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SCANNED DEC 0 4 2014

· Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047 2013

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.

Open to Public Inspection

Α	For	the 2013 (calend	ar year, or ta	x year beg	inning Jul	L 1	, 201	3, and e	nding	Jun			2014		
В	Chec	k if applicable		C Name of orga	nization BC	URG LIO	NS CLUB					D Employ	yer Identi	fication Nu	mber	
		Address chan		Doing Busines								72-	6055	796		
	Н	Name change	,			oox if mail is not d	elivered to stree	et address)	R	Room/su	ıte	E Telepho				
	\vdash	Initial return		111 RETE	את הסדנו	7 C						(98	5\ 5	94-205	. 1	
	Н	Terminated	F			e, country, and Z	P or foreign pos	stal code				(30	<u> </u>	J4-202		
	Н		- 1.	•		.,,							,			
	\vdash	Amended retu	- F	BOURG				L/	1 /03		3414	G Gross r			, 669	
	Ш	Application pe		F Name and ad						1		group return			Yes	X No
]	RANDOLPH BAS		RETREAT	DR BOUR	T T	<u>LA 703</u>	43 "	'Are all נייטיי 'f'No,' a	subordinates attach a list (included? see instru	r ictions)	Yes	No
<u> </u>	Ta	ex-exempt sta	atus	501(c)(3)	X 501(c) ((4)◀	(ınsert no)	4947(a)(1)	or 52	27						
J	W	/ebsite: ►	N/A	Ą						Н	l(c) Group e	exemption nu	mber 🏲	023	9	
K	Fo	orm of organiza	ation	X Corporation	Trust	Association	Other >		L Year of fo	ormation	1960) M s	State of le	gal domicile	LA	
Pa	ırt l	Sum	mary	,		•										
	1			e the organiza	tion's missi	on or most si	gnificant act	tivities (ORGANI	IZAT	ION C	ARRIES	ON	GAMINO	3	
a		ACTIV	/ITIE	ES TO RAI	SE FUN	DS FOR C	PERATIC	N OF PHY	SICAL	PLA	A TU	D PROV	JIDE			
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Ĕ		LOCAI	<u>, s</u>	TATE AND	NATION.	AL LEVEL	s.									
ĕ	2	Check th	hıs box	: 🟲 🔃 if the	organization	on discontinu	ed its opera	tions or dispo	sed of mo	ore tha	an 25% o	f its net as	ssets			
<u>ত</u>	3			ng members o									3			10
S	4			ependent votir									4			10
ij	5			of individuals e									5			
Activities &	6			of volunteers (6			16
4				l business rev									7a			0.
	_	b Net unre	elated i	ousiness taxal	ole income	from Form 9	30-1, line 34	• • • • • •		· · · ·			7b			
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e	8			and grants (Pa							<u> </u>	2,2	258.		<u>3,</u>	178.
Ē	9			ce revenue (P									- 10			
Revenue	10			ome (Part VIII							<u> </u>		48.			338.
_	11			(Part VIII, col								17,1				379.
	12			 add lines 8 							 	19,9				895.
	13			nilar amounts							ļ	23,1	160.		12,	496.
	14			o or for memb			•				<u> </u>					
S	15			compensation		•										
136	16	a Professi	ional fu	indraising fee:	s (Part IX, c	column (A), lır	ne 11e)									
Expenses		b Total fur	ndraisii	ng expenses (Part IX, col	lumn (D), line	25) ►			0.		~ _g		i.		€ ^
ш	17	Other ex	xpense	s (Part IX, col	umn (A), lır	nes 11a-11d,	11f-24e)	7				12,0	79.		18,	212.
	18	Total ex	penses	s Add lines 1	3-17 (must	equal Part IX	, column:(A)), line of C		n .		35,2				708.
_	19	Revenu	e less	expenses Sul	btract line 1	8 from line 1	2		- A F		5	-15,2				813.
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alar	20	Total as	sets (F	art X, line 16)			ິຣ	I NOV X	4 201			191,3	359.		185.	546.
Net Asser Fund Bala	21	Total lia	bilities	(Part X, line 2	6)			<u> </u>		<u></u> .		· · ·				
žį	22	Net assi	ets or f	und balances	Subtract li	ne 21 from lu	ne 20	OGDE	A L	IT.		191,3	250		195	546.
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				are that I have exa	mined this retu	um uncluding acco	mpanyana echo	dules and stateme	nte and to t	the best	of my know	lodge and he	liaf it is to	uo coment		
com	plete	Declaration of	f prepare	r (other than office	r) is based on a	all information of v	which preparer h	nas any knowledge	ints, and to t	uie best	of thy know	leuge and be	iiei, ii is ii	ue, correct,	anu.	
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US		Firm	's addres			Black Dr	ive					Firm's EIN		<u>-39265</u>		
				Gibso					<u>356-33</u>			Phone no	(985		<u>-837</u>	
Ma	y the	e IRS discu	ıss thıs	return with th	e preparer	shown above	:? (see ınstr	uctions)						. X Ye	s	No

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

Form 990 (2013)

TEEA0101 11/08/13

Form 990 (2013) BOURG LIONS CI		72-6055796	Page 2
Partilla Statement of Program	•		_
	a response or note to any line in this Part III		• • • • •
1 Briefly describe the organization's mis			
ORGANIZATION CARRIES O			
	NDS FOR OPERATION OF PHYSICAL PLANT	AND PROVIDE	
See Form 990, Page 2, Part III, Line 1	1 (continued)		
0 D. H			
	gnificant program services during the year which were not lis		п
		Yes	X No
If 'Yes,' describe these new services of			п
	g, or make significant changes in how it conducts, any progra	am services? Yes	X No
If 'Yes,' describe these changes on So			
Section 501(c)(3) and 501(c)(4) organ	service accomplishments for each of its three largest prograr nizations and section 4947(a)(1) trusts are required to report ue, if any, for each program service reported.	n services, as measured by expense the amount of grants and allocations	es s to
4 a (Code) (Expenses \$	7,195. including grants of \$ 7,	,195.)(Revenue \$	0.)
	OUS LION'S CHARITIES & ACTIVITIES	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
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4b (Code:) (Expenses \$ CONTRIBUTIONS TO LOCAL	5,301. including grants of \$ 5,		0.)
4 c (Code) (Expenses \$_	including grants of \$) (Revenue \$)
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	·		
	·		
		- 	
	·	- 	
			
