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

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

20**15** 

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

▶ Information about Form 990 and its instructions is at www.irs.gov/form990. 2015, and ending 20 16 For the 2015 calendar year, or tax year beginning 05/01 D Employer identification number C Name of organization Xenia Lodge #1629, Loyal Order of Moose В Check if applicable Doing business as 31-0360080 Address change Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Name change Initial return 937-657-2721 947 Cincinnati Ave City or town, state or province, country, and ZIP or foreign postal code Final return/terminated G Gross receipts \$ Amended return (enia. Ohio 45385 H(a) is this a group return for subordinates? Yes No F Name and address of principal officer Application pending H(b) Are all subordinates included? 🔲 Yes 🔲 No If "No," attach a list (see instructions) 501(c)(3) 501(c) ( ) ◀ (insert no ) ☐ 4947(a)(1) or ☐ 527 Tax-exempt status Website: ▶ H(c) Group exemption number ▶ L Year of formation Form of organization Corporation Trust Association ☐ Other ▶ 1939 M State of legal domicile Part I Summary Briefly describe the organization's mission or most significant activities: Fraternalism Governance 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) . . . 3 3 Number of independent voting members of the governing body (Part VI, line 1b) 4 Activities & 8 Total number of individuals employed in calendar year 2015 (Part V, line 2a) 5 6 6 Total number of volunteers (estimate if necessary) 9 Total unrelated business revenue from Part VIII, columnico jine 10 7a 7a 0 Net unrelated business taxable income from Form 990-1, line 34-7b Pror Year Current Year Š Contributions and grants (Part VIII, line 1h) . Program service revenue (Part VIII, line 2g) 9 Investment income (Part VIII, column (A), lines 3,4 and 20 EN 10 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) Total expenses, Add lines 13-17 (must equal Part IX, column (A), line 25) 18 Revenue less expenses. Subtract line 18 from line 12 19 Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) . . 22 Net assets or fund balances. Subtract line 21 from line 20 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and comple te. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Here 500 ADMINISTRATOR MCC BULE Type or print name and title Print/Type preparer's name Check 🗸 if Paid self-employed P00626413 Gene E Randall Preparer Firm's EIN ▶ 31-1287462 Firm's name ► Randall's Income Tax Service Use Only 937-376-4263 Firm's address ▶ 901 Catherine St. Xenia, Oh 45385 Phone no May the IRS discuss this return with the preparer shown above? (see instructions) ✓ Yes 
☐ No



Cat. No 11282Y

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2015)

Part	Statement of Program Service Accomplishments  Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	Fraternalism
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	If "Yes," describe these new services on Schedule O.  Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	services?
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$180810.16 including grants of \$) (Revenue \$)
	The Lodge unites its members in the bond of fraternaty, benevolence and charity. This is accomplished through a year-round schedule of social and recreational activities for members and their families, estimated to number 257.
	year-round scriedule of social and recreational activities for members and their families, estimated to number 257.
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )
40	Table and the second of the se

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Page 2

Form **990** (2015)

	0 (2015) ¬			Page <b>3</b>
Part I	V Checklist of Required Schedules		Yes	г
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		res	No
	complete Schedule A	1	l	1
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		1
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		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		1
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		1
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	1	- <u>-</u>
	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		1
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		1
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		1
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e		✓
12 a	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.  Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	11f		<b>√</b>
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	12a		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13	<del></del>	<b>√</b>
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
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		✓
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		<b>√</b>
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	!	<b>√</b>
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		<u> </u>
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		<b>√</b>
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		<u>,</u>
		<u> </u>		<u> </u>

Part	V Checklist of Required Schedules (continued)			
			Yes	No
20 a		20a		✓
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 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		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23		
	\$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?	24b		1
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		1
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		1
25a	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		1
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		<b>✓</b>
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			,
07		26		<b>✓</b>
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		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		1
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		✓
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<b>✓</b>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M			
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	30		<b>/</b>
٥.	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		✓
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		<b>√</b>
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		✓
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓
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		1
36	<b>Section 501(c)(3) organizations.</b> 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		1
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? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	38		1

