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Form

Return of Organization Exempt From Income Tax

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

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

2013 Open to Public

OMB No 1545-0047

Inspection Internal Revenue Service Information about Form 990 and its instructions is at www.irs.gov/form990. For the 2013 calendar year, or tax year beginning 04/01/13, and ending 03/31/14Employer identification number C Name of organization BENEVOLENT AND PROTECTIVE ORDER Check if applicable OF ELKS HOLLAND 1315 Address change 38-0341609 Doing Business As Name change Number and street (or P O box if mail is not delivered to street address) Room/suite Telephone number Initial return 616-396-1245 569 EAST 24TH ST City or town, state or province, country, and ZIP or foreign postal code Terminated HOLLAND 49423 648,257 G Gross receipts \$ Amended return Name and address of principal officer Application pending H(a) Is this a group return for subordinates? H(b) Are all subordinates included? If "No," attach a list (see instructions) **X** 501(c) 8) ◀ (insert no) 501(c)(3) 4947(a)(1) or Tax-exempt status 1156 Website > H(c) Group exemption number ▶ X Corporation Form of organization Trust Association Other > Year of formation M State of legal domicile Part I Summary 1 Briefly describe the organization's mission or most significant activities CLUB FOR PROMOTING FRIENDSHIP AND SOCIAL RELATIONSHIPS FOR THE BENEFIT OF Activities & Governance MEMBERS. 2 Check this box ▶ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) 0 0 4 Number of independent voting members of the governing body (Part VI, line 1b) 13 5 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 0 6 Total number of volunteers (estimate if necessary) 6 16,670 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a -2.613b Net unrelated business taxable income from Form 990-T, line 7b Prior Year Current Year 8 Contributions and grants (Part VIII, line 1h) RS-OSC 31,321 31,659 9 Program service revenue (Part VIII, line 2g) JUN 3 0 2014 310 266 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d 245,370 236,942 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c 10c, and 11e) 12 Total revenue – add lines 8 through 11 (must equal Part VIII, column) 268,911 276,957 13 Grants and similar amounts paid (Part IX, column (A), lines 1 14 Benefits paid to or for members (Part IX, column (A), line 4) 135,033 120,348 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 8,954 b Total fundraising expenses (Part IX, column (D), line 25) ▶ 166,091 165,585 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 300,618 286,439 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) -31,707 -9,482 19 Revenue less expenses Subtract line 18 from line 12 Beginning of Current Year End of Year ,328 428,466 421 20 Total assets (Part X, line 16) 5,629 7,973 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances Subtract line 21 from line 20 422.837 413,355 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge num Sign Here DANNY CYRUS SECRETARY Type or print name and title Print/Type preparer's name PTIN Check Paid NATHAN WEAVER, CPA P01330438 Preparer MULDER, FITCH, WEAVER Firm's EIN Firm's name **Use Only** 301 HOOVER BLVD STE 100 616-994-6500

Firm's address

HOLLAND, MI

May the IRS discuss this return with the preparer shown above? (see instructions)

49423-8324

SCANNED

No

Yes

Phone no

				PROTECTIVE ORDER	38-0341609			Page 2
3	Pa			Service Accomplishments ntains a response or note to ar	ay line in this Part III			X
•	C	Briefly describ	e the organization's mission	· ·		FOR THE	BENEFIT	
;	3	prior Form 990 If "Yes," descr Did the organi services? If "Yes," descr Describe the of expenses Sec	or 990-EZ? Tabe these new services on zation cease conducting, or these changes on Schorganization's program serction 501(c)(3) and 501(c)(c)	or make significant changes in how it	conducts, any program three largest program services,	-	Yes	X No
•	4a	(Code) (Expenses \$	including grants	of \$ _) (Revenue \$)
4	4b	(Code) (Expenses \$	including grants	of \$) (Revenue \$)
	4c	(Code) (Expenses \$	including grants	of \$) (Revenue \$)
					-			
4	1d		services (Describe in Sc	•				· ·-
_	le	(Expenses \$	226,875 service expenses ▶	including grants of \$ 226,875) (Revenue \$)	
_	+C	rotal program	Service exhelises	220,013		_		

