013), Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 2136 1a Enter the number of voting members of the governing body at the end of the tax year 1a 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 2136 b Enter the number of voting members included in line 1a, above, who are independent. 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X 6 Did the organization have members or stockholders? 6 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? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or Х persons other than the governing body? 7b 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Х a The governing body? 8a X **b** Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the X organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes 10a X 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, 10b and branches to ensure their operations are consistent with the organization's exempt purposes? X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c 13 Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X a The organization's CEO, Executive Director, or top management official 15a **b** Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year? ... 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶OH 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. Another's website X Upon request Own website ☐ Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the organization: BARBARA FITZWATER - 937-325-4848 1536 VILLA ROAD, SPRINGFIELD, 45503

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

- 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 employees."
- 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 i	1	orga I	ınıza			npe	nsat			
(A)	(B)			() Pos	C) Hior			(D)	(E)	(F)
Name and Title	Average	(do not check rr			k more than one			Reportable	Reportable	Estimated
	hours per	offic	, unle ceran	ss pe dad	rson irecto	is bot or/trus	than itee)	compensation	compensation	amount of other
	week (list any	-					Ė	from the	from related organizations	compensation
	hours for				İ	_		organization	(W-2/1099-MISC)	from the
	related	8	器			rsate		(W-2/1099-MISC)	(1121000 111100)	organization
	organizations	Individual trustee or director	Institutional trustae		8	Ě		(		and related
	below	fdual	T T	   5	Ĕ	5 85 C	<b>5</b>			organizations
	line)	Ę	lusti	Officer	Кеу етріоува	Highest compensated employee	퉏			
(1) DENNIS DYER	20.00				ŀ					
TRUSTEE		X				<u> </u>		0.	0.	0
(2) GEORGE MCLIN	20.00								_	
TRUSTEE		X				<u> </u>		0.	0.	0
(3) JACK CONROY	20.00							_	_	_
PRUSTEE		Х	<u> </u>					0.	0.	0
(4) ROBERT BUCHY	20.00	_								_
TRUSTEE	0000	Х				ļ		0.	0.	0
(5) CHARLIE HAYDEN	20.00						İ			•
TRUSTEE	20.00	Х			_			0.	0.	0
(6) BARBARA FITZWATER	30.00							10 050	•	
SECRETARY	10 00			X	_	ļ		12,250.	0.	0
(7) MIKE MITCHELL	10.00							2 400	•	0
EXALTED RULER	1 20 00	$\vdash\vdash$		Х	<u> </u>			2,400.	0.	0
(8) JOHN CURTIS	20.00			Х				5 525	0.	^
TREASURER	<del> </del>			_	_	-		5,525.	<u> </u>	0
	<u> </u>					ŀ				
		$\vdash$	-		$\vdash$		├			
						ŀ				
		$\vdash$	-		$\vdash$	┢	-			
					ŀ					
						-				
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	<del> </del>				-	<del> </del>				
	1	$\vdash$			-	$\vdash$	-			
	<del> </del>				$\vdash$	T	1			
	1					1	t			
<del></del>	<del> </del>	Н	$\vdash$	$\vdash$	<del>                                     </del>	<del> </del>	$\vdash$		·	
					ı	1	l			

Form 990 (2013)

\$100,000 of compensation from the organization

Total number of independent contractors (including but not limited to those listed above) who received more than

