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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ 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

<u>A</u>	or the	2013 calendar year, or tax year beginning OCT 1, 2013 and	ending S	SEP 30, 2014			
В	Check if applicable	C Name of organization		D Employer identific	cation number		
	Addres change	Order of the Eastern Star of NH]			
	Name change	Doing Business As		01-0	174648		
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number			
L	Termin ated	F O BOX 0755		603-	<u>625-6058</u>		
L	Amend return	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	87,5 <u>45.</u>		
	Applica tion pendin			H(a) Is this a group re			
	portani	F Name and address of principal officer: Susan D. Ferguson		for subordinates	? Yes X No		
		2 Jamaica Lane, Rochester, NH 03867		H(b) Are all subordinates in			
		mpt status: 501(c)(3) X 501(c) (8) ◀ (insert no.) 4947(a)(1)	or 527	1	list (see instructions)		
		e: N/A	1	H(c) Group exemption			
		organization: X Corporation	L Year	of formation: 1940 N	State of legal domicile: NH		
	, 	Briefly describe the organization's mission or most significant activities. Frat	ernal	Association	_		
Activities & Governance	' '	<u>1240</u>	<u> </u>	110001401011			
rna	2	Check this box If the organization discontinued its operations or dispo	sed of more	than 25% of its net as	sets.		
ove	3	Number of voting members of the governing body (Part VI, line 1a)		3	9		
<u>ග</u>	4 1	Number of independent voting members of the governing body (Part VI, line 1b)		4	0		
es	5	Fotal number of individuals employed in calendar year 2013 (Part V, line 2a)		. 5	2		
Νţ		Total number of volunteers (estimate if necessary)		6	40		
Acti	7 a *	Total unrelated business revenue from Part VIII, column (C), line	_	7a	0.		
_	b	Net unrelated business taxable income from Form 990-7, dn 34-4-		7b	<u> </u>		
			u	Prior Year	Current Year		
ě		Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)	/S/	40,173.	19,510.		
Revenue		Program service revenue (Part VIII, line 2g)	/Ÿ}_	39,600.	38,858.		
Ŗ		nvestment income (Part VIII, column (A), lines 3, 4, and 70) GDEN	18-08C	20,570.	16,175.		
	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 15 (1)	F" "	<5,979.			
		Total revenue · add lines 8 through 11 (must equal Part VIII, column (A), line 2)	${\color{red} \smile}$	94,364.	87,545.		
		Grants and similar amounts paid (Part IX, column (A), lines 1-3) Benefits paid to or for members (Part IX, column (A), line 4)	·	6,425.	13,514.		
"	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		5,655.	6,671.		
Expenses	162	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.		
per	h	Fotal fundraising expenses (Part IX, column (D), line 25)	o. 🗀				
ñ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		60,532.	77,264.		
)		Fotal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	_	72,612.	97,449.		
5	19	Revenue less expenses. Subtract line 18 from line 12		21,752.	<9,904.		
Net Assets or	3		Ве	ginning of Current Year	End of Year		
sets	20	Total assets (Part X, line 16)		753,431.	743,527.		
t As	21	Total liabilities (Part X, line 26)	. [0.	0.		
		Net assets or fund balances. Subtract line 21 from line 20		753,431.	743,527.		
	art II	Signature Block					
		lties of perjury, I declare that I have examined this retyrn, inpluding accompanying schedule			y knowledge and belief, it is		
true, correct, and complete. Declaration of preparer (other than officer by based or all information of which preparer has any knowledge.							
		Suggestives of States of States		Pata // 92	1/5		
Sign Signature of Officer Date							
He	Here Robbin Grill, Treasurer Type or print name and title						
		Print/Type preparer's name Preparer's signature//	//	Date Check	PTIN		
Pai	ď	Brent Washburn	A	77/21/15 self-employe	 '		
	parer	Firm's name Brent Washburn, CPA		Firm's EIN	02-0371720		
	Only	Firm's address 38 Daffodil Drive		Tani Jeni	<u> </u>		
		Loudon, NH 03307		Phone no. 6 0	3-708-1263		
Ma	y the IF	RS discuss this return with the preparer shown above? (see instructions)			X Yes No		

332001 10-29-13 LHA For Paperwork Reduction Act Notice, see the separate instructions.