4 d Other program services (Describe in	Schedule O)		
(Expenses \$		evenue \$)
4 e Total program service expenses ▶	12,496.		
BAA	TEEA0102 07/02/13	Form	990 (2013)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
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	Х	
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	•	Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	·- **********		
i	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
	b Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		Х
	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	11 c		Х
	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		Х
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X
	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	11 f		Х
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a		Х
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16	•	Х
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		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		х
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19	Х	
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		Х
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations or Χ 21 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 Χ 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 .I . . 23 Χ 24 a 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 Х 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24d X 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 Х 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 Χ 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial Х 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28a Χ b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Χ 28b 28c Х Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes.' complete Schedule M Х 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 Х Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I.... Х 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete -X 32 33 Χ Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, Х 34 Χ 35a 35b Χ 36 Χ 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 38 38 BAA Form 990 (2013)

Check if Schedule O contains a response or note to any line in his Part V. 18. Einst the number reported in Box 3 of Form 1096. Enter -0-if not applicable	orm 990 (2013) BOURG LIONS CLUB	72-6055796	I	Page
1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	Part V Statements Regarding Other IRS Filings and Tax Compliance			
1a Enter the number reported in Box 3 of Form 1086 Enter-0-if not applicable	Check if Schedule O contains a response or note to any line in this Part V			븏
be Enter the number of Forms W-2G included in line 1a. Enter -0-if not applicable. 1bl on Diff he organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) withings to prize winners? 1cl on the property of the	1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	ا م	Yes	No
C Did the organization comply with backup withholding nules for reportable payments to vendors and reportable gaming (gambling) without some street of the calendar year ending with or within the year covered by this return. 2 a Enter the number of employees reported on Form W-3, Transmitted of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. 2 b If at least one is reported on line 2a, did the organization file all required federal employment tax inturns? 3 b If the sam of lines 1 and 2a is greater than 250, you may be required to -file (see instructions) 3 a Old the organization have unvelated business gross income of \$1,000 or more during the year? 3 b If Yes has a filed a form 970-1 for this year? If Ye to line 3b, provide an explanation is Aschedic O. 3 b If Yes in the the name of the foreign country or the foreign country or see instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial accountry. 3 b If Yes, a filed the name of the foreign country. 3 b Was the organization in party to a prohibited tax sheller transaction? 4 c If Yes I bline 5 a ro 5b, did the organization that it was or is a party to a prohibited tax sheller transaction? 5 b D Ind any taxable party notify the organization that it was or is a party to a prohibited tax sheller transaction? 5 c If Yes, I did the organization in the organization that was selected in the year of the organization and selection of the organization of the value of the goods or services provided? 5 c If Yes, I did the organization include with every solicitation an express statement that such contributions or grits were not tax deductible as charaftable contributions under section 170(c). 5 p If Yes, did the organization receive a payment in excess of \$75 made	•			
(gambling) winnings to prize winners? 1c 2 a Enter the rumber 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 2 a b If at least one is reported on the 2, 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-Me (see instructions) 3 a Did the organization have an interest in, or a signature or other authority over, a financial account? 1 a foreign country (such as a bank account, south or south or financial account)? 4 a Did any taxible party nority the organization have an interest in, or a signature or other authority over, a financial account)? 4 a bid organization a party to a prohibitoris for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts 5 a Was the organization a party to a prohibitoris for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts 5 a Was the organization a party to a prohibitoris for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts 5 a Was the organization a party to a prohibitoris of the organization of the organization file Form 8886-T? 5 c If Yes, to line 5 a or 5b, did the organization file Form 8886-T? 5 c If Yes, to line 5 a or 5b, did the organization file Form 8886-T? 5 c If Yes, to line 5 a or 5b, did the organization file Form 8886-T? 5 c If Yes, to line 5 a or 5b, did the organization receive a payment in excess of \$75 made party as a contributions or grifts were not tax deductible and tribution and express statement that such contributions or grifts were not tax deductible and received for the value of the goods or services provided? 7 b If Yes, did the organization receive a payment in excess of \$75 made party		· · · · · · · · · · · · · · · · · · ·		
ments, filed for the calendar year ending with or within the year covered by this return 2 a bit of the calendar year ending with or within the year covered by this return? 2 bit of the sea is reported on the 2a, did the organization file all required federal employment tax returns? 2 bit Note. If the sum of lines is and 2a is greater than 250, you may be required to e-file (see instructions) 3 bit of the companization have unrelated business gross success of \$1,000 or more during the year? 3 bit of the see and the companization of the companization of the country (such as a bank account, securines account, or other financial accounts) 4 all all and the programments of from 10 F 90-22 1, Report of Foreign Bank and Financial accounts 5 bit of yes; enter the name of the foreign country such as a bank account, securines account, or other financial accounts 5 a Was the organization a party to a prohibitions for filing requirements for Form 10 F 90-22 1, Report of Foreign Bank and Financial Accounts 5 a Was the organization a party to a prohibitions for filing requirements for Form 10 F 90-22 1, Report of Foreign Bank and Financial Accounts 5 a Was the organization a party to a prohibitions of the organization of the organization file Form 8886-17 5 c. If Yes, to line 5 are 5b, did the organization file Form 8886-17 5 c. If Yes, to line 5 are 5b, did the organization file Form 8886-17 5 c. If Yes, to line 5 are 5b, did the organization file Form 8886-17 5 c. If Yes, did the organization include with every solicitation an express statement that such contributions or grits were for 1 and	(gambling) winnings to prize winners?	1 c	;	1
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3 a bid the organization have unrelated business gross income of \$1,000 or more during the year? 3 b li Yes has filled a form 1907. Tof this yea? If file his bid, provide an explanation in Schodule 0. 3 b li Yes has filled a form 1907. Tof this yea? If file his bid, provide an explanation in Schodule 0. 3 b li Yes has filled a form 1907. Tof this year? If file his bid, provide an explanation in Schodule 0. 4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account? 4 b li Yes, enter the name of the foreign country be seen instructions for filling requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a D bid any taxable party north the organization file Form 886-T? 5 a Dos the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicid any contributions that were not itax deductible as charitable contributions. 5 a Li Yes, did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6 b If Yes, did the organization michal with every solicitation and express statement that such contributions or gifts were not tax deductible? 7 organizations that may receive deductible contributions under section 170(c). 9 a 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? 7 b If Yes, did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 f Did the organization seceive any funds, directly or indirectly, to pay premiums on a personal	2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2 a			
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3 b b if Yes has if illed a Form 990-1 for this year? if Wro lot in 26, provide an explanation in Schedule O. 4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account, in a foreign country (such as a bank account, securities account, or other financial account)? 5 b if Yes, either the name of the foreign country. 5 each sensituations for filling requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial accounts. 5 a Was the organization to a provision that it was or is a party to a prohibited tax sheller transaction? 5 a Was the organization probe the organization that it was or is a party to a prohibited tax sheller transaction? 5 a Dod any texable party notify the organization file Form 8886-17. 5 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not lax deductible as chantable contributions? 6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions in that were not lax deductible as chantable contributions? 6 a Different to organization receive a payment in excess of \$75 made party as a contribution ornibutions or girts were not lax deductible? 7 organizations that may receive deductible contributions under section 170(c). 8 b If Yes, did the organization notify the donor of the value of the goods or services provided? 7 a Diff the organization receive a payment in excess of \$75 made party as a contribution of undersective or more than the party for which it was required to file Form 8282? 8 b If Yes, did the organization notify the donor of the value of the goods or services provided? 9 c If Yes, indicate the number of Forms 8282 filed during the year. 10 b the organization receive any funds, directly or indir	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns	? 2 b)	
b If Yes has tilled a Form 990-T for this yea? If 16/10 her 28, provide an explanation in Schedule 0 4.8 At any time during the calandary year, dit the organization have an interest in, or a significant or other financial accountly. b If Yes, enter the name of the foreign country (such as a bank account, securities account, or other financial account)? b If Yes, enter the name of the foreign country is a provided to the responsibility of the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year? 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a Did not be did not a party to a prohibited tax shelter transaction at any time during the tax year? 5 a Did not be organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not lax deductible contributions? 5 a Did the organization shell may receive deductible contributions under section 178(c). 5 a Did the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 5 b If Yes, indicate the number of Forms 8282 filed during the year of tax goods or services provided? 7 b If the organization shell, exchange, or otherwise dispose of tangetic personal benefit contract? 7 c If the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 d If Yes, indicate the number of Forms 8282 filed during the year 9 b If the organization or received a contribution of qualified intellectual property, did the organization file a Form 10889 are required? 9 If the organization received a contribution of cars, boats, arplanes, or other veh				
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	which the organization is licensed to issue qualified health plans			
4.2 Did the organization receive any navments for indoor tanning services during the tay year?	c Enter the amount of reserves on hand		<u>L</u>	
b If 'Yes.' has it filed a Form 720 to report these payments? If 'No.' provide an explanation in Schedule O	14a Did the organization receive any payments for indoor tanning services during the tax year?			λ

