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# **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury

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.

Internal Revenue Service 3/31/2015 4/1/2014 For the 2014 calendar year, or tax year beginning and ending Employer identification number C Name of organization BENEVOLENT AND PROTECTIVE ORDER OF ELKS Check if applicable Doing business as LODGE NO 1814 Address change 93-0393118 Number and street (or PO box if mail is not delivered to street address) Name change Telephone number 151 N MAIN STREET ZIP code Initial return City or town 541-447-7088 PRINEVILLE OR 97754 Final return/terminated Foreign postal code Foreign country name Foreign province/state/county Gross receipts \$ 564,959 Amended return Yes X No F Name and address of principal officer Application pending H(a) Is this a group return for subordinates? SAME AS C ABOVE 151 N MAIN STREET, PRINEVILLE, OR 97754 H(b) Are all subordinates included? If "No," attach a list (see instructions) 501(c)(3) X 4947(a)(1) or 501(c) ) < (insert no ) Tax-exempt status H(c) Group exemption number > 1156 Website: ▶ lx۱ Trust Other > L Year of formation M State of legal domicile K Form of organization Corporation Association 1950 OR Part I Summary TO INCULATE THE PRINCIPLES OF CHARITY, Briefly describe the organization's mission or most significant activities JUSTICE, BROTHERLY LOVE & FIDELITY, TO RECOGNIZE A BELIEF IN GOD, TO PROMOTE THE WELFARE & ENHANCE HA Activities & Governance OF ITS MEMBERS, TO QUICKEN THE SPIRIT OF AMERICAN PATRIOTISM, CULTIVATE Check this box ▶ | If the organization discontinued its operations or disposed of more than 25% of its net assets 2 Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 4 0 7 Total number of individuals employed in calendar year 2014 (Part V, line 2a) 5 6 Total number of volunteers (estimate if necessary) 0 Total unrelated business revenue from Part VIII, column (C), line 12 7a Net unrelated business taxable income from £orm 990-T, line 34 7b 0 **Prior Year Current Year** 74,357 Contributions and grants (Part VIII-(ine 1h) 83,733 8 Program service revenue (Part VIII line 2g). 43 58,398 3,621 9 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 166 174 10 Other revenue (Part VIII, column (A) Vines 5, 6d, 8c, 9c, 10c, and 11e) 34,779 35,336 11 177,076 113,488 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 Grants and similar amounts paid (Part X column (A), lines 1-3) 0 13 Benefits paid to or for members (Part IX, column (A), line 4) 0 14 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 13,099 12,333 15 Professional fundraising fees (Part IX, column (A), line 11e) 16a Total fundraising expenses (Part IX, column (D), line 25) ▶ Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 164,980 106,032 17 178,079 118,365 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 18 -1,003 -4,877 Revenue less expenses Subtract line 18 from line 12 End of Year Beginning of Current Year Total assets (Part X, line 16) 225,713 239,726 20 43.990 21 Total liabilities (Part X, line 26) 53,126 Net assets or fund balances Subtract line 21 from line 20 186,600 181,723 22 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge Implete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge and belief, it is true, correct, Sign Signature of officer Here Secret eaune Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature Paid self-employed GEORGE L WERNER P00925912 GEORGE L WERNER Preparer Firm's name ► WERNER ACCOUNTANCY PC Firm's EIN ▶ 26-3909113 **Use Only** Firm's address ► 682 NW 3RD ST, PRINEVILLE, OR 97754 (541) 447-7776 Phone no May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Form 9	90 (2014) BENEVOLENT AND PROTECTIVE ORDER OF ELKS	93-0393118	Page 2
Pai	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission TO INCULATE THE PRINCIPLES OF CHARITY, JUSTICE, BROTHERLY LOVE & FIDELITY, TO RECOGN BELIEF IN GOD, TO PROMOTE WELFARE & ENHANCE THE HAPPINESS OF ITS MEMBERS, TO QUIC SPIRIT OF AMERICAN PATRIOTISM, TO CULTIVATE GOOD FELLOWSHIP, TO PERPETUATE ITSELF A FRATERNAL ORG & PROVIDE FOR ITS GOVERNMENT, BENEVOLENT & PROTECTIVE ORDER OF	CKEN THE AS A	
2	Did the organization undertake any significant program services during the year which were not listed on		
_	the prior Form 990 or 990-EZ?  If "Yes," describe these new services on Schedule O	Yes	X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program		
•	services?	Yes	X No
	If "Yes," describe these changes on Schedule O		-
4	Describe the organization's program service accomplishments for each of its three largest program service		
	expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and a the total expenses, and revenue, if any, for each program service reported	llocations to others,	
4a	(Code ) (Expenses \$ 110,778 including grants of \$ ) (Rever TO INCULATE THE PRINCIPLES OF CHARITY, JUSTICE, BROTHERLY LOVE & FIDELITY, TO RECOGN GOD, TO PROMOTE WELFARE & ENHANCE THE HAPPINESS OF ITS MEMBERS, TO QUICKEN THE PATRIOTISM, TO CULTIVATE GOOD FELLOWSHIP, TO PERPETUATE ITSELF AS A FRATERNAL ORG GOVERNMENT, BENEVOLENT & PROTECTIVE ORDER OF ELKS OF USA WILL SERVE THE PEOPLIC THROUGH BENEVOLENT PROGRAMS, DEMONSTRATING THAT ELKS CARE AND ELKS SHARE	IIZE A BELIEF IN SPIRIT OF AMERIC & PROVIDE FOR I E AND COMMUNITI	TS ES
	(D)		· · · · · · · · · · · · · · · · · · ·
4b	(Code ) (Expenses \$ including grants of \$ ) (Rever		
4c	(Code ) (Expenses \$ including grants of \$ ) (Rever	nue \$	)
4-4	Other program services (Describe in Schedule O )		
4d	(Expenses \$ 0 including grants of \$ 0) (Revenue \$	0)	
40	Total program service expenses   110.778		

Part IV	Checklist of	of Required Schedules	

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		x
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		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 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,	5		Х
c	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	-		
6	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		<u>X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	х	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Χ
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
12a	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f		X
	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,"		Ì	
	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		<u>X</u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	-	X
b	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		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	17		Х
40	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)  Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17		
18	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X_
19	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	
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		<b>-</b>	aan .	

