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Form 990

SCANNED JUL 2 1 2014,

For Paperwork Reduction Act Notice, see the separate instructions. DAA

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter Social Security numbers on this form as it may be made public. ▶ Information about Form 990 and its instructions is at www.irs.gov/form990

2013 Open to Public Inspection

Form **990** (2013)

OMB No 1545-0047

	TIGHT TO TOTAL GOLVING	information about Form 950 and its instructions is at www.in			T. TAOP CO II CAN
<u> </u>	For the 2013 c	alendar year, or tax year beginning $04/01/13$, and ending $03/31/2$	14		
В	Check if applicable	C Name of organization		D Employ	rer identification number
	Address change	BPOE 287		1	
\neg	Name change	Doing Business As Walla Walla Lodge No 287		91-	0142870
=	· ·	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telepho	one number
_	Initial return	351 E Rose St.		509	<u>-525-2870</u>
	Terminated	City or town, state or province, country, and ZIP or foreign postal code			
	Amended return	Walla Walla WA 99362		G Gross rece	ipts\$ 339,900
=		F Name and address of principal officer			
	Application pending		H(a) Is this a gr	oup return for su	bordinates? Yes X No
			H(b) Are all sub	ordinates inclu	ided? Yes No
			If "No.	" attach a list (see instructions)
	Tax-exempt status	501(c)(3) X 501(c) (8) 4 (insert no) 4947(a)(1) or 527			
<u> </u>		ttp://www.elks.org/lodges	H(c) Group exe	emption number	→ 1156
 К	Form of organization		Year of formation 1		M State of legal domicile WA
		ımmary			
, <u>T</u> .		escribe the organization's mission or most significant activities			
Ф		Lodge supports a variety of programs and activitie	s designe	d to me	et
Š		munity and member needs, including youth activities			
Activities & Governance		eness, and recreation of veterans.			
Š		is box Final if the organization discontinued its operations or disposed of more than 2	5% of its net as	sets	
Ö	1	of voting members of the governing body (Part VI, line 1a)		3	5
Se		of independent voting members of the governing body (Part VI, line 1b)		4	5
Ę	1	mber of individuals employed in calendar year 2013 (Part V, line 2a)		5	18
÷	1	mber of volunteers (estimate if necessary)		6	800
•	1	related business revenue from Part VIII, column (C), line 12		7a	26,374
		lated business taxable income from Form 990-T, line 34		7b	-29
_			Prior Ye		Current Year
Φ	8 Contribu	tions and grants (Part VIII, line 1h)	6	5,178	63,119
Revenue	9 Program	service revenue (Part VIII, line 2g)			0
Š	10 Investme	ent income (Part VIII, column (A), lines 3, 4, and 7d)		4,528	22,042
œ	11 Other re	venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		8,829	217,226
	12 Total rev	enue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	30	8,535	302,387
	13 Grants a	nd similar amounts paid (Part IX, column (A), lines 1-3)			0
	14 Benefits	paid to or for members (Part IX, column (A), line 4)			0
ģ	15 Salaries	other compensation, employee benefits (Part IX, column (A), lines 5-10-1 V 5-10		1,782	90,452
nses	16a Professi	onal fundraising fees (Part IX, column (A), line 11e)	181		0
Expe	b Total fur	draising expenses (Part IX, column (D), line 25)			
ũ	17 Other ex	penses (Part IX, column (A), lines 11a–11d, 11f–24e)		0,240	228,444
	18 Total ex	penses Add lines 13–17 (must equal Part IX, column (A), line 25)		2,022	318,896
	19 Revenue	e less expenses Subtract line 18 from line 12 OGDEN. U		6,513	-16,509
Net Assets or			Beginning of Cu		End of Year 1,186,233
sset	20 Total as	sets (Part X, line 16)		3,807	
E A	21 Total lia	pilities (Part X, line 26)		7,775 6,032	336,710 849,523
_		ets or fund balances Subtract line 21 from line 20	86	0,032	049,323
		gnature Block			and a dear and belief it in
١.	Inder penalties of	perjury, I declare that I have examined this return, including accompanying schedules and statem complete. Declaration of preparer (other than officer) is based on all information of which preparer	nents, and to the t has any knowled	oest of my kn ae	owleage and belief, it is
	Lac, correct, and	ompore Bestation of property (state that emery) is been on an interest of the property		-	
c :		Signature of officer		Date	
	9" [John C. Masa	,		6/26/2014
ПЕ	ere	Type or print name and title TOHA / NAX SOAL AUDIT / OTT	mittoo A	# Did m	las
_		pe preparer's name Preparer's suppeture	Date D	Check	X if PTIN
Pa				5/14 self-em	
	nnaror Filley	Block, CPA Andy Block			72-1578563
	e Only	117 E Rose St		Firm's EIN	12 13 10303
	·	. walla walla wa 00262-1020		Dhone no	509-525-6307
NA-	Firm's a	ss this return with the preparer shown above? (see instructions)		Phone no	Yes No
ivia	ıy un e irə discu	23 this lettrin with the brebarer shown above. (See instructions)			1 163 140

) (Revenue \$

(Expenses \$

4e Total program service expenses ▶

91-0142870 Page 3 **Checklist of Required Schedules** Part IV Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A X 1 2 X 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to X candidates for public office? If "Yes." complete Schedule C. Part I 3 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 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 98-197 If "Yes," complete Schedule C, X 5 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If X 6 "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space, X the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," X complete Schedule D. Part III 8 9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or X debt negotiation services? If "Yes," complete Schedule D, Part IV 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted X endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 11 VII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," X complete Schedule D, Part VI 11a b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more X of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11b c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 11c X d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets X reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 11d X e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses X the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete X Schedule D, Parts XI and XII 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if X the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b X 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 b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV X 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or X for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other X assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on X Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on X Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 18 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? X If "Yes," complete Schedule G, Part III 19 X 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a

