

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



Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

A	For the 2	2014 calendar year, or tax year beginning May 1 , 2014, and e	nding	April 30	, 20 15
В		oplicable. C Name of organization Yuma Lodge 1627 Loyal Order OF MOOSE			er identification number
	Address c				86-6055211
	Name cha	No. 1 Control	m/suite	E Telephor	
\Box	Initial retui			i	928-342-3792
$\bar{\Box}$	Final return				
$\overline{\Box}$	Amended	i		G Gross re	ceipts \$
$\overline{\sqcap}$		n pending F Name and address of principal officer	H(a) k		subordinates? Yes No
	, фр.,одио.	Carl Gaiser 13441 S Frontage Rd Yuma Az 85367			s included? Yes No
$\overline{}$	Tax-exem				list (see instructions)
<u>:</u>	Website:			Group exemption	
K		ganization.			of legal domicile
	art I	Summary			or regar continue
		Briefly describe the organization's mission or most significant activities: Th	e Orginizati	ion Unites its m	embers in the bond of
ė	1	raternity benevolence and charity. This accomplished through a year round sch			
Governance		and family est 1697.	iledaili 19.01	recreational de	tivities of member and
ᇤ		Check this box ▶☐ if the organization discontinued its operations or dispos	sed of more	than 25% of	its net assets.
Š		Number of voting members of the governing body (Part VI, line 1a)		3	7
8	1	Number of independent voting members of the governing body (Part VI, line		4	6
Activities &		otal number of individuals employed in calendar year 2014 (Part V, line 2a)	•	5	13
ΞΞ		otal number of volunteers (estimate if necessary)		6	65
Act		Total unrelated business revenue from Part VIII, column (C), line 12		7a	
	1	Net unrelated business taxable income from Form 990-T, line 34		7b	
		tot direction business taxable income from the 17 miles of 1, into 64	· · · · ·	Prior Year	Current Year
-	8 (Contributions and grants (Part VIII, line 1h)		28,598.00	26,474.00
nge		Program service revenue (Part VIII, line 2g)	·	639,138.56	652,024.67
Revenue	1	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	12126	107.80	
æ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	12120	107.80	
		otal revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12		667,857.82	678,606.47
		Grants and similar amounts paid (Part IX, column (A), lines 1–3)		5,086.12	4,488.35
		Benefits paid to or for members (Part IX, column (A), line 4)		3,080.12	4,400.33
"	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10	,	179,376.40	173,413.82
Expenses	16a F	Professional fundraising fees (Part IX, column (A)—Ine, 1.1e)———	″ 	179,370.40	173,413.62
ber	b 7	Total fundraising expenses (Part IX, column (D), line 25)	`		
A	17 (Other expenses (Part IX, column (A) lines 11a-11d, 11f-24e)		501,127.73	522,568.50
	18	Total expenses. Add lines 13–17 (nust equal Part IX, 20 gmn (A), line 25)	·	685590.25	700470.67
	19	Revenue less expenses. Subtract line 18 from line 12	·	-17732.43	700470.07
_ s		Letter less expenses. Cubitati into 10 month into 12	Beginnin	g of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16) OGDEN, UT	\- <u>-</u>	1,369,099.72	1,345,278.58
Ass	21	Total liabilities (Part X, line 26)	·	952.00	
¥§	22	Net assets or fund balances. Subtract line 21 from line 20	·	1,368,147.72	-1,004.94 1,346,283.52
	art II	Signature Block	<u>• . l</u>	1,308,147.72	1,340,263.32
		es of perjury, I declare that I have examined this return, including accompanying schedules and	statements a	and to the best of n	ny knowledge and helief it is
		and complete. Declaration of preparer (other than officer) is based on all information of which pre			1
					21/13
Sig	gn	Signature of officer	· · · · · · · · · · · · · · · · · · ·	Date	
He	- 1	KENNETH C. MEISER			
		Type or print name and title			
		Print/Type preparer's name Preparer's signature	Date		PTIN
Pa				Check self-emp	
	eparer	1 · · · · ·		Firm's EIN ▶	
US	se Only	Firm's address ►		Phone no.	
Ma	v the IRS	6 discuss this return with the preparer shown above? (see instructions) .		Triiona no.	Yes No
	.,	L De Letter A. M. M	D-1 N- 4400	~	50m 990 (2014)

Page	2
------	---

Part			D- 4 III
			Part III
1	Briefly describe the organization's mis		
			accomplished through year round scheduling
	of social and recreational activities for n	nembers and their families, estimated 169	7
2		gnificant program services during the	
	•		· · · · · · · · · · · · · · · · · · ·
	If "Yes," describe these new services		
3		ting, or make significant changes in	
	services?		· · · · · · · · · · · · · · · Yes ✓ No
_	If "Yes," describe these changes on S		
4			ts three largest program services, as measured by
	the total expenses, and revenue, if any		ort the amount of grants and allocations to others,
	the total expenses, and revenue, if any	y, for each program service reported.	
4a	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
	(4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	g g.am.e e. \$, (1876),
4b	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$	including grants of \$	\ (Revenue \$
70	(Dode:) (Expenses w) (Nevenue w
4d	Other program services (Describe in S	Schedule O.)	
		g grants of \$) (Revenu	e\$)
4e	Total program service expenses ▶		

Part I	V Checklist of Required Schedules			
	1		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		1
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		✓
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		
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? <i>If "Yes," complete Schedule C, Part II</i>	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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		1
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		1
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		
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		
С	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		
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		
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f		
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
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		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a		14a		✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		1
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		1
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		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
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		1
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		1
20 -	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	l	1
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		+

Part	Checklist of Required Schedules (continued)			
04	, Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		Yes	No
21	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	1	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	•	1
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 Schedule J	23		
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		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		ļ
2 5a	Section 501(c)(3), 501(c)(4), and 501(c)(29) 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		l L
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		1
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		√
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 b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	28a		√
_	Schedule L, Part IV	28b	<u> </u>	✓
С	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		✓
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29		
	conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		1
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		1
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	1	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	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	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	1	