•				
	990 (2014) BENEVOLENT AND PROTECTIVE ORDER OF ELKS	93-0393118	Р	age 4
Par	t IV Checklist of Required Schedules (continued)		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		103	140
21	domestic 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 or for domestic individuals on			<u> </u>
	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	ŀ		
	employees? If "Yes," complete Schedule J	23	<u></u>	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			,
	24b through 24d and complete Schedule K If "No," go to line 25a	24a	<u> </u>	X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		
	to defease any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d	$\vdash$	-
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	240	-	
ZJa	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 "Yes," complete Schedule L, Part II	26	<u> </u>	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
••	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	<del> </del>	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		×
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete</i>	1200		<del>- ^`</del>
	Schedule L, Part IV	28ь		x
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30	<u> </u>	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			U
20	Part I	31	<del> </del>	<u> </u>
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		×
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	52	<del>                                     </del>	<u> </u>
55	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,			
	III, or IV, and Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
b				
	entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	<u> </u>	<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		-
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	1	1	1

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part

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

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

37

Part V Statements Regarding Other IRS Filings and Tax Compliance
Check if Schedule O contains a response or note to any line in this Part V

	Check if Schedule O contains a response or note to any line in this Part V		•	.	
		- 1		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	1 1		
þ	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	eportable			
_	gaming (gambling) winnings to prize winners?	1	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	_			
	Statements, filed for the calendar year ending with or within the year covered by this return	2a   7	ا ا		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax ret		2b	_X_	
•	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	ns)	.		v
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	- 0	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedul		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	•			
	over, a financial account in a foreign country (such as a bank account, securities account, or other faccount)?	nanciai	4a		Х
b	If "Yes," enter the name of the foreign country		4a		
D	See instructions for filing requirements for FinCen Form 114, Report of Foreign Bank and Financial	Δccounte			
	(FBAR)	Accounts	1		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans-	action?	5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		<del></del>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did	the			
	organization solicit any contributions that were not tax deductible as charitable contributions?		6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions or			
	gifts were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly fo	goods		ĺ	
	and services provided to the payor?	_	7a		Χ
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it v	vas	ĺĺ	ĺ	
	required to file Form 8282?	•	7c		Χ
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	]		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit		7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit confidence of the con		7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 88		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file		7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintain	ed by the		İ	
_	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.		,		
a	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12	10a			
a b	· · · · · · · · · · · · · · · · · · ·	10b	1 1		
11	Section 501(c)(12) organizations. Enter	100			
'' a	· · · · · · · · · · · · · · · · · · ·	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources		1	1	
		11 Б			
l2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of For		12a		
b		12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	· · · · · · · · · · · · · · · · · · ·	<u> </u>	[	
а	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	]		
С	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu	le O	146		

3	-0	<u> 393118</u>	Page

Part V!

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions. Check if Schedule O contains a response or note to any line in this Part VI.