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

Part IV Checklist of Required Schedules (continued)

	10 1300 alli and india and indiana is combined adjusted a			(2013
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	x	
••	Part VI	_37		X
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	İ		
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	or IV, and Part V, line 1	34		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	complete Schedule N, Part II	32		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
- *	Part I	31		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	conservation contributions? If "Yes," complete Schedule M	30		x
30	Did the organization receive more than \$25,000 in non-cash contributions in res, complete deficiency in Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
U	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	-	x
С	Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200		
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	28b		x
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	-+	X
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	20-		v
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	_		~~
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	disqualified persons? If so, complete Schedule L, Part II	26		X
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	If "Yes," complete Schedule L, Part I	25b		
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
25a		1		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	to defease any tax-exempt bonds?	24c		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year		İ	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	through 24d and complete Schedule K If "No," go to line 25a	24a		X
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	}		
24a	The state of the s			
	employees? If "Yes," complete Schedule J	23		x
-	organization's current and former officers, directors, trustees, key employees, and highest compensated			
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
22	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States	21		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	, l	-	x
04	Did the annual to a section of the OF 000 of courts are the court to any demands are arranged to a		Yes	No
	Office in the dame of the dame		· I	

Pa	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	1a	1			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and					
	reportable gaming (gambling) winnings to prize winners?			1c		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax					
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	18	_		
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax ret			2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	ns)			37	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule		4. .	3b	•	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other					
	over, a financial account in a foreign country (such as a bank account, securities account, or other f account)?	manciai		4a		x
b	If "Yes," enter the name of the foreign country			70		
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financia	al Accou	ints			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		5a		x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transfer	action?		5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did	the				
	organization solicit any contributions that were not tax deductible as charitable contributions?			6a		_X_
b	If "Yes," did the organization include with every solicitation an express statement that such contribute	ions or				
	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	goods				
	and services provided to the payor?			7a 7b		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was a service of the control of t	,ac		76		_
С	required to file Form 8282?	vas		7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit		 ?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit con			7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file F		99 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	zation fil	e a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	l				
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	g				
	organization, have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the organization make any taxable distributions under section 4966?			9a		
b	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				
a 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		·	_		
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources			7		
	against amounts due or received from them)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	m 1041	?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		_		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				ļ	
а	·			13a	ļ	ļ
	Note. See the instructions for additional information the organization must report on Schedule O					
b	·	400				
_	the organization is licensed to issue qualified health plans	13b 13c		\dashv		
с 14а	Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year?	130	<u> </u>	14a	 	x
b		ıle O		14b		<u> </u>
DAA					m 990	(2013)

om	990 (201	3) BPOE 287	91-0142870			P	age 6
	rt VI	Governance, Management, and Disclosure For each	n "Yes" response to lines 2 throu	gh 7b below, and t	or a "	No"	
		response to line 8a, 8b, or 10b below, describe the circums	tances, processes, or changes i	n Schedule O. See	instr	uction	IS
		Check if Schedule O contains a response or note to any lin	e in this Part VI	•			X
<u>Sec</u>	tion A.	Governing Body and Management					
						Yes	No
1a	Enter the	e number of voting members of the governing body at the end of the	tax year	1a 5			
	If there a	are material differences in voting rights among members of the gover	rning body, or				
	•	verning body delegated broad authority to an executive committee or	sımılar				
		ee, explain in Schedule O		_			
b		e number of voting members included in line 1a, above, who are inde		1b 5			
2		officer, director, trustee, or key employee have a family relationship	or a business relationship with				v
		er officer, director, trustee, or key employee?	- Marian and the control of the cont		2		<u> </u>
3		organization delegate control over management duties customarily p			3		x
	•	ion of officers, directors, or trustees, or key employees to a manager		2	4		X
4		organization make any significant changes to its governing documen organization become aware during the year of a significant diversion		•	5		X
5 6		organization have members or stockholders?	of the organization's assets.		6		X
о 7а		organization have members of stockholders, or other persons who had	the nower to elect or appoint		_		_==_
1 a		nore members of the governing body?	the power to elect of appoint		7a		x
b		governance decisions of the organization reserved to (or subject to	approval by) members.				
-	•	ders, or persons other than the governing body?	,		7b		x
8		organization contemporaneously document the meetings held or writ	ten actions undertaken during the ye	ar by the following			
а		erning body?	• .	•	8a	X	
b	•	mmittee with authority to act on behalf of the governing body?			8b	X	
9	Is there	any officer, director, trustee, or key employee listed in Part VII, Secti	on A, who cannot be reached at				
		nization's mailing address? If "Yes," provide the names and address			9		<u> </u>
Sec	tion B.	Policies (This Section B requests information about po	olicies not required by the Inter	<u>rnal Revenue Co</u>	de.)		
						Yes	No
10a		organization have local chapters, branches, or affiliates?			10a		X
b		did the organization have written policies and procedures governing			405		
		s, and branches to ensure their operations are consistent with the org		the ferma	10b	X	
		organization provided a complete copy of this Form 990 to all members.		g the form?	11a	Λ	\vdash
b 122		e in Schedule O the process, if any, used by the organization to revie organization have a written conflict of interest policy? If "No," go to lir			12a		x
		ficers, directors, or trustees, and key employees required to disclose		e to conflicts?	12b		
c		organization regularly and consistently monitor and enforce compliar			<u> </u>		
·		e in Schedule O how this was done	ios min mo ponej ir 100,		12c		
13		organization have a written whistleblower policy?			13		X
14		organization have a written document retention and destruction polic	y?		14		X
15		process for determining compensation of the following persons inclu					
	ındepen	dent persons, comparability data, and contemporaneous substantiat	ion of the deliberation and decision?				
а	The orga	anization's CEO, Executive Director, or top management official			15a		X
b		fficers or key employees of the organization			15b		Х
		to line 15a or 15b, describe the process in Schedule O (see instructi					
16a		organization invest in, contribute assets to, or participate in a joint ve	enture or similar arrangement				
		exable entity during the year?			16a	<u> </u>	X
þ		did the organization follow a written policy or procedure requiring the					
	•	ation in joint venture arrangements under applicable federal tax law,	and take steps to safeguard the				
		ation's exempt status with respect to such arrangements?			16b		<u> </u>
		Disclosure states with which a copy of this Form 990 is required to be filed ▶	None				
17 4Ω		states with which a copy of this Form 990 is required to be filed F 6104 requires an organization to make its Forms 1023 (or 1024 if ap		01(c)(3)s only)			
18		e for public inspection. Indicate how you made these available. Chec		(O)(O)3 O(11 y)			
			r (explain in Schedule O)				
19		e in Schedule O whether (and if so, how) the organization made its g		est policy, and			
		I statements available to the public during the tax year		, .,,			
20		e name, physical address, and telephone number of the person who	possesses the books and records of	f the			
		ation > The Lodge Secretary & Treasurer	351 E Main St			_	