-orm	1990 (2013) BOURG LIONS CLUB 72-6055796		P	age 6
Par	Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below 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	n		. Гх
		<u> </u>	· · · ·	^
Sec	tion A. Governing Body and Management			
		-	Yes	No
1 a	a Enter the number of voting members of the governing body at the end of the tax year	-		
	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			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	- '>		
	officer, director, trustee or key employee?	2		Х
3	Did the organization delegate control over management duties customanly performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents			
	since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	Х	
7 a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more			
	members of the governing body?	7 a	Х	
ŀ	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or other persons other than the governing body?	7 b	. X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by			
	the following:	(1 %)		
	The governing body?	8 a	Х	
	Each committee with authority to act on behalf of the governing body?	8 b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.)	
			Yes	No
10 a	a Did the organization have local chapters, branches, or affiliates?	10 a	Х	-
	of 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?	10 b		Х
11 a	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	Χ	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	# A.	Mig.	,
12 a	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 · · · · · · · · · · · · · · · · · ·	12 a		Х
Ł	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12 b		
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in			
	Schedule O how this was done	12 c		
13	Did the organization have a written whistleblower policy?	13		_ X
14	Did the organization have a written document retention and destruction policy?	14		X
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?	\$ ₁		,
а	The organization's CEO, Executive Director, or top management official	15 a		X
	Other officers of key employees of the organization	15 b		Х
	If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions)	25		
16 =	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	- 33.5	, .	
106	taxable entity during the year?	16 a		X
ŀ	o If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its	ុំ វ ន		
-	participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16 b		
500	tion C. Disclosure	100		_
17				
18	List the states with which a copy of this Form 990 is required to be filed Louisiana Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	for pu		
	inspection Indicate how you make these available. Check all that apply. Own website Another's website X Upon request Other (explain in Schedule O)	.or pu	Silo	
19	Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available	le to		
	the public during the tax year		•	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization		- 0 4	1016
	RANDOLPH BASCLE 111 RETREAT DR BOURG LA 70343 (98	<u> </u>	294-4	<u> </u>

. , Form 990 (2013) BOURG LIONS CLU	В								72-6055	796 Page 7
Part VII Compensation of Officer Independent Contractors	s, Direct	tors,	Tru	ıste	es	, Key	En	nployees, Highes	t Compensated I	
Check if Schedule O contains a re		r note	to ar	av lir	ne in	this F	art \	./II		П
Section A. Officers, Directors, Tru										· · · · · · · · · · · · ·
a Complete this table for all persons required organization's tax year List all of the organization's current office.	to be liste	d Re	port	com	pen	sation	for t	he calendar year endı	ng with or within the	of
compensation Enter -0- in columns (D), (E), a								dais of organizations),	regardless of amount	OI .
 List all of the organization's current key 	employee	s, if an	y S	ee II	nstru	ictions	for	definition of 'key emplo	yee.'	
 List the organization's five current higher who received reportable compensation (Box 5 organization and any related organizations 										;)
 List all of the organization's former offic of reportable compensation from the organizar 	tion and ar	ıy relai	ted c	orga	nıza	tions	•	• •		•
 List all of the organization's former dire organization, more than \$10,000 of reportable 	compensa	ation fr	om t	the c	orga	nızatıo	n an	nd any related organiza	itions.	
List persons in the following order individual to employees, and former such persons	rustees or	directo	ors, I	nstit	utio	nal tru:	stee	s, officers, key employ	ees, highest compensa	ated
Check this box if neither the organization i	nor any rela	ated o	rgan	ızatı	on c	ompe	nsat	ed any current officer,	director, or trustee	
				(()					
(A) Name and Title	(B) Average hours per week (list	one bo	x, uni	less p	ersor	more the is both r/trustee	an)	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	any hours for related organiza- tions below dotted line)	Individuat trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) CURRY MATHERNS	_ 5.00									
PRESIDENT				Х				0.	0.	0.
(2) LERYES USIE	3.00									