It Enter the number of voting members of the governing body at the end of the tax year if there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O  b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, frustee, or key employee? Did any officer, director, frustee, or key employee have a family relationship or a business relationship with any other officer, director, frustee, or key employee? 3 Did the organization of explaints of the commanagement duties customanly performed by or under the direct supervision of officers, directors, or frustees, or key employees to a management company or other person? 4 Did the organization have members and any significant changes to its governing documents since the pror Form 990 was filed? 4 X 5 Did the organization have members or stockholders? 5 Did the organization have members or stockholders? 6 Did the organization have members or stockholders? 7 Did the organization have members or stockholders? 8 Did the organization have members or stockholders? 9 Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 9 Is the organization of the members and the meetings held or written actions undertaken during the year by the following 1 The governing body? 1 Each committee with authority to act on behalf of the governing body? 2 Each committee with authority to act on behalf of the governing body? 3 Each committee with authority to act on behalf of the governing body polycies and process in Schedule O  10 Describe of 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 of severnity process? 10 Describe in Schedule O the process, if any, used by the or	Sect	ion A. Governing Body and Management				
If there are material differences in voting rights among members of the governing body or if the governing body delegated broad authority to an executive committee, explain in Schedule ()  Deflete the number of voting members included in line 1a, above, who are independent  Deflete from the number of voting members included in line 1a, above, who are independent  Deflete organization did again graph provided in line 1a, above, who are independent  Deflete organization did again graph graph provided in line 1a, above, who are independent  Deflete organization did again graph					Yes	No
If there are material differences in voting rights among members of the governing body or if the governing body delegated broad authority to an executive committee, explain in Schedule ()  Deflete the number of voting members included in line 1a, above, who are independent  Deflete from the number of voting members included in line 1a, above, who are independent  Deflete organization did again graph provided in line 1a, above, who are independent  Deflete organization did again graph graph provided in line 1a, above, who are independent  Deflete organization did again graph	1a	Enter the number of voting members of the governing body at the end of the tax year	<b>1</b> a 11			_
be Enter the number of voting members included in line 1a, above, who are independent  1 b						
be 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?  3 Did the organization delegate control over management duties customarily performed by or under the direct any other officer, director, trustees, or key employees to a management company or other person?  4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?  5 Did the organization become aware during the year of a significant diversion of the organization's assests?  5 Did the organization become aware during the year of a significant diversion of the organization's assests?  5 Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?  5 Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?  8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:  a The governing body?  8 Each committee with authority to act on behalf of the governing body?  9 Is been any officer, director, frustee, or key employee isted in Part VII, Section A, who cannot be reached at the organization have land address? If "see," provide the names and addresses in Schedule 0  9 x Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code to the proper services of the organization have a 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?  10a Did the organization have a written obclines and procedures governing the activities of such chapters.  11b Were officers, director, or trustees,						
b Enter the number of voting members included in line 1a, above, who are independent 1b any other officer, director, trustee, or key employee?  2						
2 Did any officer, director, trustee, or key employee? 2 X supervision of officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior form 990 was filed? 4 X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X Did the organization have members, stockholders, or other persons of the organization's assets? 5 X X 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 Ta X X any governance decisions of 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 Ta X X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 1 Ta X X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 1 Ta X X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 1 Ta X X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 1 Ta X X X Did the organization than written policies or key employee isted in Part VII. Section A, who cannot be reached at the organization have written policies or K ye employee isted in Part VII. Section A, who cannot be reached 1 Ta X X X X X X X X X X X X X X X X X X	b		1b			
any other officer, director, trustee, or key employees to a management company or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?  4 Did the organization make any significant changes to its governing documents since the prior Form 980 was flied?  4 Did the organization have members or stockholders?  5 Did the organization have members or stockholders?  6 Did the organization have members or stockholders?  7 Did the organization have members or stockholders?  8 Did the organization have members or stockholders?  9 Did the organization have members or stockholders, or prersons who had the power to elect or appoint one or more members of the governing body?  9 Did the organization or second or the governing body?  10 Did the organization or second or			hip with	1		
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describe in Schedule O how this was done   12c   X	b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could	give rise to conflicts?	12b	Х	
13	С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If	"Yes, "			
14 Did the organization have a written document retention and destruction policy?  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?  15 The organization's CEO, Executive Director, or top management official  15 Did the organization's CEO, Executive Director, or top management official  15 Did the organization's CEO, Executive Director, or top management official  15 Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  16 Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  16 Did "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?  16 Did the organization's exempt status with respect to such arrangements?  18 Section C. Disclosure  19 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply  20 Own website Another's website Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year  10 State the name, address, and telephone number of the person who possesses the organization's books and records  10 ROBERT MCPHERREN.		describe in Schedule O how this was done		12c	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?  15a X  15b Other officers or key employees of the organization if "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  16a V  16a If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?  16b Section C. Disclosure  17 List the states with which a copy of this Form 990 is required to be filed  18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply  19 Own website Another's website X Upon request Other (explain in Schedule O).  19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year  20 State the name, address, and telephone number of the person who possesses the organization's books and records  80 ROBERT MCPHERREN  541-447-7088	13	Did the organization have a written whistleblower policy?		13		
independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  b Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?  Section C. Disclosure  16b Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply  Own website Another's website X Upon request Other (explain in Schedule O)  Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year  State the name, address, and telephone number of the person who possesses the organization's books and records  ROBERT MCPHERREN  541-447-7088	14	Did the organization have a written document retention and destruction policy?		14		X
The organization's CEO, Executive Director, or top management official  b Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  16a X  16a X  16a X  16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?  16b Section C. Disclosure  17 List the states with which a copy of this Form 990 is required to be filed  18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply  Own website Another's website X Upon request Other (explain in Schedule O)  19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year  20 State the name, address, and telephone number of the person who possesses the organization's books and records  ROBERT MCPHERREN  541-447-7088	15					
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If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  16a X  1	а	The organization's CEO, Executive Director, or top management official		15a	X	
Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?  Section C. Disclosure  17 List the states with which a copy of this Form 990 is required to be filed  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply  Own website Another's website X Upon request Other (explain in Schedule O)  19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year  20 State the name, address, and telephone number of the person who possesses the organization's books and records  ROBERT MCPHERREN  541-447-7088	b			15b		X
with a taxable entity during the year?  b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?  Section C. Disclosure  16b  16b  16c  16c  16c  16c  16c  16c						
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?  Section C. Disclosure  17 List the states with which a copy of this Form 990 is required to be filed  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply  Own website  Another's website  X Upon request  Other (explain in Schedule O)  19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year  20 State the name, address, and telephone number of the person who possesses the organization's books and records  ROBERT MCPHERREN  541-447-7088	16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangements	jement			
participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?  Section C. Disclosure  17 List the states with which a copy of this Form 990 is required to be filed  18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply  Own website  Another's website  X. Upon request  Other (explain in Schedule O)  Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year  State the name, address, and telephone number of the person who possesses the organization's books and records  ROBERT MCPHERREN  541-447-7088				16a		X
the organization's exempt status with respect to such arrangements?  Section C. Disclosure  17 List the states with which a copy of this Form 990 is required to be filed  18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply  Own website  Another's website  X Upon request  Other (explain in Schedule O)  Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year  State the name, address, and telephone number of the person who possesses the organization's books and records  ROBERT MCPHERREN  541-447-7088	b					İ
Section C. Disclosure  17 List the states with which a copy of this Form 990 is required to be filed  18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply  □ Own website □ Another's website □ X Upon request □ Other (explain in Schedule O)  19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year  20 State the name, address, and telephone number of the person who possesses the organization's books and records  ROBERT MCPHERREN  541-447-7088			guard			
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Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply  Own website  Another's website  X Upon request  Other (explain in Schedule O)  Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year  State the name, address, and telephone number of the person who possesses the organization's books and records  ROBERT MCPHERREN  541-447-7088						
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Own website Another's website X Upon request Other (explain in Schedule O)  19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year  20 State the name, address, and telephone number of the person who possesses the organization's books and records  ROBERT MCPHERREN  541-447-7088	18		U-1 (Section 501(c)(3	)s only	/)	
Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year  State the name, address, and telephone number of the person who possesses the organization's books and records  ROBERT MCPHERREN  541-447-7088			alam a Ostro III Or			
financial statements available to the public during the tax year  20 State the name, address, and telephone number of the person who possesses the organization's books and records  ROBERT MCPHERREN  541-447-7088						
20 State the name, address, and telephone number of the person who possesses the organization's books and records  ROBERT MCPHERREN  541-447-7088	19		conflict of interest pol	icy, ar	iū	
ROBERT MCPHERREN 541-447-7088	00		nooke and records	_		
	20					
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Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensation	sated	
	Employees, and Independent Contractors		_
	Check if Schedule O contains a response or note to any line in this Part VII.	_ · _ ·	