WA 99362

Walla Walla

Form 990 (2013) BPOE 287 Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Part VII Independent Contractors

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization nor any related organizations compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any	bo	k, unk	Pos check ess pe	rson	than one is both an ir/trustee)	(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	Former Highest compensated employee	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) Timothy Stewart								•	
	3.00	•						0	•
Esqiore	0.00	X	<u> </u>	┢		 	0	0	0
(2) Lacey Quiggle	3.00								
Leading Knight	0.00	x					o	0	0
(3) Jonnie Christoph									
	3.00]						
Loyal Knight	0.00	x	ŀ				0	0	0
(4) Keith Burghardt									
	3.00								
Treasurer	0.00	X		<u> </u>	l	}	0	0	0
(5) Andy Bennett		1							
	3.00					1			
Tiler	0.00	X				<u> </u>	0	0	0
(6) Larry Cunnington									
	3.00								
Trustee	0.00	X			<u> </u>	 	0	0	0
(7) Dough McMasters									
	3.00	1							_
Chairman	0.00	X		_	<u> </u>	 	0	0	0
(8) Travis Chabre				1					
	3.00						_		_
Trustee	0.00	X			-	├ ──├	0	0	0
(9) Russ Chadler	2 00								
	3.00	١,,	l				_		_
Loyal Knight	0.00	X		╆	-	 	0	0	0
(10) Greg Heimgartner	3.00	1							
Chairman of House Co	0.00	x					0	o	o
(11) Noelle Pembertor		+^	├-	+	+	 	 	0	
(II)MOETTE PERMETCOI	3.00								
Chaplain	0.00	$ \mathbf{x} $					0	o	o
DAA	0.00	122		—	L		<u> </u>	L	Form 990 (2013)

Part VII Section A. Officers	s, Directors, Tru	stee	s, K	ey E	mpl	oyee	s, a	and Highest Compensated	Employees (continued)				age o
(A) Name and title	(B) Average hours per week (list any	bo	x, unle	Pos check ess pe	rson	than o	an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	, co	(F) Estimate amount other ompensa	of ation	
	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)	o:	from th organizat and relat organizati	tion ted	
(12) Scott Dockham Inner Guard	3.00	x						0	0				0
(13) Cathy Stewart	3.00	X						0					0
Organist/Vocalist (14) Carolyn Walery	25.00	^											
Secretary (15)	0.00			X				25,323	0				0
(16)													
(17)	-												
(18)													
(19)													
1b Sub-total c Total from continuation she	eets to Part VII,	Sect	ion <i>i</i>	A	<u> </u>	<u> </u>	>	25,323					
d Total (add lines 1b and 1c) Total number of individuals (if reportable compensation from				thos	se lis	sted a	abo	ve) who received more than					
3 Did the organization list any feemployee on line 1a? If "Yes."	" complete Sche	dule	J fo	rsuc	h in	dıvidi	ual				3	Yes	No X
4 For any individual listed on lir organization and related orga individual	inizations greate	r thai	\$1 5	50,00	00?	lf "Y∈	es,"	complete Schedule J for su	ich		4		x
5 Did any person listed on line for services rendered to the c	organization? If "								r individual		5		Х
Complete this table for your factory compensation from the organization.	ive highest comp							ndar year ending with or with	hin the organization's tax y	/ear			
Name an	(A) d business address						 	Descrip	(B) otion of services		Cor	(C) mpensat	ion
				-									
	<u> </u>						-						
2 Total number of independent received more than \$100,000	contractors (incl	uding	g but	not	limi	ted to	the	ose listed above) who	0				
DAA		<u> </u>			, 114			· · · · · · · · · · · · · · · · · · ·		k.	Form	n 990	(2013)

