

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Part		•	<u>`</u>
1	Check if Schedule O contains a response or note to any line in this Part III	<u> </u>	<u>. Ll</u>
•			•
	Fraternalism		
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?		☑ No
_	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?		
	services?	☐ Yes	✓ No
4	Describe the organization's program service accomplishments for each of its three largest program services	as meas	ured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allo the total expenses, and revenue, if any, for each program service reported.	cations to	others,
4a)
	The Lodge unites its members in the bond of fraternity, benevolence and charity. This is accomplished through a		
	Year-round schedule of social and recreational activities for members and their families, estimated to number 257.		
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$)
		•	
4c	(Code:) (Expenses \$)
		··	
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)		
4e	Total program service expenses ► 182060.60		

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.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.
► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Employer identification number

Xenia Lodge #1629, Loyal Order of Moose	31-0360080					
Part VI, Section B, 11B. The Treasurer and President Each review the form for its contents and to determine if entries are correct.						
Part VI, Section C, 19. All docuements were available at open meetings of the members and guest.						
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	·					

Schedule O (Form 990 or 990-EZ) (201	5)		Page 2
Name of the organization	r	Employer Identification number	•
		•	
•••			
			•••••
		·····	