	1 990 (2013) BENEVOLENT AND PROTECTIVE ORDER 38-0341609		Р	age 3
P	art 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,"		res	No
•	complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	<u> </u>		
•	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		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
þ	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	g ,			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	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			7.7
_	Schedule D, Parts XI and XII	12a		<u> </u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			v
	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		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b				
	fundraising, business, investment, and program service activities outside the United States, or aggregate	445		v
15	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	14b		X
13	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	15	-	-
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	''		
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
	,			

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II

If "Yes," complete Schedule G, Part III

X

18

19

20a

20b

18

19

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

P	art IV Checklist of Required Schedules (continued)		<u> </u>	ugu
			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 current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete 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 of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	-		
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
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		X
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		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a]	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-39 If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	or IV, and Part V, line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		L
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
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,			l
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			

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Form 990 (2013) BENEVOLENT AND PROTECTIVE ORDER 38-0341609 Page 5 Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 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 13 Statements, filed for the calendar year ending with or within the year covered by this return X If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a X If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O 3b 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 X account)? 4a 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 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the X organization solicit any contributions that were not tax deductible as charitable contributions? 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). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 82822 7с 7d d If "Yes," indicate the number of Forms 8282 filed during the year е Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g g 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 organization, have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? 9a Did the organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 10a 10b b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter Gross income from members or shareholders 11a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11b Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes." enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which 13b the organization is licensed to issue qualified health plans 13c Enter the amount of reserves on hand X Did the organization receive any payments for indoor tanning services during the tax year? 14a

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

Form 990 (2013) BENEVOLENT AND PROTECTIVE ORDER 38-0341609 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 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 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 X any other officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 X supervision of officers, directors, or trustees, or key employees to a management company or other person? X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 6 X Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint X 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. X stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X a The governing body? 8a X 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 X the 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 No 10a Did the organization have local chapters, branches, or affiliates? X 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 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 X 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 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 deliberation and decision? The organization's CEO, Executive Director, or top management official 15a X 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 taxable entity during the year? X 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 safequard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed NONE 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 Schedule O) 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 > DAN CYRUS 569 E 24TH ST

HOLLAND

MI 49423

ELKS 06/25/2014 .	•									
-	n of Officers,							ER 38-034 Key Employees, Hig		Page T Employees, and
Independent (Check if Scheo		sai	rest	ons	se c	or no	ote t	o any line in this Part	VII	
								t Compensated Employee		
1a Complete this table for all personganization's tax year	ons required to be	liste	ed R	epor	t co	mpei	nsatı	on for the calendar year er	iding with or within the	
List all of the organization's compensation Enter -0- in column	s (D), (E), and (F)	ıf no	cor	nper	ısatı	on w	as p	aid	. •	f
 List all of the organization's of List the organization's five or who received reportable compensation and any related organization and any related organization. 	urrent highest con ation (Box 5 of Fo	nper	sate	d en	nplo	yees	(oth	er than an officer, director,	trustee, or key employee)	
 List all of the organization's f \$100,000 of reportable compensa List all of the organization's f organization, more than \$10,000 of List persons in the following order compensated employees, and form Check this box if neither the organization's fill the compensation of the compensation	tion from the orga former directors f reportable comp individual trustee ner such persons	nizat or tr ensa s or o	tion a ruste ation direc	and a es the from tors,	any nat r i the inst	relate ecen orga titutio	ed or ved, aniza onal f	rganizations in the capacity as a former ition and any related organ trustees, officers, key empl	director or trustee of the izations oyees, highest	
-		1	alcu			-		1	•	
(A) Name and Title	(B) Average hours per week (list any	bo	x, unle	Pos check ess pe	rson	than o is both or/trust	an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) DAN CYRUS		-				-				,
SECRETARY	20.00	x		x				2,778	0	0
(2) SCOTT DE JONGE	1 0.00	122	 	-				2,770	<u> </u>	
TREASURER	20.00	x		x				1,010	0	0
(3) ROBIN BAILEY	1								<u></u>	
	10.00									
EXALTED RULER	0.00	X	<u> </u>	X	ļ	-		0	0	0
(4)										
(5)										
(6)						-				
(7)										
(8)										-
(9)									-	

(10)

(11)