Committee Comm	Pa	rt V	Statement of Reve Check if Schedule (nue O con	taıns a ı	esponse o	r note to any line i	in this Part VIII	-	
3 Investment income (including dividends, interest, and other similar amounts) 22,042 22,042		-	4		•		(A)	(B) Related or exempt function	Unrelated business	Revenue excluded from tax under sections
3 Investment income (including dividends, interest, and other similar amounts) 22,042 22,042	Grants	1a b	· -			54,300				
3 Investment income (including dividends, interest, and other similar amounts) 22,042 22,042	A,	С	Fundraising events	1c						
3 Investment income (including dividends, interest, and other similar amounts) 22,042 22,042	ia ia	d		 						
3 Investment income (including dividends, interest, and other similar amounts) 22,042 22,042	Sim	е	* *	1e		-				
3 Investment income (including dividends, interest, and other similar amounts) 22,042 22,042	ibutio	f		1f		8,819				
3 Investment income (including dividends, interest, and other similar amounts) 22,042 22,042	Sontr	g h		1f \$	\$		63,119		ata a sa	
3 Investment income (including dividends, interest, and other similar amounts) 22,042 22,042	- e		Total / Total			Busn Code				
3 Investment income (including dividends, interest, and other similar amounts) 22,042 22,042	e l	2a					Í		İ	
3 Investment income (including dividends, interest, and other similar amounts) 22,042 22,042	ice Rev	b								
3 Investment income (including dividends, interest, and other similar amounts) 22,042 22,042		c								
3 Investment income (including dividends, interest, and other similar amounts) 22,042 22,042	Se _T	d								
3 Investment income (including dividends, interest, and other similar amounts) 22,042 22,042	Ē	е								
3 Investment income (including dividends, interest, and other similar amounts) 22,042 22,042	g	f	All other program service reve	nue				-		
and other similar amounts)	P.	g	. •			•				
Income from investment of tax-exempt bond proceeds		3	Investment income (including	dıvıder	nds, intere	st,				
S Royalties			and other similar amounts)			▶ .	22,042			22,042
(i) Real (ii) Personal (iii) Perso		4	Income from investment of tax	-exem	pt bond p	roceeds 🕨				
Sa Gross rents 37,517		5	Royalties			•				·····
D Less rental exps			(ı) Real		(II) F	ersonal			1	
C Rental inc or (loss) 37,517		6a	Gross rents 37	, 517					[
d Net rental income or (loss)		b	Less rental exps						ł	
Ta Gross amount from (i) Securities (ii) Other (ii) Other (iii) Other (iii) Other (iiii) ther (iiii) ther (iiii) Other (iii) Other (iii) Other (С	Rental inc or (loss) 37	, 517					ŀ	
sales of assets other than memory b Less cost or other basis & sales exps c Gain or (loss) d Net gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events (not including \$ of continbutions reported on line 1c) See Part IV, line 18 a b Less direct expenses b c Net income or (loss) from fundraising events See Part IV, line 19 a 31,068 b Less direct expenses b 6,653 c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances a 57,234 b Less cost of goods sold b 30,860 c Net income or (loss) from sales of inventory Miscellaneous Revenue 11a Food & Bev Members Only b Lodge Events - Members Only c d All other revenue e Total. Add lines 11a-11d					,	•	37,517			37,517
other than inventory bless cost or other basis & sales exps c Gain or (loss) d Net gain or (loss) d Net gain or (loss) see Part IV, line 18 bless direct expenses c Net income or (loss) from fundraising events see Part IV, line 19 bless direct expenses c Net income or (loss) from fundraising events see Part IV, line 19 bless direct expenses c Net income or (loss) from gaming activities see Part IV, line 19 c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities b 24,415 10a Gross sales of inventory, less returns and allowances b 157,234 b Less cost of goods sold b 30,860 c Net income or (loss) from sales of inventory Miscellaneous Revenue 11a Food & Bev Members Only b Lodge Events - Members Only c All other revenue e Total. Add lines 11a-11d 128,920		/a	(I) Securities		(11)	Other				
Desis & sales exps										
The state of the s		b	Less cost or other						ļ	
d Net gain or (loss) 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18			basis & sales exps		ļ					
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 a b Less direct expenses b c Net income or (loss) from fundraising events See Part IV, line 19 b Less direct expenses b 6,653 c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances a 57,234 b Less cost of goods sold b 30,860 c Net income or (loss) from sales of inventory Miscellaneous Revenue 11a Food & Bev Members Only b Lodge Events - Members Only c d All other revenue e Total. Add lines 11a-11d		С	Gain or (loss)		L				ĺ	
(not including \$ of contributions reported on line 1c) See Part IV, line 18 a b Less direct expenses b c Net income or (loss) from fundraising events See Part IV, line 19 a 31,068 b Less direct expenses b 6,653 c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities b 6,653 c Net income or (loss) from gaming activities b 24,415 24,415 10a Gross sales of inventory, less returns and allowances a 57,234 b Less cost of goods sold b 30,860 c Net income or (loss) from sales of inventory		ì				>				
c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 a 31,068 b Less direct expenses b 6,653 c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances a b 24,415 10a Gross sales of inventory, less returns and allowances a b 30,860 c Net income or (loss) from sales of inventory Miscellaneous Revenue 11a Food & Bev Members Only b Lodge Events - Members Only c d All other revenue e Total. Add lines 11a-11d 128,920	<u>•</u>	8a		ents						
c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 a 31,068 b Less direct expenses b 6,653 c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances a b 24,415 10a Gross sales of inventory, less returns and allowances a b 30,860 c Net income or (loss) from sales of inventory Miscellaneous Revenue 11a Food & Bev Members Only b Lodge Events - Members Only c d All other revenue e Total. Add lines 11a-11d 128,920	eur		•							
c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 a 31,068 b Less direct expenses b 6,653 c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances a b 24,415 10a Gross sales of inventory, less returns and allowances a b 30,860 c Net income or (loss) from sales of inventory Miscellaneous Revenue 11a Food & Bev Members Only b Lodge Events - Members Only c d All other revenue e Total. Add lines 11a-11d 128,920	é		•)						
c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 a 31,068 b Less direct expenses b 6,653 c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances a b 24,415 10a Gross sales of inventory, less returns and allowances a b 30,860 c Net income or (loss) from sales of inventory Miscellaneous Revenue 11a Food & Bev Members Only b Lodge Events - Members Only c d All other revenue e Total. Add lines 11a-11d 128,920	er									
c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 a 31,068 b Less direct expenses b 6,653 c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances a b 24,415 10a Gross sales of inventory, less returns and allowances a b 30,860 c Net income or (loss) from sales of inventory Miscellaneous Revenue 11a Food & Bev Members Only b Lodge Events - Members Only c d All other revenue e Total. Add lines 11a-11d 128,920	돭	l.		- 1			ĺ			
See Part IV, line 19 a 31,068 b	•				events	<u> </u>				
b Less direct expenses b 6,653 c Net income or (loss) from gaming activities > 24,415 10a Gross sales of inventory, less returns and allowances a 57,234 b Less cost of goods sold b 30,860 c Net income or (loss) from sales of inventory > 26,374 Miscellaneous Revenue Busn Code 11a Food & Bev Members Only 113,205 b Lodge Events - Members Only 15,715 c d All other revenue e Total. Add lines 11a-11d 128,920		9a				21 000				
c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold b 30,860 c Net income or (loss) from sales of inventory Miscellaneous Revenue 11a Food & Bev Members Only b Lodge Events - Members Only c d All other revenue e Total. Add lines 11a-11d 24,415 24,415 24,415 24,415 24,415 24,415 24,415 24,415 25,7234 26,374 26,374 26,374 26,374 26,374 26,374 26,374 26,374 26,374 26,374 26,374 26,374										
10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold b c Net income or (loss) from sales of inventory Miscellaneous Revenue 11a Food & Bev Members Only b Lodge Events - Members Only c d All other revenue e Total. Add lines 11a-11d 57, 234 26, 374 26, 374 26, 374 113, 205 113, 205 113, 205 113, 205				- 1			24 415	24 415		
returns and allowances a 57,234 b Less cost of goods sold b 30,860 c Net income or (loss) from sales of inventory ▶ 26,374 Miscellaneous Revenue Busin Code 11a Food & Bev Members Only 113,205 b Lodge Events - Members Only 15,715 c d All other revenue e Total. Add lines 11a-11d ▶ 128,920		l .			tivities		24,415	24,413		
b Less cost of goods sold b 30,860 c Net income or (loss) from sales of inventory Miscellaneous Revenue Busin Code 11a Food & Bev Members Only b Lodge Events - Members Only c d All other revenue e Total. Add lines 11a-11d 30,860 26,374 26,374 213,205 113,205 113,205 113,205 113,205		10a	•			E7 224				
c Net income or (loss) from sales of inventory ▶ 26,374 26,374 Miscellaneous Revenue Busn Code 11a Food & Bev Members Only 113,205 113,205 b Lodge Events - Members Only 15,715 15,715 c 4 All other revenue 128,920		Ι.		_						
Miscellaneous Revenue Busn Code		l		1			26 374		26 374	
11a Food & Bev Members Only b Lodge Events - Members Only c d All other revenue e Total. Add lines 11a-11d		 _ c		s or in	ventory		20,314		20,314	
b Lodge Events - Members Only c d All other revenue e Total. Add lines 11a-11d 15,715 15,715 15,715 128,920		445			.	Duan Code	113 205	113 205	1	
c d All other revenue e Total. Add lines 11a–11d 128,920					_	 				
d All other revenue e Total. Add lines 11a–11d 128,920		l	rodde eneurs - wembe	es on.	T.À		10,,15	15,715		
e Total. Add lines 11a–11d ▶ 128,920		Ι.	All other revenue				·	-		
							128.920			
		12		ns			302,387	153,335	26,374	59,559