•	Check if Schedule O contains a response or note to any line in this Part III		
	Briefly describe the organization's mission.		
	Fraternal association for the betterment of h	umanity	
	Did the organization undertake any significant program services during the year which were	e not listed on	
	the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.		Yes X N
	Did the organization cease conducting, or make significant changes in how it conducts, an If "Yes," describe these changes on Schedule O	y program services?	Yes X N
	Describe the organization's program service accomplishments for each of its three largest Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants at revenue, if any, for each program service reported	nd allocations to others, the to	•
а			38,858.
	(Code) (Expenses \$35,468. including grants of \$ Special Assistance to the public) (Revenue \$	
	(Code) (Expenses \$ 215. including grants of \$ Public communication of services) (Revenue \$	
_	Other program services (Describe in Schedule O)	evenue \$	
d	(Expenses \$ including grants of \$) (R		

•			Yes	No
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A .	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	<u> </u>	X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for		}	
_	public office? If "Yes," complete Schedule C, Part I	3		X_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	١.		
_	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	_		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	5		 △
6	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	۳		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	<u> </u>		
•	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.		l	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	-	X
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
نہ نہ	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 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	11c		X
a	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		•	
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	<u> </u>	X
b			1	
	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	-	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		<u> </u>
16	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	46		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16	-	
.,	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
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
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	_ <u>. </u>		†
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Forn	990	(2013)

Form 990 (2013) Order of the Eastern Star of NH
Part IV Checklist of Required Schedules (continued)

			res	NO
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	_X_	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			.,
04-	Schedule J	23	-	_ <u>X</u> _
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			.
b	Schedule K. If "No", go to line 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a		X
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24b		
Ū	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	_	
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a		-	
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
	complete Schedule L, Part II	26		_X_
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	1		
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	200		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c 29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29		- 25
-	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	<u> </u>	X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	<u> </u>	X
b	, , , , , , , , , , , , , , , , , , , ,			
00	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	<u> </u>	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
27	If "Yes," complete Schedule R, Part V, line 2	36	 	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	27		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	37		_
5 5	Note. All Form 990 filers are required to complete Schedule O	38	х	
			990	(2013)
		. 5,.,	-	,,,

Form 990 (2013) 01-0174648 Statements Regarding Other IRS Filings and Tax Compliance Part V Check if Schedule O contains a response or note to any line in this Part V Yes No 0 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 0 b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 2 filed for the calendar year ending with or within the year covered by this return X b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? X За b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O 3b 4a 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)? X 4a b If "Yes," enter the name of the foreign country: ▶ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? X 5a X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit X any contributions that were not tax deductible as charitable contributions? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). 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? 7a X b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? X 7с d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 9 Sponsoring organizations maintaining donor advised funds. a 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 Section 501(c)(7) organizations. Enter: 10 a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: 11 Gross income from members or shareholders 11a b Gross income from other sources (Do not net amounts due or paid to other sources 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 1041? 12a 12b b If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O. **b** Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b

Form **990** (2013)

14a

X

c Enter the amount of reserves on hand

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?

13c

Form 990 (2013) Order of the Eastern Star of NH 01-0174648 Page
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response 01-0174648 Page 6 to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. 7.