Part '				
<u> </u>	Check if Schedule O contains a response or note to any line in this Part V	•	•	
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
Ū	reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 6			
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)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		<b>✓</b>
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O At any time during the calendar year, did the organization have an interest in, or a signature or other authority	3b		
4a	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			j
	account)?	4a		✓
b	If "Yes," enter the name of the foreign country: ▶ N/A			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			l i
	(FBAR).			لـــا
_	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<b>✓</b>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b 5c		✓
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<b>5</b> C		<del> </del>
-	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		1
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			
L	and services provided to the payor?	7a 7b		<b>√</b>
b	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	70		<b></b> -
•	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7е		1
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		<b>√</b>
h 8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	7h		✓
Ü	sponsoring organization have excess business holdings at any time during the year?			<sup> </sup>
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			}
b 11	Section 501(c)(12) organizations. Enter:			i
'' a	Gross income from members or shareholders			i
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	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		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	13a		<b> </b>
а	Is the organization licensed to issue qualified health plans in more than one state?	ısa		
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			
c	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	]	✓
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		L
		Form	∩ みみり	(2015)

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below,	ond.		Page C
r al t	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule Q. S			
	Check if Schedule O contains a response or note to any line in this Part VI			. ☑
Secti	on A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 8	-		
	If there are material differences in voting rights among members of the governing body, or			ļ
	if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	ĺ		
b	Enter the number of voting members included in line 1a, above, who are independent . 1b o			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		1
3	Did the organization delegate control over management duties customarily performed by or under the direct			† <del>*                                   </del>
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		✓
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	ļ	<b>√</b>
6	Did the organization have members or stockholders?	6	<b> </b>	<b>✓</b>
7a	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?			1
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	7 <u>a</u>		<b>✓</b>
	stockholders, or persons other than the governing body?	7b		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		<del>                                     </del>	† <del>*</del>
	the year by the following:			
а	The governing body?	8a	1	
b	Each committee with authority to act on behalf of the governing body?	8b	1	<u> </u>
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			١,
Cocti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	9		<u> </u>
3000	on B. Policies (This Section B requests information about policies not required by the internal never	ue c	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	100	1
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,		$\vdash$	† <b>*</b>
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	✓	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			ļ
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		✓
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give use to conflicts?	12b		ļ
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	100		
13	Did the organization have a written whistleblower policy?	12c		1
14	Did the organization have a written document retention and destruction policy?	14		1
15	Did the process for determining compensation of the following persons include a review and approval by			Ť
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			ŀ
а	The organization's CEO, Executive Director, or top management official	15a		1
b	Other officers or key employees of the organization	15b		1
	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		-	,
<b>L</b>	with a taxable entity during the year?	16a		<b>  √</b>
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b	-	
Secti	on C. Disclosure	,	ш	L
17	List the states with which a copy of this Form 990 is required to be filed ▶			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	501	c)(3)s	only
	available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website Upon request Other (explain in Schedule O)	,		
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	erest	policy	y, and
20	financial statements available to the public during the tax year.	مصعطم		
20	State the name, address, and telephone number of the person who possesses the organization's books and re	corus		

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Form 990 (2015)

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

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

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 employees."
- 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.