		Check if Schedule O contains a response	or note to any line				
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
nts	1 :						
ira our	1	Membership dues 1b	147,218.				
s, C Am	(	Fundraising events 1c					
Sift lar,	,	Related organizations 1d			1	•	
ini imi	,	Government grants (contributions)					
ion	1	All other contributions, grits, grants, and					
but		similar amounts not included above 1f			į	-	
Contributions, Gifts, Grants and Other Similar Amounts	,	Noncash contributions included in lines 1a-1f \$					
၁ မ		Total. Add lines 1a-1f		147,218.			
			Business Code				
9	2 8	GOLF & SWIMMING FEES	713910	390,426.	390,426.		
ě Ž	ı	·					
Se		•				·	
lev.	•	I					
Program Service Revenue	•						
۵	1	All other program service revenue				<del></del>	ļ
		Total. Add lines 2a-2f	<u> </u>	390,426.			
	3	Investment income (including dividends, intere	_	211	211		
		other similar amounts)		311.	311.		
	4	Income from investment of tax-exempt bond p	roceeds -				
	5	Royalties	<b>P</b>				ļ
		(i) Real	(ii) Personal				
	6 8	Gross rents					
		Less: rental expenses 0.					
		Rental income or (loss) 19,505.		10 505	10 505		
		Net rental income or (loss)	<b>D</b>	19,505.	19,505.	·· · · · · · · · · · · · · · · · · · ·	1
	7 8	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory					
		Less: cost or other basis					
		and sales expenses					
		Gain or (loss)	<b>•</b>		f		
		Net gain or (loss)					1
en l	0 (	Gross income from fundraising events (not including \$ of	-				
9.6		contributions reported on line 1c). See					
ĸ.		Part IV, line 18			[		
Other Revenu		Less: direct expenses b					
0		Net income or (loss) from fundraising events	<b>•</b>		Ī		1
		Gross income from gaming activities. See	-		***************************************	······································	
		Part IV, line 19	68,491.		Į.		
	ı	Less: direct expenses b	22,544.		-		
		Net income or (loss) from gaming activities	<b>•</b>	45,947.	45,947.		1
		Gross sales of inventory, less returns				•••••••••••••••••••••••••••••••••••••••	
		and allowances a	361,050.				
	1		255,187.				
		Net income or (loss) from sales of inventory	<b>•</b>	105,863.	105,863.		Ī
		Miscellaneous Revenue	Business Code				
	11 (	DAVEGET MAY DESCRIBE ED	900099	17,389.	17,389.	<u> </u>	
	l	MISCELLANEOUS INCOME	900099	11,293.	11,293.		
	,	NEWSLETTER	900099	4,690.	4,690.		
	(	All other revenue					
	(	Total. Add lines 11a-11d	▶ L	33,372.			
	12	Total revenue. See instructions	▶	742,642.	595,424.	0.	.1 0.

# Part IX Statement of Functional Expenses

	eck if Schedule O contains a respon-	se or note to any line in	this Part IX (B)	(C)	<u>(D)</u>
Do not include amo 7b, 8b, 9b, and 10	ounts reported on lines 6b, b of Part VIII	Total expenses	Program service expenses	Management and general expenses	(D) Fundraising expenses
1 Grants and oth	er assistance to governments and				
-	n the United States See Part IV, line 21				
2 Grants and c	ther assistance to individuals in				
the United St	tates. See Part IV, line 22	1,186.	1,186.		
3 Grants and o	ther assistance to governments,				
<ul> <li>organizations</li> </ul>	s, and individuals outside the				
United States	s. See Part IV, lines 15 and 16				
4 Benefits paid	I to or for members	4,308.	4,308.		
5 Compensation	on of current officers, directors,				
trustees, and	l key employees	20,175.	20,175.		
6 Compensation	not included above, to disqualified				
persons (as de	fined under section 4958(f)(1)) and				
persons descri	bed in section 4958(c)(3)(B)				
7 Other salane	s and wages	210,976.	210,976.		
8 Pension plan a	ccruals and contributions (include				
section 401(k)	and 403(b) employer contributions)				
9 Other employ	ee benefits	3,878.	3,878.		
10 Payroll taxes		34,379.	34,379.		
11 Fees for serv	ices (non-employees):				
a Management					
<b>b</b> Legal	[	30.		30.	
c Accounting	Г	3,000.		3,000.	
<b>d</b> Lobbying					
e Professional fu	indraising services See Part IV, line 17		·		
f Investment n	nanagement fees				
g Other. (If line	11g amount exceeds 10% of line 25,				
	ount, list line 11g expenses on Sch O)	6,212.		6,212.	
12 Advertising a	· · · · · · · · · · · · · · · · · · ·				
13 Office expens	· -	8,661.		8,661.	
14 Information to	echnology		-		
15 Royalties					
16 Occupancy		128,717.	128,717.		
17 Travel					
18 Payments of	travel or entertainment expenses				· -
	al, state, or local public officials				
•	, conventions, and meetings	3,195.	3,195.		
20 Interest		43,469.		43,469.	
21 Payments to	affiliates	40,920.	40,920.	<del> · ·</del>	
	depletion, and amortization	68,423.	68,423.		
23 Insurance		13,027.	1,499.	11,528.	
	s Itemize expenses not covered				
above. (List mi	scellaneous expenses in line 24e. If line				
	ceeds 10% of line 25, column (A) e 24e expenses on Schedule O)				
	POOL EXPENSES	140,265.	140,265.		
	TAXES & FEES	22,582.	22,582.		
e BULLET		8,618.		8,618.	
	NT FEES & BANK CH	7,873.		7,873.	
e All other expe		12,226.	11,884.	342.	
•	al expenses. Add lines 1 through 24e	782,120.	692,387.	89,733.	
	omplete this line only if the organization			,	
	umn (B) joint costs from a combined				
	mpaign and fundraising solicitation				
	pa.gir and rendrationing symptotic tion			ı	