Pa	Y VII Section A. Officers	, Directors, Tru	stee	s, K	ey E	mpl	oyee	s, a	nd Highest Compensated	I Employees (continued)				
	(A) Name and title	(B) Average hours per week (list any hours for	bo	x, unle ficer a	Pos check ess pe	rson ı	than c s both	an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	c	(F) Estimate amount other compensa from the	of ition	
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(1. <u>2</u> 1.55 m. 35)		organizati and relati organizati	ion ed	
(12)														
(13)														
(14)														
(15)														
(16)														
(17)														
(18)														
(19)														
1b	Sub-total Total from continuation she	ets to Part VII. S	Secti	ion A	<u> </u>	<u> </u>		<u> </u>	3,788					
d	Total (add lines 1b and 1c)	icluding but not l	ımıte	ed to		e lis	ted a	bov	3,788 e) who received more than	\$100,000 in				
3	Did the organization list any for employee on line 1a? If "Yes,"	complete Schee	dule	J for	suc	h inc	lividu	ıal				3	Yes	No X
4 5	For any individual listed on line organization and related organindividual Did any person listed on line 1	nizations greater	thar	i \$ 15	50,00	ا د00	f "Ye	s," c	complete Schedule J for su	ch		4		х
	for services rendered to the or	ganization? If "Y								ilidividual		5		X
Sect 1	tion B. Independent Contractor Complete this table for your five	ve highest comp	ensa	ited i	ndep	end	ent o	conti	ractors that received more	than \$100,000 of				
	compensation from the organi	zation Report co (A) business address	omp	ensa	tion	for ti	he ca	lend		in the organization's tax ye (B) tion of services	ear		(C)	
	Name and	business address							Descrip	tion of services		Com	pensatio	<u>n</u>
														
2	Total number of independent or received more than \$100,000								se listed above) who	0				

Form 990 (2013) BENEVOLENT AND PROTECTIVE ORDER 38-0341609 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (A) Total revenue (C) Unrelated (D) Revenue exempt function business excluded from tax revenue under sections 512-514 revenue Contributions, Gifts, Grants and Other Similar Amounts 1a Federated campaigns 1a b Membership dues 1b 1c c Fundraising events d Related organizations 1d 1e e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above 1f g Noncash contributions included in lines 1a-1f h Total. Add lines 1a-1f Program Service Revenue Busn Code 31,321 31,321 MEMBERSHIP DUES b d f All other program service revenue 31,321 g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) 266 266 Income from investment of tax-exempt bond proceeds Royalties (ı) Real (II) Personal 6a Gross rents b Less rental exps c Rental inc or (loss) d Net rental income or (loss) (i) Securities (II) Other sales of assets other than inventory **b** Less cost or other basis & sales exps c Gain or (loss) d Net gain or (loss) ▶ 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c) 56,926 See Part IV, line 18 38,971 b Less direct expenses 17,955 7,674 ▶ 10,281 c Net income or (loss) from fundraising events 9a Gross income from garning activities See Part IV, line 19 271,026 237,124 b Less direct expenses b 33,902 2,724 31,178 c Net income or (loss) from gaming activities 10a Gross sales of inventory, less 286,059 returns and allowances 95,205 b Less cost of goods sold b 190,854 6,272 Net income or (loss) from sales of inventory 184,582 Busn Code Miscellaneous Revenue 2,659 11a DONATION 2,659 h c All other revenue 2,659 Total. Add lines 11a-11d ▶

276,957

0

16,670

Total revenue. See instructions

Part IX Statement of Functional Expenses

	Check if Schedule O contains a response			T	
	not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
6	trustees, and key employees Compensation not included above, to disqualified			_	
Ū	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	108,986	105,110	3,876	
8	Pension plan accruals and contributions (include			_	
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	11,362	11,362		
11	Fees for services (non-employees)				
а	Management				
þ	<u> </u>	6 100	4 4 4 6		
	Accounting	6,182	4,112	2,070	
	Lobbying				
_	Professional fundraising services See Part IV, line 17				
f	Investment management fees	-			
g	, ,				
12	(A) amount, list line 11g expenses on Schedule O) Advertising and promotion	2,298	2,298		
13	Office expenses	2,250			
14	Information technology			_	
15	Royalties	400		-	400
16	Occupancy	3,837			3,837
17	Travel				· ·
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	3,184		3,184	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization			_	
23	Insurance				
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	ALLOCATED OVERHEAD	57,778	57,778		····
b	UTILITIES	26,035	31,110	26,035	
c	PROPERTY TAX	25,119		25,119	
d	REPAIRS AND MAINTENANCE	17,438		17,438	
		23,820	46,215	-27,112	4,717
25	· • • • • • • • • • • • • • • • • • • •	286,439	226,875	50,610	8,954
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation Check here If following SOP 98-2 (ASC 958-720)				