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

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

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

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

Crieck this box if fielther the organization flor any	Totaled organiz	T	0011	,pc	1104		., -	I III		
	(C)									
		l			ition				-	450
(A) Name and Title	(B) Average					than o		(D) Reportable	(E) Reportable	(F) Estimated
Name and Title	hours per				irect	or/truste		compensation	compensation	amount of
	week (list any				7	gΞ		from	from related	other
	hours for related	흑물	S	Officer	%	를	Former	the organization	organizations (W-2/1099-MISC)	compensation from the
	organizations	Individual to or director	Institutional trustee	4	Į ặ̃	Highest compensated employee	4	(W-2/1099-MISC)	(44-2/1099-141130)	organization
	below dotted	ع ۲	굘		ğ	8		,		and related
	line)	l ste	g		8	🔞				organizations
		ľ	🕏			S .				
						8				
(1) JIM E BATES	5 00		1							
TRUSTEE	0 00	Х	1							
(2) JIM VAN VOORHEES	5 00									
TRUSTEE	0 00	l	ì							
(2) DOD LIELTON	5 00	•	t	$\vdash$	┢					
TRUSTEE	0 00	1								
			╁		⊢					
(4) DEBBIE SUE OWENS	5 00									
TRUSTEE	0 00		₩		<u> </u>					
(5) TED FRENCH	5 00									
TRUSTEE	0 00	X	<u> </u>							
(6) JEANNE PRESTON	20 00	ļ								
SECRETARY	0 00			Х				5,550		
(7) ROBERT MCPHERREN	5 00									
TREASURER	0 00			x						
(9) TOM MACCINCHAM	10 00		<b>†</b>							
EXALTED RULER	0 00									
(A) HILLE CANTULTITUE	5 00		+		$\vdash$					
LEADING KNIGHT	0 00	4		ļ				1		
		_	+	├	├	-			·	
(10) DAVID BROCK	5 00	1								
LOYAL KNIGHT	0 00	-	<del> </del>		├	-	_			
(11) JACK ZIKA	5 00							1		
LECTURING KNIGHT	0 00		<u> </u>	<u> </u>	<u> </u>	ļ				
(12)		1								
			<u></u>							
(13)										
(14)			Т							
A:::		1	1		1	1	l	1		
	l							L		1

Pa	Section A. Officers, Directors, Tru	ıstees, Key Em	oloye	es,			ghes	t Co	mpensated Em	ployees (d	ontını	ied)		
	(A) Name and title	(B) Average hours per week (list any	box, office	unles er and	Pos eck s pe d a d	more rson irecto	than or both	an ee)	(D) Reportable compensation from	(E) Reportab compensat from relat	able Estimate sation amount lated other			of
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	y employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizatio (W-2/1099-N		fr org and	perisation the anization d relate anization	e on ed
(15)														
(16)														
(17)														
(18)														
(19)														
(20)														
(21)														
(22)														
(23)														
(24)														
(25)														
1b c	Sub-total Total from continuation sheets to Part VII, Se	ection A		·	·			<b>&gt;</b>	5,550 0		0			(
d	Total (add lines 1b and 1c)							<b>&gt;</b>	5,550		0			(
2	Total number of individuals (including but not lireportable compensation from the organization		ited a	bov	e) v 0	vho	rece	ved	I more than \$100	),000 of				
	_		_										Yes	No
3	Did the organization list any <b>former</b> officer, directly employee on line 1a? <i>If "Yes," complete School</i>		-		loye	e, c	or hig	nesi	t compensated			3	-	x
4	For any individual listed on line 1a, is the sum of the organization and related organizations greaters.													
	ındıvıdual	•			•		•					4		X
5	Did any person listed on line 1a receive or accifor services rendered to the organization? If "Y									vidual		5		x
	ion B. Independent Contractors													
1	Complete this table for your five highest compe compensation from the organization. Report co year											ax		
	(A) (B) Name and business address Description of services						rvices		(C Comper					
							_	<u> </u>						
				•		_								
											_	_		
2	Total number of independent contractors (inclu		ted to	tho	se l	liste	d abo	L ove)	who received					
	more than \$100,000 of compensation from the	organization					0	)						

Part VIII Statement of Revenue

		Check if Schedule O contain	is a response o	r note t	o any line 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
- S	1a	Federated campaigns		1a	.0		ĺ		
unt	b	Membership dues	Ŀ	1b	46,011	ļ			
. G.	С	Fundraising events	<u> </u>	1c	0				
Sifts ar A	d	Related organizations	<u> </u>	1d	0				
ıs, (	е	Government grants (contribution	ns)	1e	0				
or S	f	All other contributions, gifts, gra							
af th		similar amounts not included ab	_	1f	28,346				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in	lines 1a-1f.	\$	0				
	h	Total. Add lines 1a-1f		D.,,	siness Code	74,357			
nue	2-	DV DADVING		- 54	silless Code	985	985		
Program Service Revenue	2a	RV PARKING OTHER REVENUE				1,282	1,282		
9 R	b C	FUNDRAISING		<b>—</b>	-	1,354	1,354		
ar i	d					0			
ı S	e					0			
graı	f	All other program service reven	ue		-	0			
Pro	g	Total. Add lines 2a-2f			Þ	3,621			
	3	Investment income (including di	ıvıdends, ıntere	st, and					
		other similar amounts)			▶	174	174		
	4	Income from investment of tax-e	exempt bond p	roceeds	;	0			
	5	Royalties	() P1	<del></del>	A) Company	0			
		_	(ı) Real	<del></del>	ı) Personal		Ì		
	6a	Gross rents	6,8	50					
	b	Less rental expenses	6,8	50	0	ļ			
	d	Rental income or (loss)  Net rental income or (loss)	0,0	301	<del>-</del>	6,850	1		6,850
	7a	Gross amount from sales of	(i) Securities	<u> </u>	(ii) Other	0,000			0,000
	'a	assets other than inventory	<u> </u>	0	0		İ		
	ь	Less cost or other basis		<u> </u>					
	_	and sales expenses		ol	ol				
	С	Gain or (loss)		0	0		Ì		
	d	Net gain or (loss)	-		<b>•</b>	0			
Other Revenue	8a	Gross income from fundraising events (not including \$ of contributions reported on line See Part IV, line 18	0 e 1c)	a	0				
þer	ь	Less direct expenses		<u>_</u>		1			
5	C	Net income or (loss) from fundr	aising events		<u> </u>	ol			
	9a	Gross income from gaming acti See Part IV, line 19	_	а	319,600				
	ь	Less. direct expenses		Б	301,800	ĺ			
	c	Net income or (loss) from gamil	ng activities		▶	17,800	1		17,800
	10a								
		returns and allowances		a	160,357	į			
	b	Less cost of goods sold		b	149,671				
	c	Net income or (loss) from sales	of inventory		<b>&gt;</b>	10,686			18,660
		Miscellaneous Revenue		Bu	siness Code				
	11a			_		0		_	
	b			<u> </u>		0		<del></del>	
	C	All other revenue				0			
	d	All other revenue  Total. Add lines 11a-11d		<u> </u>		0			
	12	Total revenue See instructions	9			113.488	3.795	0	43.31