Form 990 (2013) BPOE 287

Part IX Statement of Functional Expenses

Secui	Check if Schedule O contains a resp			, , , , , , , , , , , , , , , , , , ,	X
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	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,				
3	·				
	organizations, and individuals outside the				
_	U S See Part IV, lines 15 and 16		<u></u>		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	25 202			
	trustees, and key employees	25,323			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	53,032			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	12,097			
11	Fees for services (non-employees)				
а	Management				
b	Legal			<u> </u>	
С	Accounting	3,600			
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)	7,767			
12	Advertising and promotion	5,624		_	
13	Office expenses				
14	Information technology	1,195			
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,589		-	
20	Interest	78			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	6,290			
23	Insurance	10,380			
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	Cost of Goods Sold	79,295			
a b	365.01 Electricity	15,635			
	352.01 Grand Lodge Per C	10,800		<u> </u>	
c d	362.00 Property Tax Expe	10,421			
_		74,770			
e 25	All other expenses Total functional expenses. Add lines 1 through 24e	318,896		0	0
25 26	Joint costs. Complete this line only if the	310,000			
	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)				[
	10.10.11 11 00 00 1 1 1 1 1 1 1 1 1 1 1		<u> </u>	<u> </u>	

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 20,728 110,631 Cash-non-interest bearing 16,503 56,285 2 Savings and temporary cash investments Pledges and grants receivable, net 3 5,241 516 4 Accounts receivable, net 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 7 Notes and loans receivable, net 24,262 16,393 8 Inventories for sale or use Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or 2,214,318 other basis Complete Part VI of Schedule D 10a 1,717,335 503,273 496,983 b Less accumulated depreciation 10b 10c 11 Investments—publicly traded securities 11 496,941 601,669 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 14 14 Intangible assets 15 Other assets See Part IV, line 11 15 1,163,807 1,186,233 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 9,121 17 Accounts payable and accrued expenses 17 18 18 Grants payable 52,456 8,201 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 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 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 280,453 282,379 25 of Schedule D 297,775 336,710 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 27 Unrestricted net assets 28 28 Temporarily restricted net assets 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 31 Paid-in or capital surplus, or land, building, or equipment fund 849,523 866,032 32 Retained earnings, endowment, accumulated income, or other funds 866,032 849,523 Total net assets or fund balances 1,163,807 1,186,233 Total liabilities and net assets/fund balances

Form **990** (2013)

Form 9	990 (2013) BPOE 287	91-0142870			Pa	ge 12
Par	t XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to an	y line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)		• 1	3	02,	387
2	Total expenses (must equal Part IX, column (A), line 25)		2			<u>896</u>
3	Revenue less expenses Subtract line 2 from line 1		3		<u>16,</u>	509
4	Net assets or fund balances at beginning of year (must equal Part X, line	e 33, column (A))	4	8	66,	032
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 (i	nust equal Part X, line				
	33, column (B))		10	8	49,	<u>523</u>
Par	t XII Financial Statements and Reporting					_
	Check if Schedule O contains a response or note to an	y line in this Part XII				
		_			Yes	No
1 .	Accounting method used to prepare the Form 990 $\ igsqcup$ Cash $igsymbol{\mathbb{X}}$	Accrual Other				
	If the organization changed its method of accounting from a prior year or	checked "Other," explain in				
	Schedule O			İ		
2a	Were the organization's financial statements compiled or reviewed by ai	independent accountant?		2a	<u> </u>	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	ed and separate basis		ļ		
b	Were the organization's financial statements audited by an independent	accountant?		2b		X
	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	ed and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that as	sumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and select	ion of an independent accountant?		2c		
	If the organization changed either its oversight process or selection proc	ess 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 ste	ens taken to undergo such audits		3b		

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.gov/form990.