Form 990 (2013)

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 58,038 49,138 1 Cash-non-interest bearing 199,901 189,990 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 3 1,193 Accounts receivable, net 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees 5 Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L Notes and loans receivable, net 7 18,863 20,578 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 655,358 503,829 160,564 151,529 b Less accumulated depreciation 10b 10c 11 Investments—publicly traded securities 11 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 15 421,328 428,466 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 5,629 17 17 Accounts payable and accrued expenses 18 Grants payable 18 19 Deferred revenue 19 20 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, Liabilities trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 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 5,629 7,973 26 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 27 28 Temporarily restricted net assets 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here 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 31 422,837 413,355 32 Retained earnings, endowment, accumulated income, or other funds 32 422,837 413,355 33 Total net assets or fund balances 33 428,466 421,328 Total liabilities and net assets/fund balances 34

Form 990 (2013)

Form	1 990 (2013) BENEVOLENT AND PROTECTIVE ORDER 38-0341609			Pa	ge 12
Pa	art XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			957
2	Total expenses (must equal Part IX, column (A), line 25)	2	2	86,	439
3	Revenue less expenses Subtract line 2 from line 1	3		-9,	482
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4:	22,	837
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	4	13,	355
Pa	irt 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 X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
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 audited on a				
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	X	ļ
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O				
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		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		35	l	1

Form **990** (2013)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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.qov/form990.

OMB No 1545-0047

Open to Public Inspection

of the organization PATESTATE FARM AND DDAMECHTSTE ADDED		Employer	identification number			
	1	38-0341609				
Complete if the organization answered "Yes" to F	Form 990, Part IV, line 6					
	(a) Donor advised funds	(t) Funds and other accounts			
Total number at end of year						
Aggregate contributions to (during year)						
Aggregate grants from (during year)						
Aggregate value at end of year						
Did the organization inform all donors and donor advisors in writing that	t the assets held in donor advised					
funds are the organization's property, subject to the organization's exc	lusive legal control?		Yes No			
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 don	or advisor, or for any other purpose					
conferring impermissible private benefit?			Yes No			
	000 Dart IV Iva 7					
1 1	1 1					
} {	Preservation of a certified historic s	structure	•			
		.4 .				
	ervation contribution in the form of a conserv		Unid at the Ford of the Tow Ver-			
			Held at the End of the Tax Year			
	luded in (a)					
	• •	20				
	oo, and not on a	24				
•	dinguished or terminated by the organization		the			
	tangularies, or terminates by the organization	m dami	, the			
•	located >					
violations, and enforcement of the conservation easements it holds?	g,g		Yes No			
Staff and volunteer hours devoted to monitoring, inspecting, and enforce	cing conservation easements during the yea	ar				
>						
Amount of expenses incurred in monitoring, inspecting, and enforcing	conservation easements during the year					
▶ \$						
Does each conservation easement reported on line 2(d) above satisfy	the requirements of section 170(h)(4)(B)					
(i) and section 170(h)(4)(B)(ii)?			Yes No			
In Part XIII, describe how the organization reports conservation easem	ents in its revenue and expense statement,	and				
· · · · · · · · · · · · · · · · · · ·	organization's financial statements that des	scribes t	he			
	11:-4- :1 T	• ••	<u> </u>			
		milar .	Assets.			
	•		neet			
		ance or				
		na shaat				
	·					
	oximpliant, education, or research in fulfiller	ance of				
			\$			
		_	\$			
	r other similar assets for financial dain, prov	ide the	•			
	· · ·	IIIE				
	. s.a.a.iig to thood itelilio	•	\$			
		•	\$			
	Total number at end of year Aggregate contributions to (during year) Aggregate contributions to (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing the funds are the organization inform all grantees, donors, and donor advisors in writing the funds are the organization's property, subject to the organization's exc Did the organization inform all grantees, donors, and donor advisors in only for charitable purposes and not for the benefit of the donor or don conferring impermissible private benefit? If I Conservation Easements. Complete if the organization answered "Yes" to Furpose(s) of conservation easements held by the organization (check Preservation of land for public use (e.g., recreation or education) Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation easement on the last day of the tax year Total number of conservation easements Total acreage restricted by conservation easements Number of conservation easements included in (c) acquired after 8/17. historic structure listed in the National Register Number of conservation easements modified, transferred, released, evitax year Number of states where property subject to conservation easement is Does the organization have a written policy regarding the periodic more violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing \$\times Does each conservation easement reported on line 2(d) above satisfy (i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easembalance sheet, and include, if applicable, the text of the footnote to the organization's accounting for conservation easements If the organization is elected, as permitted under SFAS 116 (ASC 958), tworks of art, historical treasures, or other similar assets held for public public service, provide the following amounts relating to	Total number at end of year Aggregate rants from (Junny 1947) Aggregate value at end of year Did the organization inform all granties, donors, and donor advisors in writing that the assets held in donor advised funds are the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for chantalobe purposes and ont for the benefit of the donor or donor advisor, or for any other purpose confering imperimisable purposes and not for the benefit? If I Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservasement on the last day of the tax year Total number of conservation easements included in (c) acquired after 8/1706, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Society of the conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(0) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, balance sheet, and include, if applicable, the let of t	ENEYOLENT AND PROTECTIVE ORDER FILKS HOLLAND 1315 Total number at end of year Aggregate contributions to (during year) Aggregate value at end of year Did the organization inform all grantees, donors, and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conteming impermissible private benefit? Tit I Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation assements held by the organization of clicks all that apply) Prosecration of land for public use (e.g., recreation or education) Prosecration of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation assement on the last day of the tax year Preservation of conservation easements Total number of conservation easements 10al acreage restricted by conservation easements Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during tax year P Number of states where property subject to conservation easement is located P Number of states where property subject to conservation easements in located P Number of states where property subject to conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization assements that describes to organizations accounting for conservation easements in its revenue and expense statement, and balance sh			