Part IX Statement of Functional Expenses

Secin	Check if Schedule O contains a response or note			simproto ogranii (r y	
	not include amounts reported on lines 6b, 7b, 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 domestic organizations				
	domestic governments See Part IV, line 21	0			
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22	0			
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,				
	trustees, and key employees	5,550	5,000	550	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	5,396	5,246	150	
8	Pension plan accruals and contributions (include	] .			
	section 401(k) and 403(b) employer contributions)	0			
9	Other employee benefits	0		100	
10	Payroll taxes	1,387	1,249	138	
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	0	7.050	0.000	
С	Accounting	9,550	7,350	2,200	
đ	Lobbying	0			
е	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0		<del> </del>	
g	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)	0	2.225		
12	Advertising and promotion	2,235	2,235 4,414	1,100	
13	Office expenses	5,514	4,414	1,100	
14	Information technology	0			
15	Royalties	30,146	27,131	3,015	
16	Occupancy	30,140	21,131	3,013	<del></del>
17	Travel Payments of travel or entertainment expenses	0			
18	for any federal, state, or local public officials	ol			
19	Conferences, conventions, and meetings	o			
20	Interest	o			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	5,839	5,839	0	(
23	Insurance	907	817	90	
24	Other expenses Itemize expenses not covered				
-•	above (List miscellaneous expenses in line 24e If		!		
	line 24e amount exceeds 10% of line 25, column			1	
	(A) amount, list line 24e expenses on Schedule O)				
а	CHARITIES	28,201	28,201		
b	PER CAPITA DUES	10,690	10,690		
С	CONVENTION	7,491	7,491		
d	MISCELLANEOUS	3,440	3,096	344	
е	All other expenses MERCHANT FEE	2,019	2,019		
25	Total functional expenses. Add lines 1 through 24e	118,365	110,778	7,587	
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

		Check if Schedule O contains a response or	note to	any line in this Part X		_	
			· · ·	-	(A)		(B)
					Beginning of year		End of year
	1	Cash—non-interest-bearing		· <del>-</del> ·	57,300	1	52,812
- 1	2	Savings and temporary cash investments			78,747	2	63,174
1	3	Pledges and grants receivable, net			0	3	0
- 1	4	Accounts receivable, net			0	4	0
- 1	5	Loans and other receivables from current and fo	ormer o	fficers, directors,			
		trustees, key employees, and highest compensations. Complete Part II of Schedule L	ated en	ployees		5	
l	6	Loans and other receivables from other disqualified person	ne (se d	ofined under section			
	0	4958(f)(1)), persons described in section 4958(c)(3)(B), a	•				
- 1		sponsoring organizations of section 501(c)(9) voluntary e					
g		organizations (see instructions) Complete Part II of Sche		3 Deficionary		6	
Assets	7	Notes and loans receivable, net	duic L	• •	0	7	0
As	8	Inventories for sale or use		<u> </u>	4,967	8	5,421
	9	Prepaid expenses and deferred charges		ļ ,	849	9	0, ,21
	10a	Land, buildings, and equipment cost or	1 1	ŀ	.0-10		
	iva	other basis Complete Part VI of Schedule D	10a	425,306			
	b	Less accumulated depreciation	10b	321,000	97,863	10c	104,306
- !	11	Investments—publicly traded securities	100	021,000	0:1000	11	0
	12	Investments—other securities See Part IV, line	11	ļ	0	12	0
	13	Investments—program-related See Part IV, line		ļ	0	13	0
	14	Intangible assets	<u> </u>	0	14	0	
1	15	Other assets See Part IV, line 11		Ţ	0	15	0
l	16	Total assets. Add lines 1 through 15 (must equ	al line 3	(4)	239,726	16	225,713
	17	Accounts payable and accrued expenses	27,728	17	17,996		
l	18	Grants payable		18			
	19	Deferred revenue	25,398	19	25,994		
	20	Tax-exempt bond liabilities		Ĭ		20	
	21	Escrow or custodial account liability Complete	Part IV	of Schedule D		21	
g	22	Loans and other payables to current and former				-	
Liabilities		trustees, key employees, highest compensated					
ig		disqualified persons Complete Part II of Sched				22	
12	23	Secured mortgages and notes payable to unrela		rd parties	0	23	0
	24	Unsecured notes and loans payable to unrelate			0	24	0
	25	Other liabilities (including federal income tax, pa	ayables	to related third			
		parties, and other liabilities not included on lines	s 17-24	) Complete			
		Part X of Schedule D			0	25	0
	26	Total liabilities. Add lines 17 through 25			53,126	26	43,990
		Organizations that follow SFAS 117 (ASC 958	3), ched	k here ▶ and			
es		complete lines 27 through 29, and lines 33 a					
ä	27	Unrestricted net assets				27	
Balances	28	Temporarily restricted net assets				28	
힐	29	Permanently restricted net assets				29	
or Fund		Organizations that do not follow SFAS 117 (ASC958),	check h	ere ► and			
<u>ا</u>		complete lines 30 through 34.	JIIOUN I				
Š.	30	Capital stock or trust principal, or current funds				30	
SSe	30 31	Paid-in or capital surplus, or land, building, or e	aunoma	nt fund	· · · · · ·	31	<del> </del>
Net Assets	32	Retained earnings, endowment, accumulated in			186,600	32	181,723
重	~~		.551116,	J. Janor lando	~	-	181,723
<b>-</b>	33	Total net assets or fund balances		i	186,600	33	ו בעונמו