rt X	Balance Sheet			
	Check if Schedule O contains a response or note to any line in this Part X			
		(A) Beginning of year	İ	<b>(B)</b> End of year
1	Cash · non-interest-bearing	243,347.	1	223,922
2	Savings and temporary cash investments	2,636.	2	2,733
3	Pledges and grants receivable, net		3	<del>-</del>
4	Accounts receivable, net		4	
5	Loans and other receivables from current and former officers, directors,			<del></del>
	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			<del></del>
	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 instr). Complete Part II of Sch L		6	
7	Notes and loans receivable, net		7	
8	Inventories for sale or use	19,151.	8	46,535
9	Prepaid expenses and deferred charges	6,230.	9	46,53
10a		3/2333	<u> </u>	
Ь	215 172	893,922.	10c	883,54
11	Investments - publicly traded securities		11	000/01
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	26
16	· ·		16	1,167,45
17	Total assets. Add lines 1 through 15 (must equal line 34)		17	24,51
18	Accounts payable and accrued expenses		18	24/31
19	Grants payable	4 4 4 4 4 4 4	19	169,07
20	• • •	· · · · · · · · · · · · · · · · · · ·		105,07
1	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
22	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	= 1 1 2 2 2	22	717,37
23	Secured mortgages and notes payable to unrelated third parties	· · · · · · · · · · · · · · · · · · ·	23	111,31
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
1	parties, and other liabilities not included on lines 17-24). Complete Part X of			
000	Schedule D		25	910,96
26	Total liabilities. Add lines 17 through 25  Organizations that follow SFAS 117 (ASC 958), check here ► X and	910,014.	26	910,90
]	· · · · · · · · · · · · · · · · · · ·			
0.7	complete lines 27 through 29, and lines 33 and 34.	201,192.		161 71
27	Unrestricted net assets		27 28	161,71 94,77
28	Temporarily restricted net assets		<del></del>	<u> </u>
29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here			
	and complete lines 30 through 34.		.	
30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund	<del></del>	31	
32	Retained earnings, endowment, accumulated income, or other funds		32	256 404
33	Total net assets or fund balances		33	256,489
34	Total liabilities and net assets/fund balances	1,165,555.	34	1,167,453

Forn	1990 (2013) BPOE LODGE 51	31-0	214080	Pag	ge <b>12</b>
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<del>,</del>		X
1	Total revenue (must equal Part VIII, column (A), line 12)	1			<u>42.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2			20.
3	Revenue less expenses. Subtract line 2 from line 1	3			78.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	254	,7	41.
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	41	, 2	26.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,	ĺ			
	column (B))	10	256	, 4	<u>89.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				ᆜ
			,	es/	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
þ	Were the organization's financial statements audited by an independent accountant?		2b		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		<del>,, ,,,,</del>
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audi	:		
	Act and OMB Circular A-133?		3a		<u>X</u>
þ	if "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	ed audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		. Зь		