86,101

c Leasehold improvements

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

d Equipment e Other

Investments—Other Securities. Complete if the organization answered "Yes" to Form 990, Part IV, line 11b See Form 990, Part X, line 12 (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 derivatives (2) Closely-held equity interests (3) Other (A) (B) (C) (D) (E) (F) (G) (H) Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶ Investments—Program Related. Complete if the organization answered "Yes" to Form 990, Part IV, line 11c See Form 990, Part X, line 13 (a) Description of investment (b) Book value (c) Method of valuation Cost or end-of-year market value (1) (2) (3) (4)(5) (6) (7) (8) (9)Total. (Column (b) must equal Form 990, Part X, col (B) line 13) ▶ Part IX Other Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 11d See Form 990, Part X, line 15 (a) Description (1) (2) (3)(4) (5) (6)(7) (8) (9)Total. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f See Form 990, Part X, line 25 (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4)(5)(6)(7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶

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

Sche	dule D (Form 990) 2013 BENEVOLENT AND PROTECTIVE	/E ORDER 3	8-0341609	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial	Statements With Rev	enue per Return.	
	Complete if the organization answered "Yes" to Form	n 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	2a		
b	Donated services and use of facilities			
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
¢	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 1	2)	5	
Pa	rt XII Reconciliation of Expenses per Audited Financia			
	Complete if the organization answered "Yes" to Form	n 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	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
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		

Part XIII Supplemental Information

b Other (Describe in Part XIII)c Add lines 4a and 4b

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line

2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

Schedule D (Form 990) 2013 BENEVOLENT AND PROTECTIVE ORDER

38-0341609

Page 5

Part XIII Supplemental Information (continued)

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

Attach to Form 990 or Form 990-EZ

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

Department of the Treasury Internal Revenue Service

BENEVOLENT AND PROTECTIVE ORDER

Name of the organization Employer identification number 38-0341609 OF ELKS HOLLAND 1315 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17 Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations Solicitation of non-government grants Internet and email solicitations Solicitation of government grants Special fundraising events Phone solicitations In-person solicitations d 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (iii) Did fund-(v) Amount paid to (vi) Amount paid to raiser have (i) Name and address of individual (IV) Gross receipts (or retained by) (or retained by) custody or (II) Activity or entity (fundraiser) from activity fundraiser listed in organization control of contributions' col (I) Yes No 2 3 6 9 10