Form 9	990 (2014) BENEVOLENT AND PROTECTIVE ORDER OF ELKS	ę	93-0393118	Pag	<sub>ge</sub> 12
Part	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		113	3,488
2	Total expenses (must equal Part IX, column (A), line 25)	2		118	3,365
3	Revenue less expenses Subtract line 2 from line 1	3		-4	1,877
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		186	5,600
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10		181	1,723
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII .		•		
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both				}
	X Separate basis Consolidated basis Both consolidated and separate basis				
L	Were the organization's financial statements audited by an independent accountant?		2b		x
b	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a		20		<del>  ^-</del>
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		—
	If the organization changed either its oversight process or selection process during the tax year, explain in				1
	Schedule O				1
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		1 3h i		1

Form **990** (2014)

## **SCHEDULE D** (Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes" to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

2014

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Name	ame of the organization Employer identification number									
BENE	VOLENT AND PROTECTIVE ORDER OF EL	KS		93-0393118						
Part		or Advised Funds or Other Similar	Funds or	Accounts.						
		ered "Yes" to Form 990, Part IV, line								
		(a) Donor advised funds		(b) Funds and other accounts						
1	Total number at end of year									
2	Aggregate value of contributions to (during year)									
3	Aggregate value of grants from (during year)	· · · · · · · · · · · · · · · · · · ·								
4	Aggregate value at end of year									
5	Did the organization inform all donors and do			[] []						
_	funds are the organization's property, subject			Yes No						
6	Did the organization inform all grantees, dono									
	used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other									
	purpose conferring impermissible private benefit?									
Part		LINC-114 F 000 D-4 D/ L	<b>-</b>							
		ered "Yes" to Form 990, Part IV, line	/							
1	Purpose(s) of conservation easements held t	• 🗖	6 - 14	annally was a start land are a						
	Preservation of land for public use (e.g., recr			orically important land area						
	Protection of natural habitat	Preservatio	n of a cert	ified historic structure						
	Preservation of open space									
2	Complete lines 2a through 2d if the organizat	ion held a qualified conservation contributi	on in the fo	orm 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			2a						
þ	Total acreage restricted by conservation ease		<del></del>	2b						
C	Number of conservation easements on a cert		-	2c						
d	Number of conservation easements included		.	2d						
•	historic structure listed in the National Registe Number of conservation easements modified									
3	during the tax year	, transferred, released, extinguished, or ter	minated b	y the organization						
4	Number of states where property subject to c	onservation easement is located								
5	Does the organization have a written policy re		n. handling	of						
	violations, and enforcement of the conservati		,	Yes No						
6	Staff and volunteer hours devoted to monitori		easemen							
-	<b>&gt;</b>	3, 1 3,		,						
7	Amount of expenses incurred in monitoring, i	nspecting, and enforcing conservation eas	ements du	ring the year						
	▶ \$									
8	Does each conservation easement reported of	on line 2(d) above satisfy the requirements	of section							
	170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)?			Yes No						
9	In Part XIII, describe how the organization re-									
	balance sheet, and include, if applicable, the		nancial stat	tements that describes						
Dos	the organization's accounting for conservation	n easements ections of Art, Historical Treasures	or Otho	r Similar Assots						
Par		rered "Yes" to Form 990, Part IV, line		T Sillinai Assets.						
1a	If the organization elected, as permitted under									
	works of art, historical treasures, or other sim									
	of public service, provide, in Part XIII, the tex									
b	If the organization elected, as permitted under works of art, historical treasures, or other sim									
	of public service, provide the following amount	· · · · · · · · · · · · · · · · · · ·	auon, or res	search in futule affice						
	(i) Revenue included in Form 990, Part VIII,	•		<b>▶</b> \$						
	(ii) Assets included in Form 990, Part X	1		► \$ ► \$						
2	If the organization received or held works of	art, historical treasures, or other similar ass	sets for fina							
~	following amounts required to be reported un			and gam, provide the						
а	Revenue included in Form 990, Part VIII, line		.=•	<b>▶</b> \$						
b	Assets included in Form 990, Part X			▶ \$						