C  Cot   C	Check this box if neither the organization no	r any relate	d org	anız			ompe	nsa	ted any currer	t officer, director	, or trustee.
Name and Title  Name and Title  Average hours per week (file arry) neurs for mode and the properties of the properties o					•	•					
Name and Title	(A)	(B)	(do n	ot ch			than a	one	(D)	(E)	<b>(F)</b>
Very companies   Very	Name and Title		box,	unles	s pe	rson	is both	n an			
(1) Doug McCauley 1 Administrator (2) Larry Parks 1 Governor 1 Junior Governor 1 Junior Governor (4) Richard Steiner 1 Junior Governor (5) Harold Fite 1 Treasurer (6) Dean Conley 1 Trustee (1 Year) (7) Donnie Kindle 1 Trustee (2 Years) (8) Garry Cook 1 Trustee (3 Years) (9) (10) (10) (11) (12) (13)											
(1) Doug McCauley 1 Administrator (2) Larry Parks 1 Governor 1 Junior Governor 1 Junior Governor (4) Richard Steiner 1 Junior Governor (5) Harold Fite 1 Treasurer (6) Dean Conley 1 Trustee (1 Year) (7) Donnie Kindle 1 Trustee (2 Years) (8) Garry Cook 1 Trustee (3 Years) (9) (10) (10) (11) (12) (13)		1	or India	Instr	<del>§</del>	ey ey	ag F	S			
(1) Doug McCauley 1 Administrator (2) Larry Parks 1 Governor 1 Junior Governor 1 Junior Governor (4) Richard Steiner 1 Junior Governor (5) Harold Fite 1 Treasurer (6) Dean Conley 1 Trustee (1 Year) (7) Donnie Kindle 1 Trustee (2 Years) (8) Garry Cook 1 Trustee (3 Years) (9) (10) (10) (11) (12) (13)			ec à		ě	emp	loye st	Per	(W-2/1099-MISC)		
(1) Doug McCauley 1 Administrator (2) Larry Parks 1 Governor 1 Junior Governor 1 Junior Governor (4) Richard Steiner 1 Junior Governor (5) Harold Fite 1 Treasurer (6) Dean Conley 1 Trustee (1 Year) (7) Donnie Kindle 1 Trustee (2 Years) (8) Garry Cook 1 Trustee (3 Years) (9) (10) (10) (11) (12) (13)		below dotted	역불	nal		оy	eom		,		and related
(1) Doug McCauley 1 Administrator (2) Larry Parks 1 Governor 1 Junior Governor 1 Junior Governor (4) Richard Steiner 1 Junior Governor (5) Harold Fite 1 Treasurer (6) Dean Conley 1 Trustee (1 Year) (7) Donnie Kindle 1 Trustee (2 Years) (8) Garry Cook 1 Trustee (3 Years) (9) (10) (10) (11) (12) (13)		line)	ıste	trus		8	pen				organizations
(1) Doug McCauley 1 Administrator (2) Larry Parks 1 Governor 3 Inchard Steiner 1 Junior Governor 4 Inchard Atkins 1 Prelate (5) Harold Fite 1 Treasurer (6) Dean Conley 1 Trustee (1 Year) (7) Donnie Kindle 1 Trustee (2 Years) (8) Garry Cook 1 Trustee (3 Years) (9) (10) (10) (11)			•	8			sated				
Administrator (2) Larry Parks 1 Governor (3) Richard Steiner 1 Junior Governor (4) Richard Atkins 1 Prelate (5) Harold Fite 1 Treasurer (6) Dean Conley 1 Trustee (1 Year) (7) Donnie Kindle Trustee (2 Years) (8) Garry Cook 1 Trustee (3 Years) (9) (10) (11) (12)		<del>                                     </del>	<b></b>								· · · · · · · · · · · · · · · · · · ·
(2) Larry Parks		11							}		
Governor   (3) Richard Steiner   1				_	_	_					
(3) Richard Steiner		11									
Junior Governor   (4) Richard Atkins   1						<b>├</b> ─	<u> </u>	├-			
(4) Richard Atkins       1         Prelate       1         (5) Harold Fite       1         Tressurer       1         (6) Dean Conley       1         Trustee (1 Year)       7) Donnie Kindle         (7) Donnie Kindle       1         Trustee (2 Years)       8         (8) Garry Cook       1         Trustee (3 Years)       9         (10)       (11)         (11)       (12)		<u> </u>	ł				1				
Prelate		<u> </u>		-	_		<u> </u>	-			· · · <del>-</del> · · · · · · · · · · · · · · · · · · ·
(5) Harold Fite 1 1		<b>1</b>			ŀ		l				
Treasurer (6) Dean Conley 1  Trustee (1 Year) (7) Donnie Kindle 1  Trustee (2 Years) (8) Garry Cook 1  Trustee (3 Years) (9) (10) (11) (12)	<del></del>	<del> </del>		-	-	-	<b> </b>		<u> </u>		
(6) Dean Conley 1 1		ļ <u>1</u>									
Trustee ( 1 Year) (7) Donnie Kindle 1 Trustee (2 Years) (8) Garry Cook 1 Trustee (3 Years) (9) (10) (11) (12) (13)		-			-	$\vdash$	-	-	<del> </del>		<del></del>
(7) Donnie Kindle 1 1		ļ <u>1</u>	ł						1		
Trustee (2 Years) (8) Garry Cook 1 Trustee (3 Years) (9) (10) (11) (12) (13)							-	-			
(8) Garry Cook 1 Trustee (3 Years) (9) (10) (11) (12) (13)		<del></del>	ĺ								
Trustee (3 Years) (9) (10) (11) (12) (13)		<del>                                     </del>	<del>                                     </del>	<u> </u>			<del> </del>	$\vdash$			<del></del>
(10) (11) (12) (13)		<del> </del>	1							}	
(10) (11) (12) (13)		<del> </del>		$\vdash$				1-	<del> </del>		· · · · · · · · · · · · · · · · · · ·
(11) (12) (13)	(9)	<del> </del>	1								
(11) (12) (13)	(10)	<u> </u>						Г			
(12)		T	]				İ				
(12)	(11)			Г							
(13)		<u> </u>	ļ	_		<u> </u>	ļ	1_			
(13)	(12)	ļ									
(14)		1	<del> </del>	<b> </b>	ļ	ļ		-			······································
(14)	(13)	<b>4</b>	-								
(14)		<del>                                     </del>		ļ	<u> </u>	$\vdash$	_	┼	<b> </b>	-	<del> </del>
	(14)	<b></b>	-								