Form **990** (2014)

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			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable]		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		1
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 13]		
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)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓
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	1		١.
	account)?	4a		/
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		✓
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?	5¢		✓
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		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		,	ļ
_	and services provided to the payor?	7a		√
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		1
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	_		
_	required to file Form 8282?	7c		✓
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		✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		V
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. Did a donor advised fund maintained by the		İ	١,
•	sponsoring organization have excess business holdings at any time during the year?	8		✓
9	Sponsoring organizations maintaining donor advised funds.	_	1	
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		V
10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	-	-
10	Section 501(c)(7) organizations. Enter:]
a	Initiation fees and capital contributions included on Part VIII, line 12	1	ł	
11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . Section 501(c)(12) organizations. Enter:	┨		
11				
a b	Gross income from members or shareholders	-		
-	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	124		-
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1	1	
a	Is the organization licensed to issue qualified health plans in more than one state?	120	 	-
a	Note. See the instructions for additional information the organization must report on Schedule O.	13a	 	✓
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			
С	Enter the amount of reserves on hand	1		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
14a b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14a	 	
	in 103, has a nied a form 120 to report these payments: if two, provide an explanation in schedule O .	1 170	1	ı

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management 1a 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 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 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 990 was filed? 5 Did the organization have members or stockholders? 7a 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? b Are any governance decisions of the organization reserved to (or subject to approval by) members stockholders, or persons other than the governing body? b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body? b Each committee with authority to act on behalf of the governing body? b Each committee with authority to act on behalf of the governing body? b Each committee with authority to act on behalf of the governing body? b Each committee with authority to act on behalf of the governing body? b Each committee with authority to act on behalf of	ar 1a 8 7 7 8 8 8 8 8 8 8	Yes No
Ia 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. Enter the number of voting members included in line 1a, above, who are independent. 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? 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? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 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? Are any governance decisions of the organization reserved to (or subject to approval by) members stockholders, or persons other than the governing body? Bud the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? In the governing body? In the governing body? In the governing body? Bud the organization is authority to act on behalf of the governing body? In the governing body? In the governing body? Bud the organization is authority to act on behalf of the governing body? In the governing body? Bud the organization is mailing address? If "Yes," provide the names and addresses in Schedule O. Section B. Policies (This Section B requests information about policies not required by the Internal Reversities, and branches to ensure their operations are consistent with the organization's exempt purposes?	ar 1a	Yes No
In 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. In the the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employees to a management company or other person? Did the organization delegate control over management dutes customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 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? Are any governance decisions of the organization reserved to (or subject to approval by) members stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O. Section B. Policies (This Section B requests information about policies not required by the Internal Reversible of the organization have local chapters, branches, or affiliates? If "Yes," did the organization have envirtlen policies and procedures governing the activities of such chapters affiliates, and branches to ensure their operations are	ar 1a 8 body, or r similar nt . 1b 7 business relationship with	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
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. Enter the number of voting members included in line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employees have a family relationship or a business relationship with any other officer, director, trustee, or key employees to a management company or other person? 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? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 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? Are any governance decisions of the organization reserved to (or subject to approval by) members stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O. Section B. Policies (This Section B requests information about policies not required by the Internal Reversal in "Yes," did the organization have written policies and procedures governing the activities of such chapters affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	boody, or r similar It . 1b 7 business relationship with	/ / / / /
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, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 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? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? . Did the organization have members or stockholders? 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? Are any governance decisions of the organization reserved to (or subject to approval by) members stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? Each committee with authority to act on behalf of the governing body? Each committee with authority to act on behalf of the governing body? Beach committee with authority to act on behalf of the governing body? Brief any officer, director, trustee, or key employee isled in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O. Section B. Policies (This Section B requests information about policies not required by the Internal Reversal III and the organization have local chapters, branches, or affiliates? The development of the organization have organization have organization to review this Form 990. Did the organization have a wr	nt . 1b 7 business relationship with	/ / / / /
b Enter the number of voting members included in line 1a, above, who are independent 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? 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? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 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? Are any governance decisions of the organization reserved to (or subject to approval by) members stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's malling address? If "Yes," provide the names and addresses in Schedule O. Section B. Policies (This Section B requests information about policies not required by the Internal Reversible to governing body and the organization have local chapters, branches, or affiliates? If "Yes," did the organization have local chapters, branches, or affiliates? Did the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," g	nt . 1b 7 business relationship with	/ / / / /
b Enter the number of voting members included in line 1a, above, who are independent . 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?	business relationship with ed by or under the direct any or other person? for Form 990 was filed? organization's assets? power to elect or appoint approval by) members, actions undertaken during actions undertaken during who cannot be reached at ochedule O	/ / / / /
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? 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? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 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? Are any governance decisions of the organization reserved to (or subject to approval by) members stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? Beach committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O. Section B. Policies (This Section B requests information about policies not required by the Internal Reversialists, and branches to ensure their operations are consistent with the organization's exempt purposes? Did the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? D	business relationship with ed by or under the direct any or other person? for Form 990 was filed? organization's assets? power to elect or appoint approval by) members, actions undertaken during actions undertaken during who cannot be reached at ochedule O	/ / / / /