List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

Total

Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported

		events with gro			-		ons and g	1055 1110	JOINE OI	i i Oilli	990-L	۷, ۱۱۱۱۵۵	Tand Ob Lis	ν.
•				(a) Event #1 KER/HOLi (event type)			(b) Event # RITY &	MIS	<u>C</u> <u>N</u>	(c) Other			(d) Total even (add col (a) thro col (c))	
Revenue	1	Gross receipts			46,645			10,2	81				56	,926
		Less Contributions Gross income (line 1 minus line 2)			46,645			10,2	81				56	, 926
	4	Cash prizes												
	5	Noncash prizes												
ses	6	Rent/facility costs												
Direct Expenses	7	Food and beverages												
Direct	8	Entertainment												
	9	Other direct expenses			38,971								38	,971
P		Direct expense summary Net income summary Su III Gaming. Com	btract	line 10 from lin	e 3, column (d)	Yes" to F	orm 990), Part l	V, line 1	9, or	P reported		,971 ,955
	···-	than \$15,000 o							<u> </u>			·		
Revenue				(a) Bingo			(b) Pull tabs/ii bingo/progressiv			(c) Othe	er gamıng		(d) Total gaming	
 	1	Gross revenue						222,0	52		48	, 974	271	,026
ses	2	Cash prizes												
Direct Expenses	3	Noncash prizes											-	
Direct	4	Rent/facility costs				1	· - - ·							
	5	Other direct expenses						197,6	44	1	39	, 480	237	,124
	6	Volunteer labor	X	Yes No	%	X	Yes No		% Д	Yes No		%		
	7	Direct expense summary	Add lı	nes 2 through	5 ın column (ı	d)						•	237	,124
	8	Net gaming income sumn	nary S	Subtract line 7 f	rom line 1, co	olumn (d))					•	33	,902

9	Enter the state(s) in which the organization operates gaming activities
-	le the organization licensed to operate gaming activities in each of the

а	ls t	he organization	licensed to	operate	gaming	activities	in each of	f these states?
---	------	-----------------	-------------	---------	--------	------------	------------	-----------------

b If "No," explain

0a '	Were any of the organization's gaming	licenses revoked, suspended or terminated during	the tax year?
------	---------------------------------------	--	---------------

b If "Yes," explain

	⁄es	X	No
--	-----	---	----

Sche	edule G (Form 990 or 990-EZ) 2013	BENEVOLENT	AND	PROTECTIVE	ORDER	38-03	41609	F	Page 3
11	Does the organization operate gamin	g activities with nonmembe	ers?					Yes	X No
12	Is the organization a grantor, benefic	ary or trustee of a trust or	a memb	er of a partnership or o	other entity		_		_
	formed to administer charitable gamin	ng?						Yes	X No
13	Indicate the percentage of gaming ac	=							_
а	The organization's facility						13a		%
b							13b		%
14	Enter the name and address of the precords	erson who prepares the or	ganizatio	on's gaming/special ev	ents books and	I			
	Name ▶ DAN CYRUS								
	569 E 24TH ST								
	Address MOLLAND					MI 494	23		
15a	Does the organization have a contract revenue?	ct with a third party from wh	nom the	organization receives	gaming			Yes	X No
b	If "Yes," enter the amount of gaming	revenue received by the oi	rganızatı	on ▶ \$		and the			
	amount of gaming revenue retained b	y the third party ▶ \$							
С	If "Yes," enter name and address of t	he third party							
	Name ▶								
	Address ▶								
16	Gaming manager information								
	Name ▶								
	Gaming manager compensation ▶ \$	5							
	Description of services provided ▶								
	Director/officer En	mployee Ind	depende	ent contractor					
17	Mandatory distributions								
а	Is the organization required under sta	ite law to make charitable	distributi	ons from the gaming p	proceeds to				
	retain the state gaming license?							Yes	X No
b	Enter the amount of distributions requ	uired under state law to be	distribut	ed to other exempt or	ganizations or				
	spent in the organization's own exem	pt activities during the tax	year 🕨	\$					
Par	rt IV Supplemental Inform							d	
	Part III, lines 9, 9b, 10l	o, 15b, 15c, 16, and 1	7b, as	applicable Also c	omplete this	part to provid	e any		
	additional information	(see instructions)			<u> </u>	-			

SCHEDULE O (Form 990 or 990-EZ) Supplemental Information to Form 990 or 990-EZ

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

2013

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

Name of the organization

BENEVOLENT AND PROTECTIVE ORDER

Employer identification number

OF ELKS HOLLAND 1315 38-0341609

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENT

CLUB FOR PROMOTING FRIENDSHIP AND SOCIAL RELATIONSHIPS FOR THE BENEFIT OF

MEMBERS.

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

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