Part VII Section A. Officers, Directors, Trus	(B)	<u>ney</u>		Dio (C		es, a	inc	i Highest Con	ipensated Emp	loyees (continuea)
(A) Name and title	Average hours per week	box,	not che unless cer and	Positi eck n s per d a di	tion more t son is irecto	han on both a r/truste	e)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	hours for related organiza - tions below dotted line)	Individual trustee or director	nstitutional trustee	Officer	key employee	Highest compensated employee	mer			organization and related organizations
(15)				\dashv						
(16)										
(17)	 									
(18)										
(19)	 									
(20)										
(21)										
(22)								_	-	
(23)										·
(24)									-,	
(25)						Ì				
1 b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)						'	-	0.	0.	0.
2 Total number of individuals (including but not limited t from the organization ►	o those	listed	abov	ve) י	who	rece	vec	d more than \$100,0	000 of reportable coi	mpensation
3 Did the organization list any former officer, director, on line 1a? If 'Yes,' complete Schedule J for such indi	ividual		• •		•		•			Yes No
4 For any individual listed on line 1a, is the sum of reporting the organization and related organizations greater that such individual	an \$150,	00Ö?	If 'Ye	es' c	comp	olete .	Sch	nedule J for		. 4 X
5 Did any person listed on line 1a receive or accrue cor for services rendered to the organization? If 'Yes,' cor										5 X
Section B. Independent Contractors 1 Complete this table for your five highest compensated compensation from the organization Report compens	d indepe	nden	t con	trac	tors	that i	rece	eived more than \$1	00,000 of	par
(A) Name and business addres		· tile	Calci	1021	yca	i Cito	ııı ıg	(B) Description o		(C) Compensation
				-						
Total number of independent contractors (including bits)	ut not lin	nited	to the	ose	liste	d abo	nve') who received mo	re than	*/ .
\$100,000 of compensation from the organization	ot iiii					3 350) ardii	Tall 18 (2) 17 (1) 18 (

		Check if Schedule O c	ontains a	respon	se or note to any lu	ne in this Part VIII .						🗌
						(A) Total revenue	exe fund	ed or mpt	bu	(C) nrelated usiness evenue	(D) Revent excluded fro under sec 512-51	om tax tions
2 <u>1</u> 2		Federated campaigns .		1 a						•		
8 8	b	Membership dues		1 b	741.						1	
S, G	C	Fundraising events		1 c								
F 원	d	Related organizations .		1 d]			,		
S, E	е	Government grants (contribution	ons)	1 e								
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	f	All other contributions, gifts, gr similar amounts not included a	ants, and	1 f	2,437.		=			,		
E S	_	Noncash contributions include		· -					į		. •	
8 ₹	h	Total. Add lines 1a-1f .			<u> </u>	3,178.			<u> </u>			
闄					Business Code			<u> </u>	70	*		
9	2 a			L								
22	b	'										
물	c											
띮	d					,						
š	е						T					_
3	f	All other program service	revenue			-						
윤	g	Total. Add lines 2a-2f					* 9	<u>ķ</u> .		\$.		
	3	Investment income (inclu	idina divid	ends. u	nterest and		 	·	 			
	-	other similar amounts) .				338.		338.		0.	•	0.
	4	Income from investment	of tax-exe	mpt bo	nd proceeds							
	5	Royalties							<u> </u>			
			(ı) Re		(II) Personal	"	4.5	75 - 25 765 - 25	<u>.</u>	· ½ 4,	***	- X
	6 a	Gross rents		300.			\$ 3 S	7	\$10	\$ 5 ₄		**
	b	Less rental expenses				7.		. 2		* *;	:	10
		Rental income or (loss) -		300.			K				W. W	
		Net rental income or (los	s)		.	300.		300.	b	0 -		0.
		Gross amount from sales of	(ı) Secu		(II) Other		*	300.		· · ·	*	<u> </u>
	/ a	assets other than inventory					11/200	<i>n</i> , :	ş · ·	Mar ett		4
		_					13 × ×			**	*	
		Less cost or other basis and sales expenses	' i						·	"	4.	
		Gain or (loss)					ķ	~,	\$ 5 z	<u>.</u>		-
					▶			· id i. d			·	
							<u> </u>					
믤	ва	Gross income from fundr (not including: \$	aising eve	ents			1:		<u> </u>	4.		
OTHER REVEN		of contributions reported	on line 1c	:)			*		ľ	fiv.	1	
뮕		See Part IV, line 18			,					ა		
띨		Less direct expenses				·	*					
티		Net income or (loss) from			· •		- 1 "				<u> </u>	
					1115		 		<u> </u>		<u> </u>	
1	9 a	Gross income from gami See Part IV, line 19	ng activiti	es a		j					1	
	_				200,030.	1			ļ			
		Less direct expenses			107,773.						-	
	С	Net income or (loss) from	i gaming a	acuviue	S	18,924.	1	8,924.		<u> </u>		0.
	10 a	Gross sales of inventory, and allowances	less retui	ms								
					2,030.	-					, •	
		Less: cost of goods sold			P[ļ		ļ		ļ	
ļ		Net income or (loss) from Miscellaneous Revenu		invento		2,098.		2,098.	<u></u>	0.	<u> </u>	0.
ļ					Business Code				 		ļ	
	11 a						.		 	_	ļ	
	b	' 							ļ		ļ	
	C			_		<u> </u>			ļ		ļ	
		All other revenue				57.	ļ	<u>57.</u>	Ļ	0.		0.
		Total. Add lines 11a-11d				57.			ļ			
	12	Total revenue. See instr	uctions .			24,895.	2	1,717.		0.		0.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)		
Check if Schedule O contains a response or note to any line in this Part IX	$\overline{\cdot \cdot \cdot }$	-