Form **990** (2013)

# (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.

OMB No 1545-0047 Open to Public Inspection

Internal Revenue Service Name of the organization

Employer identification number

	BPOE LODGE 51	31-0214080
Pai	Organizations Maintaining Donor Advised Funds or Other Similar Funds or A	Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	<del></del>
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised full	nds
	are the organization's property, subject to the organization's exclusive legal control?	Yes No
6	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 confe	
	Impermissible private benefit?	. Yes No
Pai		
1	Purpose(s) of conservation easements held by the organization (check all that apply).	, 1110 1.
•		illy important land area
		• •
		instolic structure
_	Preservation of open space	A
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a contribution in t	onservation easement on the last
	day of the tax year.	Hard Alba E. A. Alba Tan Vann
		Held at the End of the Tax Year
а	Total number of conservation easements	2a
þ	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	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organ	nization during the tax
	year ▶	
4	Number of states where property subject to conservation easement is located ▶	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it holds?	Yes L No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during to	the year ▶
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year	ear ▶ \$
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(l	B)(i)
	and section 170(h)(4)(B)(ii)?	Yes No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense state	ment, and balance sheet, and
	include, if applicable, the text of the footnote to the organization's financial statements that describes the or	ganization's accounting for
	conservation easements.	
Pa	☆ III Organizations Maintaining Collections of Art, Historical Treasures, or Other	Similar Assets.
	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 a	and balance sheet works of art,
	historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of	f public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describes these items.	•
ь	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and t	balance sheet works of art, historical
_	treasures, or other similar assets held for public exhibition, education, or research in furtherance of public se	
	relating to these items:	protice the following and drive
		<b>&gt;</b> \$
	m	. •
•	(ii) Assets included in Form 990, Part X	provide
2	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	5
b	Assets included in Form 990, Part X	> \$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 332051 09-25-13