Part	W Organizations Maintaining	Collections of A	ART, HISTO	oricai ir	easures, o	Otner	Similar Asse	is (con	tinued	<u>")                                    </u>
3	Using the organization's acquisition, ac use of its collection items (check all tha		records, o	check any	of the follow	ng that a	are a significant			
а	Public exhibition		d 🔲	Loan	or exchange p	orogram	ıs			
b	Scholarly research		е 🗌	Other						
С	Preservation for future generation	ns								
4	Provide a description of the organization		explain he	ow they fu	urther the orga	anizatior	n's exempt purpo	se in		
	Part XIII		•	,	J					
5	During the year, did the organization so								r	ı
	assets to be sold to raise funds rather t	han to be maintain	ed as part	of the or	ganization's c	ollection	າ? ————————————————————————————————————	Ye	s	No
Part	Escrow and Custodial Arra Complete if the organization 990, Part X, line 21		to Form	990, Par	rt IV, line 9,	or repo	rted an amoun	t on Fo	rm	
1a	Is the organization an agent, trustee, coincluded on Form 990, Part X?					her asse	ets not	Ye	s 🔲	No
b	If "Yes," explain the arrangement in Pai	t XIII and complete	the follov	ving table			· · · · · · · · ·	<u>.</u>		
						4-	<u> </u>	mount		
C	Beginning balance Additions during the year					1c 1d	-			
d e	Distributions during the year					1 <u>u</u>				<del></del>
f	Ending balance					1f	-			0
2a	Did the organization include an amount	on Form 990 Par	t X line 21	l. for escr	ow or custodi	al accou	unt liability?	Ye	s X	No
b	If "Yes," explain the arrangement in Pai									
Part		CALL CHOCK HOLD		27.02.07.7.0						<u> </u>
· arc	Complete if the organization	answered "Yes"	to Form	990, Par	rt IV, line 10					
		(a) Current year	(b) Pro		(c) Two years	back	(d) Three years back	(e) Fo	ur years	back
1a	Beginning of year balance						-t			
b	Contributions									
С	Net investment earnings, gains, and losses	·								
d	Grants or scholarships							+		
е	Other expenditures for facilities									
f	and programs Administrative expenses							<del> </del>		
g	End of year balance	0		0		0				0
2	Provide the estimated percentage of th	e current year end	balance (l	ine 1g, co	olumn (a)) hel					
а	Board designated or quasi-endowment		% `	•						
b	Permanent endowment	%								
C	Temporarily restricted endowment	<b>&gt;</b> %								
	The percentages in lines 2a, 2b, and 2c	•								
3a	Are there endowment funds not in the p	oossession of the c	rganizatio	n that are	held and adi	ministere	ed for the		Yes	No
	organization by (i) unrelated organizations							3a(i)	168	NO
	<ul><li>(i) unrelated organizations</li><li>(ii) related organizations</li></ul>							3a(ii)		<del> </del>
b	If "Yes" to 3a(ii), are the related organiz	ations listed as red	uired on S	Schedule	R۶			3b		
4	Describe in Part XIII the intended uses		-					_		
Part	VI Land, Buildings, and Equip	ment.								
	Complete if the organization	answered "Yes"	to Form	990, Pai	rt IV, line 11	a See	Form 990, Par	t X, line	10	
	Description of property	(a) Cost or of			ost or other		Accumulated	(d) B	ook valu	е
		(investr		bas	is (other)	de	epreciation			22.024
1a	Land	-	0		33,034 298,178		235,667			33,034 52,511
b c	Buildings Leasehold improvements		0		0		235,667			02,511
d	Equipment .		0		80,844		74,706			6,138
e	Other		0		13,250		10,627	_	-	2,623
	. Add lines 1a through 1e (Column (d) n	nust equal Form 99	00, Part X,	column (			•		10	04,306

Page 3

Part VII	Complete if the organization a		90, Part IV, line 11b See Fo	orm 990, Part X, line 12
(a)	Description of security or category (including name of security)	(b) Book value	(c) Method of Cost or end-of-ye	of valuation
(1) Financial o	derivatives	0	)	
	ld equity interests	0	)	
(3) Other				
(B)				
(C)				
			-	
(E)				
		-		
(G) (H)		•	-	
	nust equal Form 990, Part X, col (B) line 12)	0		
Part VIII	Investments—Program Rela	<del></del>	1	· · · · · · · · · · · · · · · · · · ·
	Complete if the organization a			
	(a) Description of investment	(b) Book value	(c) Method of Cost or end-of-year	
(1)				
(2)			<b>-</b>	
(4)				
(5)		<del> </del>		
(6)				
(7)				
(8)				
(9)				
Total (Column (b) n	nust equal Form 990, Part X, col (B) line 13)	0	) <u> </u>	
Part IX	Other Assets.  Complete if the organization a	inswered "Yes" to Form 99	00, Part IV, line 11d See Fo	orm 990, Part X, line 15
		(a) Description		(b) Book value
(1)				
(2)		· · · · · · · · · · · · · · · · · · ·	<del></del>	
(3)	<del></del>			
(4)	<del></del>			
(6)				
(7)				
(8)				
(9)				
Total. (Colum	n (b) must equal Form 990, Part X, c	ol (B) line 15)		•
Part X	Other Liabilities.			
	Complete if the organization a line 25	inswered "Yes" to Form 99	90, Part IV, line 11e or 11f.	See Form 990, Part X,
1.	(a) Description of liability	(b) Book value		
(1) Federal ı	ncome taxes	0	24	
(2)			-	
(3)		<del> </del>	1	
(4)			1	
<u>(5)</u> (6)		•	1	
(7)		<u> </u>	1	
(8)			]	
(9)			]	
	ust equal Form 990, Part X, col. (B) line 25.)	1	<u> </u>	
2. Liability for u	incertain tax positions. In Part XIII, prov	ide the text of the footnote to the	e organization's financial stateme	ents that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

### **SCHEDULE G** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Employer identification number Name of the organization 93-0393118 BENEVOLENT AND PROTECTIVE ORDER OF ELKS Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply Solicitation of non-government grants Mail solicitations а Solicitation of government grants b Internet and email solicitations Special fundraising events Phone solicitations C d In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or 2a key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (v) Amount paid to (iii) Did fundraiser have (vi) Amount paid to (iv) Gross receipts (or retained by) (i) Name and address of individual (or retained by) (ii) Activity custody or control of fundraiser listed in or entity (fundraiser) from activity contributions? organization col (i) Yes No 1 0 10 0 0 0 0 0 Total List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from 3 registration or licensing

_	art	Fundraising Events more than \$15,000 of	. Complete if the orga f fundraising event co	Inization answered "Yes" Intributions and gross in	" to Form 990, Part IV,	
		events with gross rec	eipts greater than \$5,	,000 (b) Event #2	(c) Other events	(d) Total events (add col (a) through
_			(event type)	(event type)	(total number)	col (c))
Revenue	1	Gross receipts			0	0
æ	2				0	0
		minus line 2)			0	0
	4	Cash prizes			0	0
	5	Noncash prizes			0	0
Direct Expenses	6	Rent/facility costs			0	0
Ä	7	Food and beverages			0	0
Direc	8	Entertainment			О	0
	9	Other direct expenses			0	0
	10				<b>&gt;</b>	( 0) 0
Pa	irt i	Gaming. Complete if	the organization ans	wered "Yes" to Form 990	), Part IV, line 19, or re	
	<u> </u>	than \$15,000 on Forn	n 990-EZ, line 6a			
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Re	1	Gross revenue			319,600	319,600
ses	2	Cash prizes			301,800	301,800
Expenses	3	Noncash prizes				0
Direct I	4	Rent/facility costs				0
	5	Other direct expenses				0
	6	Volunteer labor	Yes %	Yes %	Yes %  X No	
	7	Direct expense summary Ad	ld lines 2 through 5 in co	olumn (d)	<b>•</b>	( 301,800)
	8	Net gaming income summar	y Subtract line 7 from lir	ne 1, column (d)	<b>&gt;</b>	17,800
ç	•	Enter the state(s) in which the o	organization conducts ga	ming activities		
	a	Is the organization licensed to c If "No," explain	onduct gaming activities	s in each of these states?		X Yes No
10		Were any of the organization's g	gaming licenses revoked	d, suspended or terminated	during the tax year?	Yes X No
	b	If "Yes," explain		·		