Open to Public Inspection

OMB No 1545-0047

łame	of the organization		Employer identification number				
R!	POE 287		91-0142870				
	Organizations Maintaining Donor Advised Fur Complete if the organization answered "Yes" to F	nds or Other Similar Funds or A					
		(a) Donor advised funds	(b) Funds and other accounts			
1	Total number at end of year		<u>`</u>	<u></u>			
_	Aggregate contributions to (during year)						
2	Aggregate contributions to (during year) Aggregate grants from (during year)						
3							
4	Aggregate value at end of year Did the organization inform all donors and donor advisors in writing tha	t the assets held in donor advised					
5	-			□ Vac □ Na			
_	funds are the organization's property, subject to the organization's excl	_		Yes No			
6	Did the organization inform all grantees, donors, and donor advisors in						
	only for charitable purposes and not for the benefit of the donor or donor	or advisor, or for any other purpose		□ v _{aa} □ v _a			
D-	conferring impermissible private benefit?			Yes No			
Pa	Irt II Conservation Easements. Complete if the organization answered "Yes" to F	form 990 Part IV line 7					
_	Purpose(s) of conservation easements held by the organization (check		 -	·			
1	Preservation of land for public use (e.g., recreation or education)	Preservation of an historically im	nortant lan	nd area			
	B	Preservation of a certified historic					
	Protection of natural habitat	Preservation of a certified historic	Structure				
	Preservation of open space	niction contribution in the form of a conce	nietion				
2	Complete lines 2a through 2d if the organization held a qualified conse easement on the last day of the tax year	ivation contribution in the form of a conse		Held at the End of the Tax Yea			
	•			neiu at tile Eliu oi tile Tax Tea			
a			2a				
þ	Total acreage restricted by conservation easements	ld-d (a)	2b				
C	Number of conservation easements on a certified historic structure inc		2c				
d	Number of conservation easements included in (c) acquired after 8/17/	Ob, and not on a					
	historic structure listed in the National Register	4	2d	4L -			
3	Number of conservation easements modified, transferred, released, ex	tinguished, or terminated by the organizar	tion auring	, the			
	tax year ▶						
4	Number of states where property subject to conservation easement is						
5	Does the organization have a written policy regarding the periodic mon	itoring, inspection, handling of		п, п.			
	violations, and enforcement of the conservation easements it holds?			Yes No			
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforce	cing conservation easements during the y	ear				
	•						
7	Amount of expenses incurred in monitoring, inspecting, and enforcing	conservation easements during the year					
	> \$						
8	Does each conservation easement reported on line 2(d) above satisfy	the requirements of section 170(h)(4)(B)		п, п.			
	(i) and section 170(h)(4)(B)(ii)?			Yes No			
9	In Part XIII, describe how the organization reports conservation easem			L _			
	balance sheet, and include, if applicable, the text of the footnote to the	organization's financial statements that d	escribes ti	ne			
-	organization's accounting for conservation easements	Historical Transverse or Other	Cimilar	Acceta			
P	Organizations Maintaining Collections of Art, Complete if the organization answered "Yes" to F		Similar i	Assets.			
 -			h a l a a a a l				
та	If the organization elected, as permitted under SFAS 116 (ASC 958), residue of and historical transporter are other complex assets held for public						
	works of art, historical treasures, or other similar assets held for public		cianice or				
	public service, provide, in Part XIII, the text of the footnote to its finance						
b	If the organization elected, as permitted under SFAS 116 (ASC 958), t						
	works of art, historical treasures, or other similar assets held for public	exhibition, education, or research in furth	erance of				
	public service, provide the following amounts relating to these items			•			
	(i) Revenues included in Form 990, Part VIII, line 1		P	\$			
	(ii) Assets included in Form 990, Part X			\$			
2	If the organization received or held works of art, historical treasures, of		ovide the				
	following amounts required to be reported under SFAS 116 (ASC 958)	relating to these items		•			
а	Revenues included in Form 990, Part VIII, line 1			\$			
b	Assets included in Form 990, Part X		▶	\$			

28,839

496,983

e Other

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

Schedule D (F	-om 990) 2013 BPOE 267		91-0142670	Page -
Part VII	Investments—Other Securities. Complete if the organization answered "Yes" to F	orm 990 Part IV line	11h See Form 990 Part X II	ine 12
	(a) Description of security or category	(b) Book value	(c) Method of valuation	12
	(including name of security)	(5) 500% 14.50	Cost or end-of-year market v	alue
(1) Financial	derivatives			
	eld equity interests		· · · · · · · · · · · · · · · · · · ·	
	A Davidson & Co Investments	496,169	Cost	
	ith Trust - Certificate of Deposit	772	Cost	
(A) J (B)				
•				 -
(C)			·	
(D)				
(E)				
(F)				
(G)				
(H)		406 044		
	in (b) must equal Form 990, Part X, col (B) line 12) ▶	496,941		
Part VIII	Investments—Program Related.			
	Complete if the organization answered "Yes" to F		·· · · · · · · · · · · · · · · · · · ·	ne 13
	(a) Description of investment	(b) Book value	(c) Method of valuation	-1 -
			Cost or end-of-year market v	alue
(2)				
_(3)			· · · · · · · · · · · · · · · · · · ·	
(4)				
(5)				
(6)				
_(7)				
_(8)				
_(9)			<u> </u>	
	in (b) must equal Form 990, Part X, col (B) line 13)			
Part IX	Other Assets.			
	Complete if the organization answered "Yes" to F	orm 990, Part IV, line		
	(a) Description			b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				. <u> </u>
(7)		·		
(8)				
(9)				
	nn (b) must equal Form 990, Part X, col (B) line 15)		<u> </u>	
Part X	Other Liabilities.			
	Complete if the organization answered "Yes" to F	orm 990, Part IV, line	11e or 11f. See Form 990, Pa	art X,
	line 25.			·····
1	(a) Description of liability	(b) Book value		
	income taxes	000		
	from Trust	275,727		
	funds reserve accounts	6,652		
(4)				
(5)				
(6)				
(7)				
_(8)				
(9)				* *
Total. (Colum	nn (b) must equal Form 990, Part X, col. (B) line 25.) ▶	282,379		- ,