	not include amounts reported on lines 7b, 8b, 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 United States See Part IV, line 21	12,496.	12,496.		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	12,130.	12,150.		## (Fig. 1)
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16		200	, , , ,	
4	Benefits paid to or for members			· · ·) #27 45 · · · · · · · · · · · · · · · · · ·	
5	Compensation of current officers, directors, trustees, and key employees				·
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 salanes and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)		,		
а	Management				
b	Legal				
C	Accounting				
d	Lobbying				
е	Professional fundraising services See Part IV, line 17 .		, , , , , , , , , , , , , , , , , , ,		· -
f	Investment management fees				
•	Other (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	13,486.	0.	13,486.	0.
17	Travel	15,400.	0.	13,400.	<u> </u>
	Payments of travel or entertainment expenses for any federal, state, or local public officials				
	Conferences, conventions, and meetings	1,279.	1,279.	0.	0.
20	Payments to affiliates				
21 22	Depreciation, depletion, and amortization	1 140		1 1 1 0	
23	Insurance	1,142.	0.	1,142.	0.
	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)	,	-^ , ' ;	4.3	9
а	DUES	1,209.	1,209.	0.	0.
	SUPPLIES	130.	0.	130.	0 -
	TAXES	462.	0.	462.	0.
	OFFICE	139.	0.	139.	. 0.
	All other expenses	365.	0.	365.	0.
	Total functional expenses. Add lines 1 through 24e	30,708.	14,984.	15,724.	0.
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).				

Part X Balance Sheet (A) (B) Beginning of year End of year 1 1,756 2,336. 2 2 Savings and temporary cash investments . 173,525 168,274. 3 3 4 Loans and other receivables from current and former officers, directors, 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10 a 115,887 10 b 100,951 16,078 10 c 14,936. 11 Investments - publicly traded securities . 11 Investments - other securities See Part IV, line 11 12 12 Investments - program-related See Part IV, line 11. 13 13 14 14 15 Other assets. See Part IV, line 11 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 191. 16 185,546 17 17 Grants payable. . 18 18 Deferred revenue . 19 19 20 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, 22 22 23 23 24 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 25 25 26 Total liabilities. Add lines 17 through 25.......... 0 0. Organizations that follow SFAS 117 (ASC-958), check-here -- and complete lines 27 through 29, and lines 33 and 34. 27 27 Temporarily restricted net assets 28 28 29 29 8 R Organizations that do not follow SFAS 117 (ASC 958), check here > X and complete lines 30 through 34. FUND Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 BALANCES 32 Retained earnings, endowment, accumulated income, or other funds 32 191,359 185,546. 33 33 191,359 185,546.

BAA

34

185,546. Form 990 (2013)

191,359

34

Form 990 (2013) BOURG LIONS CLUB	72 -	605579	96	Page 12
Part XI: Reconciliation of Net Assets				
Check if Schedule O contains a response or note to any line in this Part XI				\square
1 Total revenue (must equal Part VIII, column (A), line 12)		1		4,895.
2 Total expenses (must equal Part IX, column (A), line 25)		2		0,708.
3 Revenue less expenses Subtract line 2 from line 1		3		5,813.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		4		1,359.
5 Net unrealized gains (losses) on investments		5		
6 Donated services and use of facilities		6	-	
7 Investment expenses		7		
8 Pnor penod adjustments		8		
9 Other changes in net assets or fund balances (explain in Schedule O)		9		
Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)).		10	1 Ω	5,546.
Part XII Financial Statements and Reporting		· · · ·	10	5,540.
Check if Schedule O contains a response or note to any line in this Part XII				
Official in deficious of contains a response of note to any line in this Part XII	· · · · · ·	• • • •		res No
1 Accounting method used to prepare the Form 990 X Cash Accrual Other			1976	es No
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				
2 a 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 re separate basis, consolidated basis, or both	viewed on a		77	
Separate basis Consolidated basis Both consolidated and separate basis				Minhado Manter vi
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 sbasis, consolidated basis, or both	eparate			·
X Separate basis Consolidated basis Both consolidated and separate basis				
c If Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig review, or compilation of its financial statements and selection of an independent accountant?	ht of the aud	t,	. 2с	х
If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	1		182	
3 a As a result of a federal award, was the organization required to undergo an audit or audits as set forth Audit Act and OMB Circular A-133?	n the Single		3 a	X
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the	e required ai	udit		
or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u> </u>		. Зь	
BAA			Form 9	90 (2013)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations. Complete Parts I-A and B. Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations: Complete Part I-A only

If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B Do not complete Part II-A

lf the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

Name of organization			Employer identific	ation number
BOURG LIONS CLUB			72-605579	
	the organization is exempt under se	· /		zation.
	the organization's direct and indirect political ca			
3 Volunteer hours				
Part I-B Complete if t	the organization is exempt under se	ction 501(c)(3).		
 Enter the amount of any 	excise tax incurred by the organization under	section 4955		
	excise tax incurred by organization managers			
3 If the organization incurs	red a section 4955 tax, did it file Form 4720 for	this year?		· · Yes No
4 a Was a correction made	?			Yes No
ь If 'Yes,' describe in Part	IV.			
Part I-C Complete if t	the organization is exempt under se	ection 501(c), exce	pt section 501(c)(3)	
1 Enter the amount direct	ly expended by the filing organization for section	n 527 exempt function ac	ctivities · · · · · ► \$	5
	filing organization's funds contributed to other			•
3 Total exempt function ending 17b	xpenditures Add lines 1 and 2 Enter here and	on Form 1120-POL,		3
4 Did the filing organization	on file Form 1120-POL for this year?			· · · Yes No
organization made payr	isses and employer identification number (EIN) ments. For each organization listed, enter the arributions received that were promptly and direct plitical action committee (PAC). If additional spa	nount paid from the filing	organization's funds Also	enter the
(a) Name	(b) Address	(c) EIN	_(d) Amount paid from filing	(e) Amount of political
		(4)	organization's funds If none, enter-0-	contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1)				
(2)				
(3)				
(4)				
(5)				
	1		1	