Sched	ule G (Form 990 or 990-EZ) 2014 BENEVOLENT AND PROTECTIVE ORDER OF ELKS	93-	<u>0393118</u>	3 Page <b>3</b>
11	Does the organization conduct gaming activities with nonmembers?		Yes	X No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	[	Yes	X No
13	Indicate the percentage of gaming activity conducted in			
a	The organization's facility	13a 13b		100 00%
ь 14	An outside facility  Enter the name and address of the person who prepares the organization's gaming/special events books	130		%
14	and records			
	Name ► JEANNE PRESTON			
	Address ► 550 NE OCHOCO AVE, PRINEVILLE, OR 97754			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	[	Yes	X No
b	If "Yes," enter the amount of gaming revenue received by the organization \$ 0 and the			
С	amount of gaming revenue retained by the third party  If "Yes," enter name and address of the third party			
	Name ▶			
	Address •	<b></b>		
16	Gaming manager information			
	Name ▶			
	Gaming manager compensation ► \$0			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to	ľ	<b>—</b>	ITT)
<b>L</b>	retain the state gaming license?  Enter the amount of distributions required under state law to be distributed to other exempt organizations	l	Yes	X No
D	or spent in the organization's own exempt activities during the tax year \( \bigs \)			0
Part		is (III) a al Infori	and (v), mation	and

### **SCHEDULE O** (Form 990 or 990-EZ)

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

OMB No 1545-0047 2014 Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization	Employer identification number
BENEVOLENT AND PROTECTIVE ORDER OF ELKS	93-0393118
Form 990, Part VI, Section B, Line 12C ANNUALLY OFFICERS, TRUSTEE REPORT TO BOARD	FOR
POTENTIAL CONFLICT OF INTEREST	
Form 990, Part VI, Section C, Line 19 NO DOCUMENTS ARE AVAILABLE TO THE PUBLIC	
•••••	•

**Depreciation and Amortization** (Including Information on Listed Property)

OMB No 1545-0172

Department of the Treasury

Attach to your tax return.

Attachment

- IIICII	Inform	ation about Form	1 4562 and its separate ins	structions is a	it www.irs.gov/	101111450Z.	Sedu	ence No 173
	ne(s) shown on return		ess or activity to which this f	orm relates		Identifying nu	mber	-
	NEVOLENT AND PROTECTIVE OF		4 11 1 0 4: 49			93-0393118		
Pa		•	•					
_	Note: If you have any listed Maximum amount (see instructions		te Part v belore you compi	ele Parl I			1	
	Total cost of section 179 property p	*	(see instructions)				2	
	Threshold cost of section 179 prop			ructions)			3	
	Reduction in limitation Subtract lin			. dollono,			4	0
	Dollar limitation for tax year Subtra		·	0- If married	filing			
	separately, see instructions						5	0
6	(a) Description of p	property	(b) Co	ost (business use	only)	(c) Elected c	ost	
			<u>.</u>					
	Listed property Enter the amount f				_7_	<u> </u>		_
	Total elected cost of section 179 pr	•		and 7			8	0
-	Tentative deduction Enter the sma						9	0
	Carryover of disallowed deduction			> !	5 /		10	<del> </del>
	Business income limitation Enter t Section 179 expense deduction Ad		· ·	•	ne o (see instit	ictions)	12	0
	Carryover of disallowed deduction			iaii iiile i i	▶ 13	1	0	
	te: Do not use Part II or Part III belo			·		Ц	<u></u>	
	rt II Special Depreciation			n (Do not in	clude listed i	property ) (See	e instri	uctions)
	Special depreciation allowance for							
	during the tax year (see instruction		, , , , , , , , , , , , , , , , , , , ,	***			14	
15	Property subject to section 168(f)(1						15	
16	Other depreciation (including ACRS	S)					16	20
Pa	rt III MACRS Depreciation	ı (Do not ınclu	de listed property) (Se	e instructio	ns)			
			Section A	<del></del>				
	MACRS deductions for assets place						17	5,410
18	If you are electing to group any ass	sets placed in se	vice during the tax year ii	nto one or mo	ore general	<del></del>	.	
	asset accounts, check here					<b>▶</b>		<del> </del>
	Section B - Asset	s Placed in Sen	vice During 2014 Tax Yea	ar Using the	General Depre	ciation System	<u>n</u>	
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery penod	(e) Convention	(f) Method	(g) De	epreciation deduction
19	a 3-year property			·				
	<b>b</b> 5-year property							
	c 7-year property				ļ			
	d 10-year property						Д	
	e 15-year property		12,281	15	HY	S/L	<del></del>	409
	f 20-year property			25		0,1		
	g 25-year property			25 yrs	NANA .	S/L		
	h Residential rental			27 5 yrs	MM	S/L S/L	┿	•
	property i Nonresidential real			27 5 yrs 39 yrs	MM MM	S/L		
	property	<u> </u>	<del>,,</del>	Je yrs	MM	S/L	+	
_		Placed in Servi	ce During 2014 Tax Year	Using the A			 em	
20	a Class life		Co During 2014 Tax Toal	Johns the A		S/L	<del>""</del>	
	b 12-year	1		12 yrs		S/L	<del>- </del>	
_	c 40-year			40 yrs	ММ	S/L		
Pa	rt IV Summary (See instru	ctions)		<u> </u>	•	•		
	Listed property Enter amount from						21	
	Total. Add amounts from line 12, li	nes 14 through 1						
	here and on the appropriate lines of	•	•		structions	·	22	5,839
23	For assets shown above and place			the				
	portion of the basis attributable to s	section 263A cos	ts		_ 23	1		L