any other officer, director, trustee, or key employee? 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? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 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? Are any governance decisions of the organization reserved to (or subject to approval by) members stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? Each committee with authority to act on behalf of the governing body? Each committee with authority to act on behalf of the governing body? Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O. Section B. Policies (This Section B requests information about policies not required by the Internal Reversible in Schedule O. The post 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's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to	ed by or under the direct any or other person? ior Form 990 was filed? organization's assets? power to elect or appoint approval by) members, actions undertaken during actions undertaken during who cannot be reached at ichedule O	/ / / / /
supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 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? Are any governance decisions of the organization reserved to (or subject to approval by) members stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? Beach committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's malling address? If "Yes," provide the names and addresses in Schedule O. Section B. Policies (This Section B requests information about policies not required by the Internal Reversible in Schedule O the organization have written policies and procedures governing the activities of such chapters affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Bescribe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	any or other person? ior Form 990 was filed? organization's assets? power to elect or appoint approval by) members, actions undertaken during	<i>y y</i>
 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 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? Are any governance decisions of the organization reserved to (or subject to approval by) members stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Reversal III and by the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforc	ior Form 990 was filed? organization's assets?	<i>y y</i>
 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 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? Are any governance decisions of the organization reserved to (or subject to approval by) members stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Reversalfiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Did the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 	power to elect or appoint power to elect or	<i>y y</i>
 Did the organization have members or stockholders? 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? Are any governance decisions of the organization reserved to (or subject to approval by) members stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Reversal III and the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 	power to elect or appoint power to elect or	<i>y y</i>
 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? Are any governance decisions of the organization reserved to (or subject to approval by) members stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Reverses affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 	power to elect or appoint	<i>y y</i>
one or more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members stockholders, or persons other than the governing body? b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body? ls there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Reversible Section B. Policies (This Section B requests information about policies not required by the Internal Reversible Section B. Policies (This Section B requests information about policies not required by the Internal Reversible Section B. Policies (This Section B requests information about policies not required by the Internal Reversible Section B. Policies (This Section B requests information about policies not required by the Internal Reversible Section B. Policies (This Section B requests information about policies not required by the Internal Reversible Section B. Policies (This Section B requests information about policies not required by the Internal Reversible Section B. Policies (This Section B requests information about policies not required by the Internal Reversible Section B. Policies (This Section B requests information about policies not required by the Internal Reversible Section B. Policies (This Section B requests information about policies not required by the Internal Reversible Section B. Policies (This Section B requests information about policies not required by the Internal Reversible Section B. Policies (This Section B requests information about policies not required by the Internal Reversible Section B. Policies (This Section B requests information about p	approval by) members, cactions undertaken during 8a 8b who cannot be reached at inchedule O	√
 b Are any governance decisions of the organization reserved to (or subject to approval by) members stockholders, or persons other than the governing body?	actions undertaken during 8a 8b who cannot be reached at ichedule O	√
 Build the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Reversible in "Yes," did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 	actions undertaken during 8a 8b who cannot be reached at inchedule O	√
the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body? ls there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Reversal B. Policies (This Section B requests information about policies not required by the Internal Reversal B. If "Yes," did the organization have written policies and procedures governing the activities of such chapters affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 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 rise to conflicts? C Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	8a 8b 9 8b 9 8chedule O	
 a The governing body? b Each committee with authority to act on behalf of the governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O. Section B. Policies (This Section B requests information about policies not required by the Internal Reverses) 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a 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 rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 	who cannot be reached at chedule O 9	
 b Each committee with authority to act on behalf of the governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O. 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a 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 rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 	who cannot be reached at chedule O 9	
 ls there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	who cannot be reached at chedule O 9	<u> </u>
the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Reversal Provided Herbitan Section B requests information about policies not required by the Internal Reversal Provided Herbitan Section B requests information about policies not required by the Internal Reversal British Section B requests information about policies not required by the Internal Reversal British British Section B requests information about policies not required by the activities of such chapters affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 13a Did the organization have a written conflict of interest policy? If "No," go to line 13 14a Did the organization have a written conflict of interest policy? If "No," go to line 13 15a Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	chedule O 9	
 b If "Yes," did the organization have written policies and procedures governing the activities of such chapters affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a 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 rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 	rad by the Internal Dayanya Ca	1
 b If "Yes," did the organization have written policies and procedures governing the activities of such chapters affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a 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 rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 	red by the internal nevertie Col	de.)
 b If "Yes," did the organization have written policies and procedures governing the activities of such chapters affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a 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 rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 		Yes No
affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	10a	√
 Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13		
 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 		√
 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 	Form 990.	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	12a	✓
	- I	
13 Did the organization have a written whistleblower policy?		1
14 Did the organization have a written document retention and destruction policy?		1
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?	l l	
a The organization's CEO, Executive Director, or top management official		 ✓
b Other officers or key employees of the organization	<u>15b</u>	
	ire or similar arrangement	
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		✓
 If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 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" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	ike steps to safeguard the	
 If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	ike steps to safeguard the	
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?	ike steps to safeguard the	
 If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	ske steps to safeguard the 16b 16b 16b, 990, and 990-T (Section 501(c)	
 If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	ske steps to safeguard the 16b 16b 16b, 990, and 990-T (Section 501(c)	
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?	ske steps to safeguard the 16b 16b 16b, 990, and 990-T (Section 501(c) at apply.)(3)s only)
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?	ske steps to safeguard the 16b 16b 16b, 990, and 990-T (Section 501(c) at apply.)(3)s only)
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?	ole), 990, and 990-T (Section 501(c) at apply. olain in Schedule O) ng documents, conflict of interest properties.)(3)s only) olicy, and

	$\alpha \alpha \alpha$	(2014)	
-corrri	990	(2014)	

Page 7

	·		· · · · · · · · · · · · · · · · · · ·	9.
Part VII	Compensation of Officers, Directors	Trustees, Key Employees	, Highest Compensated Employees, a	ınd
	Independent Contractors			