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

Schedule C (Form 990 or 990-EZ) 2013

	(h)).				•
A Check ► If the filin	. ,,	s to an affiliated group (and	list in Part IV each affil	lated group member's nar	me,
		hare of excess lobbying ex		5 1	,
		d box A and 'limited contro			
(The term	Limits on Lobbyir 'expenditures' mear	ng Expenditures ns amounts paid or incurr	red.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditu	res to influence public	opinion (grass roots lobbyi	na)	-	
b Total lobbying expenditu					
c Total lobbying expenditu	~		•		
d Other exempt purpose ex	xpenditures				
e Total exempt purpose ex	penditures (add lines	1c and 1d)			
f Lobbying nontaxable am both columns		nt from the following table in			
If the amount on line 1e, col		The lobbying nontaxable			
Not over \$500,000	- ' - ' - ' - ' - ' - ' - ' - ' - ' - '	20% of the amount on line 1e	- "		
Over \$500,000 but not over \$1	1,000,000	\$100,000 plus 15% of the excess	over \$500,000		
Over \$1,000,000 but not over	\$1,500,000	\$175,000 plus 10% of the excess	over \$1,000,000		
Over \$1,500,000 but not over \$	\$17,000,000	\$225,000 plus 5% of the excess of	over \$1,500,000		
Over \$17,000,000		\$1,000,000			
g Grassroots nontaxable a	mount (enter 25% of I	ine 1f)			
h Subtract line 1g from line	e 1a If zero or less, er	ter -0			
i Subtract line 1f from line	1c. If zero or less, ent	er-0			
j If there is an amount othe section 4911 tax for this	er than zero on either year?	line 1h or line 1i, did the or	ganızatıon file Form 472	20 reporting	
					· · · Yes No
(Som	ne organizations that	-Year Averaging Period U made a section 501(h) els below. See the instructi	Inder Section 501(h) ection do not have to	complete all of the five	··· []Yes []No
(Som	ne organizations that columns	-Year Averaging Period U made a section 501(h) ele	Inder Section 501(h) ection do not have to ons for lines 2a throug	complete all of the five gh 2f.)	··· []Yes []No
(Som Calendar year (or fiscal year beginning in)	ne organizations that columns	-Year Averaging Period U made a section 501(h) el s below. See the instructi	Inder Section 501(h) ection do not have to ons for lines 2a throug	complete all of the five gh 2f.)	(e) Total
Calendar year (or fiscal	e organizations that columns Lobby	-Year Averaging Period U made a section 501(h) ele s below. See the instructiving Expenditures During	Inder Section 501(h) ection do not have to ons for lines 2a throug 4-Year Averaging Per	complete all of the five gh 2f.) iod	
Calendar year (or fiscal year beginning in) 2 a Lobbying non-taxable	e organizations that columns Lobby	-Year Averaging Period U made a section 501(h) ele s below. See the instructiving Expenditures During	Inder Section 501(h) ection do not have to ons for lines 2a throug 4-Year Averaging Per	complete all of the five gh 2f.) iod	
Calendar year (or fiscal year beginning in) 2 a Lobbying non-taxable amount	e organizations that columns Lobby	-Year Averaging Period U made a section 501(h) ele s below. See the instructiving Expenditures During	Inder Section 501(h) ection do not have to ons for lines 2a throug 4-Year Averaging Per	complete all of the five gh 2f.) iod	
Calendar year (or fiscal year beginning in) 2 a Lobbying non-taxable amount	e organizations that columns Lobby	-Year Averaging Period U made a section 501(h) ele s below. See the instructiving Expenditures During	Inder Section 501(h) ection do not have to ons for lines 2a throug 4-Year Averaging Per	complete all of the five gh 2f.) iod	
Calendar year (or fiscal year beginning in) 2 a Lobbying non-taxable amount	e organizations that columns Lobby	-Year Averaging Period U made a section 501(h) ele s below. See the instructiving Expenditures During	Inder Section 501(h) ection do not have to ons for lines 2a throug 4-Year Averaging Per	complete all of the five gh 2f.) iod	
Calendar year (or fiscal year beginning in) 2 a Lobbying non-taxable amount	e organizations that columns Lobby	-Year Averaging Period U made a section 501(h) ele s below. See the instructiving Expenditures During	Inder Section 501(h) ection do not have to ons for lines 2a throug 4-Year Averaging Per	complete all of the five gh 2f.) iod	

•		
Schedule C (Form 990 or 990-EZ) 2013BOURG I	IONS CLUB	72-6055796
Part II-B Complete if the organi	zation is exempt under section 501(c)(3)	and has NOT filed Form 5768
(election under section	n 501(h)).	

		(a	1)	(b)	
For each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		Yes	No	Am	ount	
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:						
a Volunteers?	L			or and the deposition of	KRING NOTES	3,000
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				22.64 Y		
c Media advertisements?					•	
d Mailings to members, legislators, or the public?	[
e Publications, or published or broadcast statements?	L					
f Grants to other organizations for lobbying purposes?	[
g Direct contact with legislators, their staffs, government officials, or a legislative body?	[
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	[
i Other activities?						
j Total. Add lines 1c through 1	[4	4			
2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					S. S	N & C
b If 'Yes,' enter the amount of any tax incurred under section 4912	[
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912			- 			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					1830	- 51
Rantilli-A Complete if the organization is exempt under section 501(c)(4), section	on 501(c)(5)	, or			
section 501(c)(6).					, ,	
					Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?				ļ	X	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?					ļl	X
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?					<u> </u>	X
Part III-B Complete if the organization is exempt under section 501(c)(4), section (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' Canswered 'Yes.'	on 501()R (b) P	c)(5) art l	, or s II-A, I	ection 5 line 3, is	01(c)	
1 Dues, assessments and similar amounts from members			1			
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).	cal					
a Current year			2 a			
b Carryover from last year			2b			
c Total			2с			
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .			3			
					-	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and prexpenditure next year?	olitical		4			
5 Taxable amount of lobbying and political expenditures (see instructions)			5			
Part IV Supplemental Information						
Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group Part II-B, line 1 Also, complete this part for any additional information	ıp list), Pa	ırt II-A	, line 2	, and		
					•	

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 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.