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	edule D (Form 990) 2013 BPOE 287		<u>-0142870</u>	Page 4
Pa	Reconciliation of Revenue per Audited Financial S		ue per Return.	
	Complete if the organization answered "Yes" to Form	990, Part IV, line 12a		
1	Total revenue, gains, and other support per audited financial statements		· 1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
С	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12		5	
Pa	art XII Reconciliation of Expenses per Audited Financial	Statements With Expe	nses per Return.	
	Complete if the organization answered "Yes" to Form	990, Part IV, line 12a		
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities	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		
b	Other (Describe in Part XIII)	4b		
С	Add lines 4a and 4b		4c	

Part XIII Supplemental Information

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

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

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

91-0142870

Page 5

Schedule D (Form 990) 2013 BPOE 287

Part XIII Supplemental Information (continued)

Department of the Treasury

Internal Revenue Service

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

OMB No 1545-0047

Open to Public Inspection

lame of the organization BPOE 287					Employer identifica 91-01428	
Part I Fundraising Activities. Complete Form 990-EZ filers are not require				red "Yes" to Form		
Indicate whether the organization raised funds through				Check all that apply		
a Mail solicitations				ernment grants		
b Internet and email solicitations			_	nent grants		
c Phone solicitations	g Special fur	_		_		
d In-person solicitations						
 Did the organization have a written or oral agreement or key employees listed in Form 990, Part VII) or ent If "Yes," list the ten highest paid individuals or entitie compensated at least \$5,000 by the organization 	ity in connection with	profes ant to a	siona agree	al fundraising services?	•	Yes No
(i) Name and address of individual or entity (fundraiser)	(II) Activity	(iii) Die raiser custo contribi	have dy or rol of	(I v) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
1		Yes	No			
2						
3						
4						
5						
6						
7						
8						
9						
10						
Fotal		_l				
3 List all states in which the organization is registered registration or licensing	or licensed to solicit	contrib	utions	s or has been notified i	t is exempt from	

Schedule G (Form 990 or 990-EZ) 2013

Page 2

P	art		vents. Complete it						
			,000 of fundraising		_	ss income	on Form 990-E	Z, lines	1 and 6b List
		events with gro	ss receipts greater	<u>tnan \$5,0 </u>			In Other	-: -	
			(a) Event #1		(b) Event #2		(c) Other events		(d) Total events (add col (a) through
a			(event type)		(event type)		(total number)		col (c))
Revenue				[
Rev	1	Gross receipts							
	2	Less Contributions					.=		
	3	Gross income (line 1 minus			"				
		line 2)							
	4	Cash prizes							
		·							
	5	Noncash prizes	<u> </u>						
es	6	Rent/facility costs							
Direct Expenses		, i							
t Ext	7	Food and beverages						-	
Oirec	8	Entertainment							
_									
	9	Other direct expenses							
	10	Direct expense summary	Add lines 4 through 9	ın column (d	i)			•	
_		Net income summary Su	ibtract line 10 from line	3, column (d)			•	
P	art		plete if the organiza on Form 990-EZ, lir		vered "Yes" to Form	m 990, Par	rt IV, line 19, or	reporte	d more
_		than \$15,000 C		ie oa	(b) Pull tabs/insta	nt			(d) Total gaming (add
Revenue			(a) Bingo		bingo/progressive b	ingo	(c) Other gaming		col (a) through col (c))
Rev		0			3	1,068			31,068
		Gross revenue	4			,1,000			31,000
es	2	Cash prizes							
Direct Expenses	,	Name of the same							
Ę	3	Noncash prizes							
Jirec	4	Rent/facility costs							
ب	_					6,653			6 653
	5	Other direct expenses	Yes	%	Yes	%	Yes	%	6,653
	6	Volunteer labor	X No	,,,	X No		X No		
									6 652
	7	Direct expense summary	Add lines 2 through 5	ın column (d	d)			P	6,653
	8	Net gaming income sumr	mary Subtract line 7 fro	om line 1, co	olumn (d)			•	24,415
9		ter the state(s) in which the	_						X Yes No
		the organization licensed to No," explain	o operate garning activi	ues in each	of these states,				ZZ Tes NO
-		/ 							
				1		4L .			
		ere any of the organization Yes," explain	's gaming licenses revo	kea, susper	naed or terminated duri	ng the tax ye	ear/		Yes X No
~		· · · · · · · · · · · · · · · · · · ·							