Schedule D (Form 990) 2013

Sche	dule D (Form 990) 2013 BPOE LOI	OGE 51					31 - 02	21408	0 Pa	age <b>2</b>
Par	t III Organizations Maintaining C	ollections of A	rt, Histori	cal Treasures,	or Othe	er Simila	ar Asse	e <b>ts</b> (contii	nued)	
3	Using the organization's acquisition, accession									s
	(check all that apply):									
а	Public exhibition	•	d 🔲 Loa	n or exchange progr	rams					
b	Scholarly research		e 🔲 Oth	er				_		
c	Preservation for future generations									
4	Provide a description of the organization's co	llections and expla	in how they	further the organizat	tion's exer	npt purpo	se in Pa	rt XIII.		
5	During the year, did the organization solicit or	receive donations	of art, histor	ical treasures, or oth	ner simılar	assets				
	to be sold to raise funds rather than to be ma	intained as part of	the organiza	tion's collection?				Yes		No
Par	t IV Escrow and Custodial Arrang	<b>jements.</b> Comp	ete if the org	anızatıon answered	"Yes" to	Form 990,	, Part IV,	line 9, or		
	reported an amount on Form 990, Part	X, line 21.								
1a	Is the organization an agent, trustee, custodia	an or other interme	diary for con	tributions or other a	ssets not	included	_			_
	on Form 990, Part X?	•					L	Yes	<u> </u>	No
b	If "Yes," explain the arrangement in Part XIII a	and complete the fo	ollowing table	∋:						
								Amount	t	
C	Beginning balance .					1c				
d	Additions during the year					1d				
е	Distributions during the year					1e				
f	Ending balance		•			. 1f				
	Did the organization include an amount on Fo			-	-	-	L	Yes	<u> </u>	No
	If "Yes," explain the arrangement in Part XIII.					·				
Par	t V Endowment Funds. Complete if	the organization a	<del>T</del>							
	<u> </u>	(a) Current year	(b) Prior	year (c) Two yea	ars back	<b>(d)</b> Three y	ears <u>back</u>	(e) Four	years	back
1a	Beginning of year balance							<del> </del>		
b	Contributions									
C	Net investment earnings, gains, and losses	<del> </del>				_		<del> </del>		
ď	Grants or scholarships									
е	Other expenditures for facilities									
	and programs							<del> </del>		
f	Administrative expenses							<del> </del>		
g	End of year balance		L					<u> </u>		
2	Provide the estimated percentage of the curre	ent year end balan	ce (line 1g, c	olumn (a)) held as:						
а	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
C	Temporarily restricted endowment ▶	%								
	The percentages in lines 2a, 2b, and 2c should	•								
За	Are there endowment funds not in the posses	ssion of the organiz	ation that ar	e held and administ	ered for th	ne organiz	ation	r	1	
	by:							<u> </u>	Yes	No
	(i) unrelated organizations				••			3a(i)		
	(ii) related organizations							3a(ii)		
	If "Yes" to 3a(ii), are the related organizations						· · · · · · · · · · · · · · · · · · ·	. Зь	1	
4	Describe in Part XIII the intended uses of the		owment fund	is.						
Par			) David IV Iva	. 44. 0 5 000	n n	10				
	Complete if the organization answered	· 1			1				1	
	Description of property	(a) Cost or o	II	(b) Cost or other		cumulate	a	(d) Bool	k value	€
<u> </u>	1 d	Dasis (invest	ment)	345,040.	<u> </u>	preciation		34	5,0	<u>40</u>
	Land		-	646,155.		189,86	52		$\frac{3}{6}, \frac{3}{2}$	
	Buildings			040,133.	_	.09,00		- 40	J / Z	<del>, , ,</del>
	Leasehold improvements	-		207,525.	1 1	25,3	10.	Ω	2,2	15
	Equipment	<u> </u>		2017323.	_	23,3.			-, -	<u></u>
	Other	rual Form 000. Cor	t Y column (	P) //po 10/o) )	٠			88	3.5	48.

Schedule D (Form 990) 2013

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial 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 X

Schedule D (Form 990) 2013

### SCHEDULE.G

(Form 990 or 990-EZ)

**Supplemental Information Regarding Fundraising or Gaming Activities** Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the

organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.

Open To Public Inspection

Name of the organization					<i>TV.)11.11</i>	Employer identification number		
BPOE LODGE 51						31-0214080		
Part 1 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.								
Indicate whether the organization rais	e Solicitat f Solicitat g Special  or oral agreement with any individual art VII) or entity in connection with p ividuals or entities (fundraisers) purs	tion of tion of fundra (includerofess	non-g gover using of ding of lonal f	overnment grants nment grants events fficers, directors, true undraising services?	stees o	Yes	_ <del></del>	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		esser (IV) Gross receipts   stody rol of   from activity		mount paid retained by) ndraiser d in col. <b>(i)</b>	(vi) Amount paid to (or retained by) organization	
		Yes	No					
Total  3 List all states in which the organization	on is registered or licensed to solicit of	contrib	utions	or has been notified	ditise	cempt from re	egistration	
or licensing.								
	<u> </u>			·				
						•		
							<del>.</del>	