Sec	tion A. Governing Body and Management					IX
<u> </u>	don A. Governing body and Management					
10	Enter the number of voting members of the governing body at the end of the tax year	1.4.	1	ــــــــــــــــــــــــــــــــــــــ	Yes	No
Id	If there are material differences in voting rights among members of the governing body, or if the governing	<u>1a</u>		2		
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.					
h	Enter the number of voting members included in line 1a, above, who are independent	45	1	0		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	1b	<u> </u>	<u> </u>		
-	officer, director, trustee, or key employee?	iip witi i	any other			X
3	Did the organization delegate control over management duties customarily performed by or under t	ho diro		2		
Ü	of officers, directors, or trustees, or key employees to a management company or other person?	ne direc	or supervision	_		х
4	Did the organization make any significant changes to its governing documents since the prior Form	000 w	na filad?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's as		is nied?			X
6	Did the organization have members or stockholders?	33013 :		<u>5</u>		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	annoint	one or	-	 	4
	more members of the governing body?	арропп	one or	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockh	olders or	/a	-	21
_	persons other than the governing body?	Stoom	oldors, or	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year.	ear hy th	e following:	7.5		
a	The governing body?	ou. 5, 11	o tonowing.	8a	x	
b	Each committee 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, Section A, who cannot be re	· ached :	at the	0.0		
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal F	Revenue	e Code)			
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	_		10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such of	chapter	s, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing bo	dy befo	re filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990					
12a	2a Did the organization have a written conflict of interest policy? If "No," go to line 13					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	e to con	flicts?	12b		_X_
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If $^{\circ}$	Yes," d	escnbe		ļ	
	ın Schedule O how this was done			12c	X	
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 approve	-	dependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision	?				
а	The organization's CEO, Executive Director, or top management official			15a		<u>X</u>
b	Other officers or key employees of the organization			15b	<u> </u>	<u> </u>
46	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)					
ıoa	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ement v	itn a			77
	taxable entity during the year?			_16a	<u> </u>	_X_
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate the control of the					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organism status with respect to such arrangements?	anizatio	n's	401		
Sec	tion C. Disclosure			16b	L	
17	List the states with which a copy of this Form 990 is required to be filed ►NH					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (See	ion 501/a\/3\a aali-\	avadah		
.0	for public inspection. Indicate how you made these available. Check all that apply.	i Joect	ion our (c)(o)s only)	availa	,1 <u>C</u>	
	Own website Another's website X Upon request Other (explain	n in Sol	nedule (1)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, or		•	nd finar	nciel	
	statements available to the public during the tax year.		or microst policy, al	iu midi	iciai	
20	State the name, physical address, and telephone number of the person who possesses the books a	and rec	ords of the organize	ation: 🖿	•	
	Robbin Grill - 603-796-2400		c. 20 or and organize	ACIO11 P		
	P O Box 8795, Penacook, NH 03303-8795				-	

332006 10-29-13

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

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

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key 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

(A) Name and Title	(B) Average hours per week	box offi	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)		(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other			
	(list any hours for related organizations below line)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Shelley Gullett	3.00									
Grand Secretary		X		X				3,500.	0.	0
(2) Robbin R Grill	1.00	-								
Grand Treasurer		X		X				2,000.	0.	0
(3) Susan Ferguson	4.00	4								
Worthy Grand Matron		X		X				0.	0.	0
(4) Cynthia Rogers	1.00							_	_	_
Associate Grand Matron	1 00	X	<u> </u>					0.	0.	0
(5) Gretta Smith Grand Conductress	1.00	X						0.	0.	0
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,									<u>"</u>	_
		_								
 		_					_			
		-								
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		_				_				- ,-
		1								

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 0

		(2013) Order	<u>of the</u>	<u>Eastern</u>	<u>Star of NH</u>		<u>01-0174</u>	648 Page 9
Pai	t VI	II Statement of Revenue	Э					
	_	Check if Schedule O contain	s a response	or note to any lin	ne in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	t c c e f	a Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribution All other contributions, gifts, grants, a similar amounts not included above	and 1f	7,035.				
a Co		Total. Add lines 1a-1f			19,510.			
	2 8	Program Income		Business Code 900099		38,858.		
Program Service Revenue		;				1		
4	f	All other program service revenue	e					
	c	Total. Add lines 2a-2f			38,858.			
	3	Investment income (including div other similar amounts) Income from investment of tax-ex		>	16,175.			16,175.
	5	Royalties		•			• •	
		a Gross rents	(ı) Real	(II) Personal	-			
	c	D Less rental expenses C Rental income or (loss) D Net rental income or (loss)						
		a Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses	i) Securities	(II) Other				
		Gain or (loss) Net gain or (loss)	. ,					
Other Revenue		a Gross income from fundraising e including \$ contributions reported on line 1c Part IV, line 18 Less: direct expenses	of) See					
ō		 Net income or (loss) from fundral 	t sing events	' 				
		Gross income from gaming active Part IV, line 19	_					
		Less direct expenses	t	·				
		 Net income or (loss) from gaming Gross sales of inventory, less ret 		. •				
		and allowances Less cost of goods sold Net income or (loss) from sales of	a b f inventory	D				
		Miscellaneous Revenue		Business Code				
	11 a	Unrealized Appre		900099	13,002.			13,002.
	C							
		All other revenue			10.000			
	-	Total. Add lines 11a-11d			13,002.	20 050		00 155
33200 10-29-	12 9 13	Total revenue See instructions.			87,545.	38,858.	0.	29,177. Form 990 (2013)