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 no	r any relate	d org	anız	atic	n c	ompe	nsa	ated any curren	it officer, director	, or trustee.	
				(0	C)					-	
(A)	(B)	١			ition			(D)	(E)	(F)	
Name and Title	Average					than one than the second		Reportable	Reportable	Estimated	
	hours per					or/trust		compensation	compensation from	amount of	
	week (list any hours for	옥호	=	Q	Ž	9 =	Ţ,	from the	related organizations	other compensation	
	related	름	#	Officer	y e	콩물	Former	organization	(W-2/1099-MISC)	from the	
	organizations	cto	ğ	ੈ	쀨	st c	"	(W-2/1099-MISC)		organization	
	below dotted line)	ੈ <u>ਵ</u> ਿ	显		Key employee	第		ļ		and related organizations	
	,	Individual trustee or director	Institutional trustee		8	ens				Organizations	
		_	8			Highest compensated employee					
(A) -											
(1) See Attached	 							0	0		C
(2)			<u> </u>						U		
				ļ							
(3)											
(4)							-				_
				L			ļ				
(5)											
(6)							<u> </u>				_
				_							
(7)	ļ										
(8)										-	
							_				
(9)	 										
(10)						-	_				_
(44)					ļ						
(11)	 										
(12)											_
(12)			_	_						 	
(13)	 										
(14)					-						

, (A)	ad Assid	(B)			Pos eck		than c		(D)	(E)			(F)	
Name and	1 title	Average hours per week (list any hours for related organizations below dotted line)	office or directo				b 芸 Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation (related organization (W-2/1099-Mit	from s	amo compo frod organ and	mated ount of ther ensation m the nization related nization	e on n
(15)												· .		
16)														
17)														
18)											- -			
19)														
20)								_						
21)														
22)														
23)														
											<u>.</u>			
24)														
25)														
c Total from continu		-		•	· ·	 		> > >						
	dividuals (including bunsation from the organ		to th	ose	list	ed a	above	e) w	ho received m	ore than \$10	0,000 c	of		
	on list any former of a? If "Yes," complete							•	oloyee, or high	•		3	Yes	No
organization and	listed on line 1a, is the related organizations	greater th	an \$1	150,	000)? <i>I</i> I	"Ye	s, "	complete Sch					
5 Did any person list	ed on line 1a receive or red to the organization	or accrue co	ompe	nsat	ion	fror	n any	un un	related organiz			5		1
Section B. Independent		,	,,,,,,,						idon pordon	<u> </u>		<u> </u>	L	V
	e for your five highest n the organization. Re													ax
	(A) Name and business add	dress					-		(B) Description of s	ervices	Co	(C) ompens		
	independent contracto							th	ose listed ab	ove) who	<u>.</u>			

Pari	VIII	Statement of Revenue					
		Check if Schedule O contains a response or	note to	(A) Total revenue	Part VIII (B) Related or	(C) Unrelated	(D) Revenue
				lotal revenue	Helated or exempt function revenue	Unrelated business revenue	excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f	Federated campaigns 1a Membership dues 1b 26 Fundraising events 1c Related organizations 1d Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in lines 1a-1f.\$	474.00				
<u>3 E</u>	h	Total. Add lines 1a-1f	. >	26474.00			
Program Service Revenue	2a b c	Social Quarters Kitchen Committees Vending	Code	70760.93	354266.89 150536.25		
Š	e	venturing		23621.50		· · · · · · · · · · · · · · · · · · ·	
ogra	f	All other program service revenue .		52839.10			
	g 3	Total. Add lines 2a–2f	. D	173695.53			T
	4 5	and other similar amounts)	. ▶ eds ▶ . ▶	107.80			
	6a b c d 7a	Gross rents Less: rental expenses Rental income or (loss) Net rental income or (loss) Gross amount from sales of assets other than inventory	. •				
	c d	Less: cost or other basis and sales expenses . Gain or (loss)	. •				
Other Revenue	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 a					
the	ь	Less: direct expenses b					
0	С	Net income or (loss) from fundraising events Gross income from gaming activities.	. ▶			· · · · · · · · · · · · · · · · · · ·	
	С	See Part IV, line 19 a Less: direct expenses b Net income or (loss) from gaming activities .	. ▶				
		Gross sales of inventory, less returns and allowances a Less: cost of goods sold b					
		Net income or (loss) from sales of inventory . Miscellaneous Revenue Business				· · · · · · · · · · · · · · · · · · ·	ļ
	11a b	Miscellaneous Revenue Business	Jude				
	d e 12	All other revenue	. 🟲	472002 22	504002 14		

Form 990 (2014)	Page 10
Part IX Statement of Functional Expenses	
Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).	

_	Check if Schedule O contains a respon	se or note to any lir	ne in this Part IX .		🗆
	t include amounts reported on lines 6b, 7b, o, 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 and domestic governments. See Part IV, line 21	4488.35	4488.35		
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	23,980.76	23,980.76		
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 8	Other salaries and wages	131,724.69,	131,724.69		
9	Other employee benefits				
10	Payroll taxes	17,708.37	17,708.37		
11	Fees for services (non-employees):				
a	Management				
b	Legal				ļ <u>-</u>
c d	Accounting				
u e	Lobbying			·	
f	Investment management fees			· · · · · · · · · · · · · · · · · · ·	
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion	1,963.61	1,963.61		
13	Office expenses	4,416.26	4,416.26		
14	Information technology	120.00	120.00		
15	Royalties				
16	Occupancy	40,189.44	40,189.44		
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials			·	
19	Conferences, conventions, and meetings .	6,479.23	6,479.23		
20	Interest				
21 22	Payments to affiliates	3,000.00	3,000.00		
23	Depreciation, depletion, and amortization . Insurance	15,813.00	15,813.00		
24	Other expenses. Itemize expenses not covered	15,813.00	15,813.00		
24	above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	Cost of Salas	240 757 00	240 757 00		
a b	Sales Tay	219,757.30 31,558.66	219,757.30		
C	Committees	50,520.16	31,558.66 50,520.16		
d	Repair and Maintence	40,368.85	40,368.85		
e	All other expenses	108,382.29	108,382.29		
25	Total functional expenses. Add lines 1 through 24e	700,470.67	700,470.67		
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)		223, 1, 3, 3		5 000 m