332081 09-12-13

Schedule G (Form 990 or 990-EZ) 2013

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

Pa	art	Fundraising Events. Complete if the of fundraising event contributions and gr				
		or initial desiring of our continuous are gr	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
en			(event type)	(event type)	(total number)	- coi. (c)
Revenue	1	Gross receipts				
	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
ø	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
Direct E	7	Food and beverages				
	8	Entertainment				
	10					
D:	11 art			n 990 Part IV line 19 or r	reported more than	
تستا		\$15,000 on Form 990-EZ, line 6a.	213Wered 103 to 1011	11 330,7 tare 17, 11110 13, 01 1	cported more than	
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
	1	Gross revenue		68,491.		68,491.
Ses	2	Cash prizes		17,123.		17,123.
Expen	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
	5	Other direct expenses		5,421.		5,421.
	6	Volunteer labor	Yes % No	X Yes 100.00 % No	Yes % No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)		•	22,544.
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)		<b>&gt;</b>	45,947.
ŧ	als i	ter the state(s) in which the organization opera the organization licensed to operate gaming ac No,* explain:	ctivities in each of these	states?		X Yes No
		ere any of the organization's gaming licenses re Yes," explain:	•	-		Yes X No
3320	82 0	9-12-13			Schedule G (Fo	rm 990 or 990-EZ) 2013

Schedule G (Form 990 or 990-EZ) 2013 BPOE LODGE 51	31-03	214	080	Page 3
11 Does the organization operate gaming activities with nonmembers?			Yes	X No
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed				
to administer charitable gaming?			Yes	X No
13 Indicate the percentage of gaming activity operated in:	l			
a The organization's facility		13a	100	<u>.00 %</u>
<b>b</b> An outside facility		13b		%
14 Enter the name and address of the person who prepares the organization's gaming/special events books and record	is:			
Name ► BARBARA FITZWATER				
Address ► 1536 VILLA ROAD - SPRINGFIELD, OH 45503				
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?			Yes	X No
b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the amou	ınt			
of gaming revenue retained by the third party > \$				
c if "Yes," enter name and address of the third party:				
Name ▶				
Address ▶				
16 Gaming manager information:				
Name ►				
Gaming manager compensation ▶ \$				
Garning manager compensation > \$				
Description of services provided ▶				
	•			
Director/officer Employee Independent contractor				
17 Mandatory distributions:				
a Is the organization required under state law to make charitable distributions from the gaming proceeds to		,		₩.
retain the state gaming license?			Yes	X No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	ı the			
organization's own exempt activities during the tax year   \$\begin{align*} \part \text{V} & \part \text{Supplemental Information.} \text{Provide the explanations required by Part I, line 2b, columns (iii) and (v), and P}	art III. lia	20.0	0b 10	h 15h
15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instruction		es 9,	90, 10	D, 13D,
Too, 10 and 170, as applicable 7 lies complete this part to provide any additional information (see instruction	113/.	-		
		•	•	
	_			
				<del></del>

## SCHEDULE O

(Form 990 or 990-EZ)

Name of the organization

Supplemental Information to Form 990 or 990-EZ complete to provide information for responses to specific questions on

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

Attach to Form 990 or 990-EZ.

2013
Open to Public Inspection

Department of the Treasury Internal Revenue Service

BPOE LODGE 51

Employer identification number

BPOE LODGE 51	31-0214080
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISS	SION:
IN GOD; TO PROMOTE THE WELFARE OF ITS MEMBERS; PROMOTE AME	ERICAN
PATRIOTISM.	
FORM 990, PART VI, SECTION A, LINE 6:	
EXPLANATION: AN ASSOCIATION WITH MEMBERS.	
FORM 990, PART VI, SECTION A, LINE 7A:	
EXPLANATION: EACH MEMBER HAS ONE VOTE.	
FORM 990, PART VI, SECTION B, LINE 11:	
EXPLANATION: THE 990 IS PRESENTED TO THE AUDIT COMMITTEE,	AND ONCE
APPROVED, IS PRESENTED TO THE BOARD OF TRUSTEES FOR APPROV	/AL.
FORM 990, PART VI, SECTION B, LINE 15B:	
EXPLANATION: THE TRUSTEES DISCUSS AND APPROVE ALL COMPENSA	ATION FOR ALL KEY
EMPLOYEES.	
FORM 990, PART VI, SECTION C, LINE 19:	
EXPLANATION: UPON REQUEST AT LODGE DURING NORMAL OPERATING	HOURS.
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
INCREASE IN RESTRICTED FUNDS	41,226.