Sect	ion 501(c)(3) and 501(c)(4) organizations must com			mplete column (A).	
	Check if Schedule O contains a respon	se or note to any line in t		(C)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	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				
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22	13,514.	13,514.		- <u>-</u> -
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16				· · · · · · · · · · · · · · · · · · ·
4	Benefits paid to or for members				. <u>.</u> .
5	Compensation of current officers, directors,				
	trustees, and key employees	5,500.		5,500.	
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				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	1,171.		1,171.	
11	Fees for services (non-employees)		7		
а	Management				
b	Legal				
С	Accounting				
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 Sch O.)				
12	Advertising and promotion				
13	Office expenses .	4,511.		4,511.	
14	Information technology				
15	Royalties				
16	Occupancy	2,750.	-	2,750.	
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials		25.500		
19	Conferences, conventions, and meetings	26,602.	26,602.		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1 000		1 000	
23	Insurance	1,088.		1,088.	
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 0.)				
а	Special Assistance	21,954.	21,954.		
b	Miscellaneous	13,134.		13,134.	
c	Supplies	5,964.		5,964.	
d		580.		580.	
_	All other expenses	681.	215.	466.	
25	Total functional expenses. Add lines 1 through 24e	97,449.	62,285.	35,164.	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 fif following SOP 98-2 (ASC 958-720)			İ	
				 .	

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year End of year 50,934. 21,874. Cash - non-interest-bearing 702,497. 721,653 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr) Complete Part II of Sch L ß Notes and loans receivable, net 7 Inventories for sale or use Q Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 10b b Less: accumulated depreciation 10c Investments - publicly traded securities 11 11 Investments - other securities. See Part IV, line 11 12 12 Investments - program-related See Part IV, line 11 13 13 14 14 Intangible assets 15 Other assets See Part IV, line 11 15 753,431 743,527 Total assets. Add lines 1 through 15 (must equal line 34) 16 16 Accounts payable and accrued expenses 17 17 18 Grants payable 18 Deferred revenue 19 19 20 Tax-exempt bond liabilities 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, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L. 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 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 0 0. Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here

X

and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 753,431. 743,527. 27 27 Unrestricted net assets Temporarily restricted net assets 28 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ____ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 32 Retained earnings, endowment, accumulated income, or other funds 32 753,431 33 <u>743,527.</u> 33 Total net assets or fund balances Total liabilities and net assets/fund balances 753,431 743,527.

	990 (2013) Order of the Eastern Star of NH	01-017	74648	Pag	qe 12
Pa	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	87	<u>7,5</u>	<u>45.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	97	7,4	<u>49.</u>
3	Revenue less expenses Subtract line 2 from line 1	3	<9	9,9	04.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	<u> 753</u>	3,4	<u>31.</u>
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			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	743	3,5	27.
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990. X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	l on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both	,			
	Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audıt.			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Scho	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir				
	Act and OMB Circular A-133?	J	3a		х
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3h		

SCHEDULE (Form 990)

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

▶ Attach to Form 990.

Open to Public OMB No 1545-0047

Department of	Department of the Treasury	Open to Public
Internal Revenue Service	nue Service ► Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.	Inspection
Name of t	Name of the organization	Employer identification number
	Order of the Eastern Star of NH	01-0174648
Part I	Part I General Information on Grants and Assistance	
- Doe	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	
crite	criteria used to award the grants or assistance?	X Yes
2 Des	2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	
Part II	Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	ie 21, for any

-	├

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table 0

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

Schedule I (Form 990) (2013)

Page 2 Schedule I (Form 990) (2013) (f) Description of non-cash assistance 01-0174648 (e) Method of valuation (book, FMV, appraisal, other) (Form 990) (2013) Order of the Eastern Star of NH Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. Explanation: Eligibility requirement, financial needs and activities. (d) Amount of non-cash assistance °. 4.059 9.455. (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance Part I, Line 2: Schedule I (Form 990) (2013) Scholarships: Part III Grants

332102 10-29-13

SCHEDULE 0

(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.

OMB No 1545-0047

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

Open to Public Inspection

Name of the organization Order of the Eastern Star of NH	Employer identification number 01-0174648
Form 990, Part VI, Section B, line 11:	
Explanation: The governing body does not review the compl	eted 990 prior to
filing; however the Treasurer performs a cursory review p	rior to signing
the form.	
Form 990, Part VI, Section B, Line 12c:	
Explanation: Each year at the annual meeting when new off	icers are elected;
conflict of interest is addressed at that point.	· · · · · · · · · · · · · · · · · · ·
Form 990, Part VI, Section C, Line 19:	
Explanation: We do not make our governing documents, conf	lict of interest
policy, or financial statements available to the public.	
available for public inspection upon written request.	
·	