Opento Publica Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

BOU	RG LIONS CLUB		72-6055796
	Organizations Maintaining Donor Advised Funds	or Other Similar Fu	
	Complete if the organization answered 'Yes' to Form	990, Part IV, line 6.	
	(a) Donor	advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		·
3	Aggregate grants from (dunng year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing that are the organization's property, subject to the organization's exclusive leaves	t the assets held in donor legal control?	advised funds
	Did the organization inform all grantees, donors, and donor advisors in for charitable purposes and not for the benefit of the donor or donor adimpermissible private benefit?	writing that grant funds ca visor, or for any other purp	n be used only cose conferring Yes No
Par	Conservation Easements. Complete if the organization answered 'Yes' to Form	n 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check		
	Preservation of land for public use (e.g., recreation or education)		of an historically important land area
	Protection of natural habitat	⊢	of a certified historic structure
	Preservation of open space	—	
2	Complete lines 2a through 2d if the organization held a qualified consellect day of the toy year.	rvation contribution in the	form of a conservation easement on the
	last day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		- International Control of the Contr
	Total acreage restricted by conservation easements		
	Number of conservation easements on a certified historic structure incli		
	Number of conservation easements included in (c) acquired after 8/17/	` '	
	structure listed in the National Register		2 d
3	Number of conservation easements modified, transferred, released, ex tax year ▶	tinguished, or terminated	by the organization during the
4	Number of states where property subject to conservation easement is l	ocated ►	
5	Does the organization have a written policy regarding the periodic mon and enforcement of the conservation easements it holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforce	cing conservation easeme	nts during the year
7	Amount of expenses incurred in monitoring, inspecting, and enforcing of $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	conservation easements d	uring the year
8	Does each conservation easement reported on line 2(d) above satisfy and section 170(h)(4)(B)(ii)?	the requirements of sectio	n 170(h)(4)(B)(ı)
9	In Part XIII, describe how the organization reports conservation easem include, if applicable, the text of the footnote to the organization's finan conservation easements.		
Par	Organizations Maintaining Collections of Art, His Complete if the organization answered 'Yes' to Form	storical Treasures, on 990, Part IV, line 8.	or Other Similar Assets.
1 a	If the organization elected, as permitted under SFAS 116 (ASC 958), n art, historical treasures, or other similar assets held for public exhibition in Part XIII, the text of the footnote to its financial statements that descr	n, education, or research in	statement and balance sheet works of n furtherance of public service, provide,
t	o If the organization elected, as permitted under SFAS 116 (ASC 958), to historical treasures, or other similar assets held for public exhibition, ed following amounts relating to these items	o report in its revenue stat ducation, or research in fui	ement and balance sheet works of art, therance of public service, provide the
	(i) Revenues included in Form 990, Part VIII, line 1		
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical treasures, or amounts required to be reported under SFAS 116 (ASC 958) relating to	other similar assets for fir o these items	nancial gain, provide the following
ā	Revenues included in Form 990, Part VIII, line 1		▶\$
Ł	Assets included in Form 990, Part X		

	G LIONS CLU			72-605			Page :
Part III Organizations Mainta	ining Collecti	ions of Art, Histo	orical Treasures,	or Other Similar Ass	sets (c	ontinι	ıed)
 Using the organization's acquisition items (check all that apply). 	n, accession, and	other records, check	any of the following tha	at are a significant use of it	s collecti	on	
a Public exhibition		d Loan o	or exchange programs				
b Scholarly research		e Other					
c Preservation for future general							
4 Provide a description of the organi. Part XIII.							
5 During the year, did the organization to be sold to raise funds rather tha	on solicit or receiv n to be maintaine	e donations of art, his d as part of the organi	torical treasures, or oth zation's collection?	ner sımılar assets	Yes		No
line 9, or reported an a	mount on For	nts. Complete if the 1990, Part X, line	e 21.	swered 'Yes' to Form	990, F	'art IV	′ 1
1 a Is the organization an agent, trusted on Form 990, Part X?	· · · · · · · · · ·			ssets not included	Yes	[No
b If 'Yes,' explain the arrangement in	Part XIII and con	nplete the following ta	ble		Amount		_
c Beginning balance				. 1c	7		
d Additions during the year							
e Distributions during the year							
f Ending balance				1f			
2 a Did the organization include an am					Yes		No
b If 'Yes,' explain the arrangement in	Part XIII Check	here if the explantion	has been provided in P	Part XIII		[
Part V側 Endowment Funds. C	omplete if the	organization ans	wered 'Yes' to For	m 990, Part IV, line 1	0.		
	(a) Current year	r (b) Prior year	(c) Two years ba	ck (d) Three years back	(e) F	our year	s back
1 a Beginning of year balance							
b Contributions				_		···-	
c Net investment earnings, gains, and losses						•	
d Grants or scholarships						_	
e Other expenditures for facilities and programs							-
f Administrative expenses							
g End of year balance					\top		
2 Provide the estimated percentage	of the current year	end balance (line 1g	, column (a)) held as				
a Board designated or quasi-endowi	ment ►	9					
b Permanent endowment	96						
c Temporarily restricted endowment	•	96					
The percentages in lines 2a, 2b, a	nd 2c should equa	al 100%					
3 a Are there endowment funds not in	the nossession of	f the organization that	are held and administe	ered for the			
organization by		· ····································				Yes	No
(i) unrelated organizations					. 3a(i)		
(ii) related organizations					. 3a(ii)		
b If 'Yes' to 3a(II), are the related org	janizations listed a	as required on Schedu	ıle R?		. 3b		
4 Describe in Part XIII the intended in		zation's endowment f	unds				
Part VI Land, Buildings, and	• •						
Complete if the organize	zation answere	ed 'Yes' to Form 9	90, Part IV, line 1	1a. See Form 990, Pa	art X, lir	ne 10	
Description of property	(a)	Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) E	Book va	alue
1 a Land		10,000.				10	,000.
b Buildings	<i></i>	63,466.		63,466.			0.
c Leasehold improvements	. 						
d Equipment	<u>.</u> .						
e Other	<u></u>	42,421.		37,485.		4	,936.
Total. Add lines 1a through 1e (Column	(d) must equal F		mn (B), line 10(c))				,936.