Form 990 (2014) Page 11 Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (B) Beginning of year End of year 117,753.86 1 124,459.71 Savings and temporary cash investments 2 2 189,277.74 150,042.32 3 3 4 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L..... 6 7 8 12,682.64 14,680.59 Prepaid expenses and deferred charges . . . 9 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 1.054,814.98 10b Less: accumulated depreciation 1,054,814.98 10c b 1,054,814.98 11 Investments—publicly traded securities 11 12 Investments—other securities. See Part IV, line 11 12 Investments—program-related. See Part IV, line 11 13 13 14 14 15 570.50 15 1,281.00 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 1,369,099.72 1,345,278.88 17 Accounts payable and accrued expenses 952.00 17 -1004.94 18 18 19 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 Loans and other payables to current and former officers, directors, 22 Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties . . 23 23 24 Unsecured notes and loans payable to unrelated third parties . . . 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X 25 Total liabilities. Add lines 17 through 25 _ 26 952.00 26 -1004.94 Organizations that follow SFAS 117 (ASC 958), check here ▶ Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 27 1,368,147.72 1,346,283.52 28

Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building, or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds .

complete lines 30 through 34.

30

31

32

33

1,346,282.52

29

30

31

32

33

34

1,368,147.72

1,369,099.82

n	4	•
rage		_

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)	Part	ΧI	Reconciliation of Net Assets				
Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1 Net unrealized gains (losses) on investments Net unrealized gains (losses) on investments Donated services and use of facilities Net unrealized gains (losses) on investments Donated services and use of facilities Prior period adjustments Prior period adjustments Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990: Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990: Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990: Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990: Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990: Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990: Check if Schedule O contains a response or note to any line in this Part XII Yes No Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements and selection of an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis Both consolidated and separate basis Were the organization's financial statements and selection of an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, or both: Separate basis Co			Check if Schedule O contains a response or note to any line in this Part XI				
Revenue less expenses. Subtract line 2 from line 1	1	Tota	I revenue (must equal Part VIII, column (A), line 12)	1		678,6	06.47
A Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	2	Tota	l expenses (must equal Part IX, column (A), line 25)			700,4	70.67
5 Net unrealized gains (losses) on investments	3	Reve	enue less expenses. Subtract line 2 from line 1	3		-218	64.20
Donated services and use of facilities	4	Net a	assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1	,368,1	47.72
7 Investment expenses 7	5	Net	unrealized gains (losses) on investments	5			
9 Other changes in net assets or fund balances (explain in Schedule O). Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)). 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)). 10 1,346,283.52 Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII. 1 Accounting method used to prepare the Form 990: 1 Cash 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? 1 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: 2a Vere the organization's financial statements audited by an independent accountant? 2b Vere the organization's financial statements audited by an independent accountant? 2b Vere the organization's financial statements audited by an independent accountant? 2b Vere the organization's financial statements audited by an independent accountant? 2b Vere the organization's financial statements audited and separate basis 2b Vere the organization's financial statements and selection of an independent accountant? 2c Vere the organization compilation of its financial statements and selection of an independent accountant? 3a Vere the organization compilation of its financial statements and selection of an independent accountant? 3a Vere the organization compilation of its financial statements and selection of an independent accountant? 3a Vere the organization compilation of its financial statements and selection of an independent accountant? 3a Vere the organization compilation of its financial statements and selection of an independent accountant? 3a Vere the organization compilation of its financial statements and selection of an	6	Dona	ated services and use of facilities	6			
9 Other changes in net assets or fund balances (explain in Schedule O)	7	Inve	stment expenses	7			
Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	8	Prior	period adjustments	8			
Separate basis Consolidated basis, or both: Separate basis Separate b	_			9			
Check if Schedule O contains a response or note to any line in this Part XII	10		•				
Check if Schedule O contains a response or note to any line in this Part XII				10	1	,346,2	83.52
Accounting method used to prepare the Form 990: Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant?	Part	XII					
Accounting method used to prepare the Form 990:			Check if Schedule O contains a response or note to any line in this Part XII				
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?						Yes	No
Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant?	1				.		
 Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: □ Separate basis □ Consolidated basis □ Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant?				olain in			
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	_						
reviewed 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? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	2a						~
Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant?				ilea or			
b Were the organization's financial statements audited by an independent accountant?			•				
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?			•				_
separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	D						
□ 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 the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?				u on a	·		
c 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?							
of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	_			orciabt	.		
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	C				1		
Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?			•				
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?				Jiaiii iii			
the Single Audit Act and OMB Circular A-133?	32			orth in			
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. 3b	Ja						
required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	h		•	an the			_
					1		
						, <u>99</u> 0	(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.

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

lame o	f the organization		Employer identification number
/uma l	odge 1627 Loyal Order of Moose		86-6055211
Par	_		ids or Accounts.
	Complete if the organization answered	"Yes" to Form 990, Part IV, line 6.	
-		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year) .		
4	Aggregate value at end of year	advisors in writing that the assets h	pold in donor advised
5	funds are the organization's property, subject to the	advisors in whiting that the assets in	ol?
6	Did the organization inform all grantees, donors, a		
	only for charitable purposes and not for the bene		
			· · · · · · · · · · Yes · No
Par			
	Complete if the organization answered	"Yes" to Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the		
•	Preservation of land for public use (e.g., recrea		of a historically important land area
	Protection of natural habitat		of a certified historic structure
	Preservation of open space		a doranda filotorio di adtaro
0	Complete lines 2a through 2d if the organization h	old a gualified concentration contribution	on in the form of a conservation
2	easement on the last day of the tax year.	eld a qualified corise vation contribution	Held at the End of the Tax Year
	•		
а	Total number of conservation easements		<u>2a</u>
b	Total acreage restricted by conservation easemen		
C	Number of conservation easements on a certified		
d	Number of conservation easements included in	(c) acquired after 8/17/06, and not	on a
	historic structure listed in the National Register .		· · 2d
3	Number of conservation easements modified, trans	sferred, released, extinguished, or ter	minated by the organization during the
_	tax year ►	, , ,	, ,
4	Number of states where property subject to conse	ervation easement is located >	
5	Does the organization have a written policy re		spection handling of
3	violations, and enforcement of the conservation ea		· · · · · · · · · Yes · No
_	· ·		
6	Staff and volunteer hours devoted to monitoring, i	nspecting, and enforcing conservation	reasements during the year
			