Sche	dule G (Form	990 or 990-EZ) 2013	BPOE 287		91-01428	70	Page 3
11	Does the org	janization operate gaming	activities with nonmembers?			Yes	x X No
12	Is the organi	zation a grantor, beneficia	ary or trustee of a trust or a member of	of a partnership or other entity			
	formed to ad	lmınıster charitable gamın	g [?]			Yes	s 🛛 No
13	Indicate the	percentage of gaming act	ivity operated in				
а	The organiza	ation's facility			13a		<u>%</u>
b	An outside fa	acility			13b	<u> </u>	%
14	Enter the na records	me and address of the pe	rson who prepares the organization's	s gaming/special events books and			
	Name ▶		etary & Treasurer				
		351 E Main St			TITE 00363		
	Address >	Walla Walla			WA 99362		
15a	Does the org	ganization have a contract	with a third party from whom the org	janization receives gaming		☐ Ves	s X No
h		er the amount of gaming r	evenue received by the organization	▶ \$	and the		,
_		aming revenue retained by					
С	_	er name and address of th	· · · · · · · · · · · · · · · · · · ·				
•	100, 0	or marrie and address of the	a iiii a paily				
	Name ►						
	Address ▶						
16	Gaming mai	nager information					
	Name ▶						
	Gaming mai	nager compensation > \$					
	Description	of services provided >					
	Director	r/officer Em	nployee Independent	contractor			
17	Mandatory d	listributions					
a	-		e law to make charitable distributions	s from the gaming proceeds to			
		ate gaming license?				Yes	s 🗓 No
b	Enter the an	nount of distributions requ	ired under state law to be distributed	to other exempt organizations or			
		·	ot activities during the tax year > \$	· -			
Par	t IV Su	ipplemental Informa	ation. Provide the explanation	s required by Part I, line 2b,	columns (iii) and (v), and	
	Pa	art III, lines 9, 9b, 10b	, 15b, 15c, 16, and 17b, as ap	plicable. Also complete this	part to provide any		
		ditional information (· ·		

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.

► 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.

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service

Name of the organization

Department of the Treasury

BPOE 287

Employer identification number 91-0142870

Form 990, Part III, Line 4d - All Other Accomplishment

Gross income dues, fees, charges or similar amounts paid by members and

guests of members of the organization, including sales of food and

beverage.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

Once the finalized tax return has been provided to the treasurer for

management review, the treasurer emails a copy of the complete tax return

to each trustee for review, and a meeting is held to discuss any questions

or concerns before the tax return is signed by the treasurer and filed with

the IRS.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Upon request

Form 990, Part IX, Line 24e - Other Expenses

Description			Amo		
355.00	Repairs an	nd Maint			
	\$	8,951	\$	0	\$ 0
365.04	Water/Garb	oage			
	\$	7,148	\$	0	\$ 0
334.00	Bulletin				
	\$	7,120	\$	0	\$ 0
445.00	License				
	\$	5,994	\$	0	\$ 0

e of the organiza	m 990 or 990-EZ) (20 tion			Employer identification	Page number
	BPOE 28	87	 	91-014287	0
65.02	Gas			•	
	\$	5,432	\$ 0	\$	0
52.02	State Per	Capita			
	\$	5,408	\$ 0	\$	0
65.01	Electricit	ty			
	\$	5,212	\$ 0	\$	0
155.00	Repairs &	Mainten			
	\$	3,467	\$ 0	\$	0
348.00	Misc. Lod	ge Expen			
	\$	2,436	\$ 0	\$	0
165.04	Water/Garl	oage			
	\$	2,383	\$ 0	\$	0
55.00	Repairs a	nd Maint			
	\$	1,864	\$ 0	\$	0
65.02	Gas				
	\$	1,811	\$ 0	\$	0
25.00	Cable Exp	ense			
	\$	1,711	\$ 0	\$	0
336.00	Cash over	and sho			
	\$	1,691	\$ 0	\$	0
380.11	Father and	d Daught			
	\$	1,602	\$ 0	\$	0
380.01	Scholarsh	ip - Mos			
	\$	1,512	\$ 0	\$	0
380.04	Scholarsh	ip - Nic			
	\$	1,500	\$ 0	\$	0
330.02	Credit Ca	rd Bank			

Schedule O (For	m 990 or 990-EZ) (20	13)				Page 2
Name of the organization					Employer identification 91-014287	
	\$	1,257	\$	0	\$	0
430.02	Credit Car	·	·		•	
	\$	1,174	\$	0	\$	0
452.00	Miscellane	eous	•			
	\$	963	\$	0	\$	0
370.09	Lodge Fam:	ily Picn				
	\$	885	\$	0	\$	0
346.00	Lodge Supp	plies				
	\$	797	\$	0	\$	0
380.16	Hoop Shoo	t				
	\$	749	\$	0	\$	0
380.02	Scholarsh	ip - Voc				
	\$	666	\$	0	\$	0
532.00	Credit Ca	rd Bank				
	\$	452	\$	0	\$	0
380.12	School Pa	trol Pic				
	\$	306	\$	0	\$	0
545.00	Food Serv					
	\$	288	\$	0	\$	0
370.21	New Years	-				
	\$	230	\$	0	\$	0
370.14	Americani		A	•		•
001 00	\$	225	\$	0	\$	0
381.02	Relief-Fl		6	0	ė	0
422.00	\$	213	\$	0	\$	0
433.00	Decoration \$	ns 207	\$	0	\$	0
	P	201	ə	U	₽	U

Schedule O (For	m 990 or 990-EZ) (2013	3)				Page 2		
Name of the organiza					Employer identification			
	BPOE 287	<u> </u>			91-014287	0		
371.01	Veterans Apprecia							
	\$	191	\$	0	\$	0		
355.02	Building Co	ontract						
	\$	189	\$	0	\$	0		
525.00	Dining Room	n Suppl						
	\$	174	\$	0	\$	0		
382.08	Miscellane	ous Lod						
	\$	170	\$	0	\$	0		
552.00	Misc Restau	ırant E						
	\$	169	\$	0	\$	0		
380.40	Vet Day Par	rade Lu						
	\$	74	\$	0	\$	0		
526.00	Kitchen Sup	oplies						
	\$	60	\$	0	\$	0		
371.04	Veterans M	isc						
	\$	54	\$	0	\$	0		
527.00	Laundry Su	pplies						
	\$	35	\$	0	\$	0		