BAA

Schedule **D** (Form 990) 2013

Schedule G (Form 990 or 990-EZ) 2013	BOURG LIONS	CLUB		72-60557	796 P
Partill Fundraising Events. C			'Yes' to Form 990, F	Part IV, line 18,	or reported
more than \$15,000 of fu					

Page 2

		List events with gross receipts grea		/b) F #0	(-) Other contents	(d) Total assessed
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add column (a) through column (c))
R			(event type)	(event type)	(total number)	awough column (c))
R 世 > 世 > U	1	Gross receipts				
E	2	Less Chantable contributions				
	3	Gross income (line 1 minus line 2)			_	
	4	Cash prizes				
	5	Noncash prizes				
D I R E C T	6	Rent/facility costs				
Č	7	Food and beverages				•
E X P	8	Entertainment				
EXPENSES	9	Other direct expenses				
S	10	Direct expense summary Add lines 4 throu				
	11	, , , , , , , , , , , , , , , , , , , ,				
Par	£11113	Gaming. Complete if the organizat \$15,000 on Form 990-EZ, line 6a.	ion answered 'Yes'	to Form 990, Part IV	/, line 19, or reporte	d more than
REVENUE			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
ີ້ ະ	1	Gross revenue	94,305.	112,163.		206,468.
_	2	Cash prizes	85,203.	92,092.		177,295.
D P E N S E S T S	3	Noncash prizes	287.			. 287.
C S T E S	4	Rent/facility costs				
	5	Other direct expenses	5,133. X Yes 100.00 %	5,399. X Yes 100.00%	Yes %	10,532.
	6	Volunteer labor	No 100.00	No 100.00	No °	
	7	Direct expense summary Add lines 2 throu	gh 5 in column (d)			188,114.
	8	Net gaming income summary Subtract line	7 from line 1, column (d)		18,354.
	F=4	or the state(a) in which the according		_		
	ls th	er the state(s) in which the organization opera ne organization licensed to operate gaming a o,' explain:	ctivities in each of these			· X Yes No
•			·			
		re any of the organization's gaming licenses res,' explain		erminated during the tax		· Yes XNo
				- 		
BAA			TEEA3702 06	3/26/13	Schedule G (For	m 990 or 990-EZ) 2013

	dule G (Form 990 or 990-EZ) 2013 BOURG LIONS CLUB 72-6055796 Does the organization operate gaming activities with nonmembers? Yes	Y No
		Λ
2	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer chantable gaming?	XNo
	Indicate the percentage of gaming activity operated in	
	The organization's facility	읭
b	An outside facility · · · · · · · · · · · · · · · · · · ·	읭
4	Enter the name and address of the person who prepares the organization's gaming/special events books and records	
	Name RANDOLPH BASCLE	
	Address 111 RETREAT DRIVE BOURG, LA 70343	
l5a b	Does the organization have a contact with a third party from whom the organization receives gaming revenue? Yes of Yes,' enter the amount of gaming revenue received by the organization	XNo
	of gaming revenue retained by the third party	
c	If 'Yes,' enter name and address of the third party	
	Name •	
	Address •	
6	Gaming manager information	
	Name *	
	Gaming manager compensation \$	
	Description of services provided	- - -
	Director/officer Employee Independent contractor	
17	Mandatory distributions	
á	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes	XNo
Ł	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	
	organization's own exempt activities during the tax year 🕒 💲	
aı	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v),	
	and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).	
		•

· SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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 2013 . Open to Public . Inspection 4

Name of the organization Employer identification numbe 72-6055796 BOURG LIONS CLUB Pt_VI,_Line_6___ORGANIZATION HAS INDIVIDUALS AS GENERAL MEMBERS Pt_VI, Line 7a ALL GENERAL MEMBERS HAVE VOTING RIGHTS Pt VI, Line 7b ALL GOVERNING BOARD DECISIONS ARE SUBJECT TO RATIFICATION BY GENERAL MEMBERSHIP Pt_VI, Line 10b THE CENTRAL ORGANIZATION HAS WRITTEN POLICIES & PROCEDURES GOVERNING AFFILIATE ACTIVITIES Pt_VI, Line 11b _ A COPY OF THE FORM 990 IS AVAILABLE TO ALL MEMBERS BEFORE FILING.

BOURG LIONS CLUB

72-6055796

1

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 1 (continued)

Briefly describe the organization's mission

FUNDS FOR CASH GRANTS TO VARIOUS CHARITIES AND NON-PROFIT CAUSES AT LOCAL, STATE AND NATIONAL LEVELS.

FOR THE YEAR ENDED

FIXED ASSETS & ALLOWANCE FOR DEPRECIATION

Comment	3//						
1967-1915 1985 10,000.00 1980-193 1450.00 19-03 1-03 1450.00 1450.00 1-03 15-0	DESCRIPTION OF PROPERTY	DATE	SECTION (179)	COST END OF YEAR	RATE	X	DEPRECIATION AR PRIOR YEARS
1990 1995 10,000.00 1990 1995 10,000.00 1950 1040 2-03 1,450.00 1,450.00 1,650.00 1,650.00 1,60	1	1967-1985		63465.53		٥	53.214.89
mont Plant 3-09 1450.00 10410 7-03 1450.00 10410 8-04 4553.00 10410 6-03 6500 10410 11-11 3590.00 5410 11-11 3590.00 5410		1985		10,000.00			
mant Plant 3-09 (1450.00 toyk mant Plant 7-09 (1455.00 toyk 7-09 (1455.00 toyk 8-04 (5539) 6-08 (545.00 toyk 11-11 3590.00 5ya		1990 1995		9546.37		0	9546.37
mant Plant 3-04 6,46.500 1040 2-07 11,253.00 1 8-06 6.538 1 6-08 640.00 1 11-11 3590.00 540 11-11 3590.00 540		7-03		1450.00		0	1450.00
7-01 1,23.00 1,05.3	Formt Plant	3-04		8,465.00	76 4V	42350	8.041.50
1		7-07		11,358.00	- 7	0	w.856 //
1	i poment	8-06		10.655%	7	O	10.655%
6-03 640.00 c 6-03 3590.00 54D	- 7	8-06		68859	,	0	68.289
- 1 3590.00 1 2 290.00 1 2 2 2 40 1 2 2 2 40 1 2 2 40 1 2 2 2 40 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	(4)	80-9		640.00	7	۵	6.00.00
11-11 3590.00 5xa		80-9		2360.00	\	۵	3,360.00
		11-11		3590.00	540	7/8.00	359.00
					,		•
						051/11	