7	Amount of expenses incurred in monitoring, inspe	cting, and enforcing conservation eas	ements during the year
	▶ \$		
8	Does each conservation easement reported on line	e 2(d) above satisfy the requirements o	of section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		· · · · · · · □ Yes □ No
9	In Part XIII, describe how the organization reports	conservation easements in its revenue	e and expense statement, and
-	balance sheet, and include, if applicable, the text	of the footnote to the organization's file	nancial statements that describes the
	organization's accounting for conservation easem		
Dar	Organizations Maintaining Collection		r Other Similar Assets
ı aı	Complete if the organization answered	· · · · · · · · · · · · · · · · · · ·	
4-	If the organization elected, as permitted under SF		
1a			
	works of art, historical treasures, or other simila		
	public service, provide, in Part XIII, the text of the		
b	If the organization elected, as permitted under §		
	works of art, historical treasures, or other simila		ducation, or research in furtherance of
	public service, provide the following amounts rela-		
	(i) Revenue included in Form 990. Part VIII. line 1		> \$
	(i) Revenue included in Form 990, Part VIII, line 1(ii) Assets included in Form 990, Part X		▶ \$
2	If the organization received or held works of an	t historical treasures or other similar	ar assets for financial gain, provide the
4.	following amounts required to be reported under s	SFAS 116 (ASC 958) relating to these	items:
а	Revenue included in Form 990, Part VIII, line 1		
ь	Assets included in Form 990, Part X		. > \$

Part							
3	Using the organization's acquisition, collection items (check all that apply):		ner record	ds, check any	of the follow	ving that are a s	ignificant use of its
а	☐ Public exhibition		d [☐ Loan or exc	hange prog	rams	
b	☐ Scholarly research		e [Other			
С	☐ Preservation for future generations						
4	Provide a description of the organiza XIII.	tion's collections a	ınd explai	n how they fu	rther the orc	ganization's exer	npt purpose in Part
5	During the year, did the organization	solicit or receive	donations	of art, histori	cal treasure	s, or other simila	ar
	assets to be sold to raise funds rather		ined as p	art of the orga	nization's co	ollection?	☐ Yes ☐ No
Part							
	Complete if the organization	answered "Yes"	to Form	1990, Part IV	, line 9, or	reported an am	ount on Form
	990, Part X, line 21. Is the organization an agent, trustee	austadian ar ath	or intorm	odian, for con	tributions o	other ecests n	
18	included on Form 990, Part X?						
b	If "Yes," explain the arrangement in P						☐ 162 ☐ 140
b	ii res, explain the arrangement in r	art Am and comple	ite tile loi	lowing table.		T A	mount
С	Beginning balance				10		
d	Additions during the year						
е	Distributions during the year						
f	Ending balance				11		
2a	Did the organization include an amou						
	If "Yes," explain the arrangement in P	art XIII. Check here	if the ex	planation has l	peen provid	ed in Part XIII .	<u> </u>
Par				. 000 D-+N			
	Complete if the organization	(a) Current year	(b) Prio		, IINE TU. o years back	(d) Three years back	(e) Four years back
40	Paginning of year balance	(a) Current year	(D) FIIO	year (c) iw	- years back	(d) Three years back	(e) Four years back
1a b	Beginning of year balance						
C	Net investment earnings, gains, and						
•	losses						
d	Grants or scholarships			· · · · · · · · · · · · · · · · · · ·			
е	Other expenditures for facilities and						
	programs						
f	Administrative expenses						
g	End of year balance				 	<u> </u>	<u> </u>
2	Provide the estimated percentage of	the current year en	d balance	e (line 1g, colui	mn (a)) held	as:	
a	Board designated or quasi-endowme	nt ►	%				
b	Permanent endowment ► Temporarily restricted endowment ►						
С	The percentages in lines 2a, 2b, and 2		n%				
3a	Are there endowment funds not in th			ation that are	held and ac	lministered for th	ne
	organization by:						Yes No
	(i) unrelated organizations						3a(i)
	(ii) related organizations						3a(ii)
b	If "Yes" to 3a(ii), are the related organ						3b
_4	Describe in Part XIII the intended use		n's endo	wment funds.			
Pari			–	000 5 1 11			D
	Complete if the organization						
	Description of property	(a) Cost or oth		(b) Cost or other (other)	1	Accumulated epreciation	(d) Book value
	Land	,		,,			020 000 00
b	Buildings						828,609.60 107,632.24
c	Leasehold improvements						114,373.34
d	Equipment						4200.00
е	Other						
Total.	Add lines 1a through 1e. (Column (d) r	must equal Form 99	90, Part X	, column (B), li	ne 10c.) .	▶	1,054,814.98

Part VII	Investments—Other Securities. Complete if the organization answ	ered "Yes" to For	n 990), Part IV, line	11b. See For	m 990, Part X, line 12.
	(a) Description of security or category (including name of security)) Book value	(c) N	Method of valuation nd-of-year market value
(1) Financial	derivatives					
(2) Closely-h	eld equity interests					
(A)						
(B)				·· ····		
(C)						
(D)				 		· · · · · · · · · · · · · · · · · · ·
(E) (F)						
(G)						
(H)				···		
	b) must equal Form 990, Part X, col (B) line 12.) ▶					
Part VIII	Investments-Program Related.			+	<u></u>	*****
	Complete if the organization answ		n 990), Part IV, line	11c. See For	m 990, Part X, line 13.
	(a) Description of investment		(b)	Book value		Method of valuation: and-of-year market value
(1)						
(2)						
(3)						
_(4)						
_(5)	····					
_(6)						
_(7)						
_(8)		··········				
(9)	b) must equal Form 990, Part X, col. (B) line 13.)				· · · · · · · · · · · · · · · · · · ·	
Part IX	Other Assets.				<u> </u>	
raitix	Complete if the organization answ	ered "Yes" to For	m 990). Part IV. line	11d. See For	m 990 Part X line 15.
<u></u>		Description		,		(b) Book value
_(1)						
_(2)						
(3)						
_(4)						
_(5)						
_(6)						
_(7)					····	
_(8)						
Total (Colu	mn (b) must equal Form 990, Part X, col	(R) line 15)				
Part X	Other Liabilities.	. (<i>b)</i> iiile 15.)	• •	· · · · ·		
raitA	Complete if the organization answ	ered "Yes" to For	m 991) Part IV line	11e or 11f S	ee Form 990 Part X
	line 25.	ered res to ron	111 550), i dit iv, iii c	7 116 01 111. 0	ee i oiiii 550, i ait X,
1.	(a) Description of liability	(b) Book value	. —			
(1) Federal ır	ncome taxes					
(3)						
(4)						
(2) (3) (4) (5) (6) (7) (8) (9)						
(6)						
(7)						
(8)						
	b) must equal Form 990, Part X, col (B) line 25.) ▶	· -				
2. Liability for	runcertain tax positions. In Part XIII, provid	e the text of the footn	ote to	the organizatior	n's financial state	ments 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

Part			r Return.
	Complete if the organization answered "Yes" to Form 990, F		
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		1
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
С	Recoveries of prior year grants	2c	_
d	Other (Describe in Part XIII.)	2d	_
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	_
b	Other (Describe in Part XIII.)	4b	
	Add lines 4a and 4b		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		
Part	XII Reconciliation of Expenses per Audited Financial Statem		per neturn.
	Complete if the organization answered "Yes" to Form 990, F Total expenses and losses per audited financial statements		11
1	Amounts included on line 1 but not on Form 990, Part IX, line 25:		· - •
2		2a	
a	Donated services and use of facilities	2b	-
b	Other losses	2c	-
C		2d	-
d e	Add lines 2a through 2d		
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)		
c	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	e 18.)	5
Part	XIII Supplemental Information.		
Provid	le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and	2b; Part V, line 4; Part X, line
2; Par	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	to provide any additional	information.

Schedule D (Fo	m 990) 2014	Page 5
Part XIII	Supplemental Information (continued)	
•		

		**

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

► 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

Name of the organization	Employer identification number
Yuma Lodge 1627 Loyal Order of Moose	86-6055211
Section B VI Page 6 Line 11	
Upon Completion of 990 Governing Body was given 990 to review	
Part VI Page 6 Line 19	
to made evallable to the mubic upon request	
Is made available to the public upon request.	
	,,

Schedule O (Form 990 or 990-EZ) (2014)		Page 🚄
Name of the organization	Employer identification number	
	,	
·		

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization Yuma Lodge 1627 Loyal Order of Moose

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Attach to Form 990.

4	
20	Open to

OMB No. 1545-0047

Employer identification number Inspection

86-6055211

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

(g) Section 512(b)(13) controlled entity? (1)
Direct controlling entity ž Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. Yes (f)
Direct controlling
entity (e) End-of-year assets (e)
Public charity status
(if section 501(c)(3)) (d) Total income Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (d) Exempt Code section (c)
Legal domicile (state or foreign country) (c)
Legal domicile (state
or foreign country) (b) Primary activity (b) Primary activity (a)
Name, address, and EIN (if applicable) of disregarded entity (a)
Name, address, and EIN of related organization Part I Part II ଷ ପ € 9 € E Ξ Ξ 8 (9) 2 (9)

Schedule R (Form 990) 2014

Cat. No. 50135Y

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

Page 2		(k) Percentage ownership							l	:	, ,	(i) Section 512(b)(13) controlled entity?	Š	>							Schedule R (Form 990) 2014	
	ле 34		٥ گ								Part I	Section	Yes								Form 9	
	art IV, lii	(l) General or managing partner?	Yes								m 990,	(h) Percentage ownership									edule R (
	n Form 990, Pa	Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)									s as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, sations treated as a corporation or trust during the tax year.	(g) Share of end-of-year assets ov									Scho	
	"Yes" o	(h) Disproportionate allocations?	Yes No								answere r.	Share of total income en		ParentCo	_					_		
	wered										ation a	Share inco		Par						_		
	tion ans	(g) Share of end-of- year assets									organiz ng the ta	(e) Type of entity (C corp, S corp, or trust)										
	ganiza ix year.	(f) Share of total income									te if the	Type o Type o (C corp, S o										
	the or the ta	Share			_						omplet or tru) Buillo										
	Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line because it had one or more related organizations treated as a partnership during the tax year.	inant elated, ed, from der 12-514)									rust Co	(d) Direct controlling entity		501(C)8								
		(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)									n or Ti a corp	ntry)		20.								
		= % 									oration ed as	(c) Legal domicile (state or foreign country)										
		(d) Direct controlling entity				:					Corpos s treat	Lega (state or fi		<u>-</u>								
		1									Identification of Related Organizations Taxable as a line 34 because it had one or more related organization	Α.										
		(c) Legal domicile (state or foreign										Taxable I organiz	(b) Primary activity		Organiz							
										-		Primar		Fraternal Organization								
		(b) Primary activity									anizat nore r			F								
	d Org					:					d Org	zation										
	Relate			· · · · · · · · · · · · · · · · · · ·							Relate had o	(a) Name, address, and EIN of related organization										
	on of had or	<u> </u>								on of ause it	a) N of relate		ij									
2014	tificati use it	(a) Name, address, and EIN of related organization									tificati	(a s, and Ell		ional In	60539							
Schedule R (Form 990) 2014	Iden beca	(a) address, ted orga									Iden	, addres		Internati	neart, II 18120							
	Part III	Name, rela		(I)	(2)	(3)	(4)	(2)	(9)	9	Part IV	Name		(1) Moose International Inc. 155 S International Dr	(2) Mooseheart, II 60539 396-1048120	(3)	(4)	(5)	(9)	(J)		

	Net Complete line 4 if any autity is listed in Dada II II or N. of this ashadula				Ves	S. No
-	or complete line in any entity is used in rate in, iii, or to or iiis someour. During the tax year did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	more related organ	izations listed in Parts	2VI-II S		
a	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a	
Φ	Gift, grant, or capital contribution to related organization(s)				1b	
O	Gift, grant, or capital contribution from related organization(s)				10	
7	Loans or loan guarantees to or for related organization(s)	•			1 9	_
3 (10	
o	Loans of Ioan guarantees by related organization(s)				2	
•	Dividende from related organization(e)				+	
- '					= -	-
.	Sale of assets to related organization(s)				5 4	
.	Purchase of assets from related organization(s)				= ;	
	Exchange of assets with related organization(s)				=	
-	Lease of facilities, equipment, or other assets to related organization(s)				; =	-
-						
¥ .	Lease of facilities, equipment, or other assets from related of				₹ :	1
_	Performance of services or membership or fundraising solicit				= ,	-
Ε	Performance of services or membership or fundraising solicit				<u>ا</u>	
_					무	
0	Sharing of paid employees with related organization(s)	•			9	
<u>a</u>					م	1
0	Reimbursement paid by related organization(s) for expenses				-	1
-	Other transfer of cash or property to related organization(s)				<u>-</u>	1
s ရ	Other transfer of cash or property from related organization(s)				1s	
7	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line,		including covered relationships and transaction thresholds.	ships and transactic	on thresh	olds.
	(a)	(q)	(5)	Ð		
	Name of related organization	Transaction type (a-s)	Amount involved	Method of determining amount involved	g amount in	volved
		(a p) ad (.				
€						
1						
(2)						
ල						
;						
4						
(2)						
9				Schedule R (Form 990) 2014	3 (Form 9	90) 2014

Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37. Part VI

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entrty	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related,	(e) Are all partners section 501(c)(3)	(f) Share of total income	(g) Share of end-of-year	(h) Disproportionate allocations?	(i) c Code V—UBI amount in box 20 of Schedule K-1	(I) General or managing	, (k) Percentage ownership
			from tax under sections 512-514)	organizations?				(Form 1065)		
12				Yes No			Yes No		Yes No	
(2)										
(6)										
(4)										
(5)										
(9)										
ω										
(8)										
(6)										
(10)										
(11)										
(12)										
(13)										}
(14)										
(15)										
(16)										
								Sche	dule R (For	Schedule R (Form 990) 2014

chedule R (Form 990) 2014	Page \$
Part VII	Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions).	
	······	
	·	
	······································	
· 		
-		
	·	
	·	
		·

Administrator	Kenneth Meiser	05/01/2015
Governor	Carl Gaiser	05/01/2015
Jr. Past Governor	Richard "Red" McIntire	05/01/2015
Jr. Governor	Don Newburn	05/01/2015
Prelate	Harvey Plunkett	05/01/2015
Treasurer	Roy Cavanaugh	05/01/2015
Trustee	Joseph Strahm	05/01/2015

ļ

12:28 PM 07/07/15 Accrual Basis

Yuma Lodge #1627 Balance Sheet As of April 30, 2015

	Apr 30, 15
ASSETS	
Current Assets Checking/Savings 1000.00 · Cash	
* 1005.00 · Checking - Lodge General Accoun 1025.00 · Petty Cash 1030.00 · Jumbo Business Cd	119,459 71 5,000 00 150,042 32
Total 1000.00 · Cash	274,502 03
Total Checking/Savings	274,502 03
Other Current Assets 1199.00 · Undeposited Funds 1300.00 · Inventory 1310.00 · Social Quarters Inventory	1,281 00 10,315.69
1315.00 · Kitchen Inventory	4,364 88
Total 1300.00 · Inventory	14,680 57
Total Other Current Assets	15,961.57
Total Current Assets	290,463 60
Fixed Assets 1700.00 · Buildings and Property 1705.00 · Lodge Home/Building 1710.00 · Other Property	828,609 60 4,200 00
1715.00 · Building Lease and Improvements	107,632.04
Total 1700.00 · Buildings and Property	940,441 64
1800.00 · Furniture and Equipment 1805.00 · Furniture, Fixtures & Equipment	114,373 34
Total 1800.00 · Furniture and Equipment	114,373 34
Total Fixed Assets	1,054,814 98
TOTAL ASSETS	1,345,278.58
LIABILITIES & EQUITY Liabilities Current Liabilities Other Current Liabilities 2200.00 · Payroll and Benefit Liabilities 2210.00 · Payroll Tax Liability	-1,635 94
Total 2200.00 · Payroll and Benefit Liabilities	-1,635 94
2500.00 · Due to Other Fraternal Units 2505.00 · Endowment - Moose Charities 2515.00 · ABCD due to MI	19 00 612.00
Total 2500.00 · Due to Other Fraternal Units	631.00
Total Other Current Liabilities	-1,004 94
Total Current Liabilities	-1,004 94
Total Liabilities	-1,004 94
Equity 3000.00 · Opening Bal Equity 3900.00 · Retained Earnings Net Income	977,319 04 390,828 68 -21,864 20
Total Equity	1,346,283 52
TOTAL LIABILITIES & EQUITY	1,345,278.58