Part	VI Section A. Officers, Directors, Trust	ees, Key E	mploy	/ees		nd F C)	lighe	st C	ompensated E	mployees (	continu	ed)		
	(4)	(B)				رہ ition				4=1			_	
	(A) Name and title	(B) Average			neck	more	than o		(D) Reportable	(E) Reportab			(F)	,
	Name and tide	hours per					is both or/trus		compensation	compensation			imated ount of	
		week (list any hours for						, —'-	from	related			ther	
		related	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization	organizatii (W-2/1099-N			ensation	חנ
		organizations	cto	nton	٦.	夏	yee	4	(W-2/1099-MISC)		1	orga	nızatıoı	
		below dotted line)	ੋ <u>ੜ</u> ੍ਹ	al tr		oy e	g						related nzation	
			stee	uste		[ " .	ens	ĺ				O.gu,	ii Lutioi	
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(15)												··· ···		
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(16)														
3														
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3														
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X														
(22)														
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3-17			1			İ								
(24)								$\vdash$						*
S=.37										•				
(25)					-				<del></del>					
3==7											ł			
1b	Sub-total			_				<b>—</b>						
С	Total from continuation sheets to Part							•					_	
d	Total (add lines 1b and 1c)	-						•						
2	Total number of individuals (including but							2) W	ho received mi	ore than \$1	00 000	of		
_	reportable compensation from the organi			000	, 1130	cu e	abov.	., <b></b>	no received in	ore triair wi	00,000	OI .		
									· · · · · · · · · · · · · · · · · · ·	<del></del>			Yes	No
3	Did the organization list any former of	ficer, direc	tor, o	r tr	uste	e.	kev e	ame	lovee, or high	est compe	nsated		103	1.0
	employee on line 1a? If "Yes," complete S											3	i	1
4	For any individual listed on line 1a, is the	sum of rea	oortal	ole d	com	per	satio	n a	nd other comp	ensation fr	om the			<u> </u>
•	organization and related organizations												ĺ	
	ındıvıdual											4		1
5	Did any person listed on line 1a receive o									ation or inc	dividual			<del>  •</del>
•	for services rendered to the organization?											5		7
Section	on B. Independent Contractors							_		·			·	<u> </u>
1	Complete this table for your five highest of	compensate	ed inc	lepe	ende	ent	contr	acto	ors that receive	d more tha	n \$100	.000 of	:	
•	compensation from the organization. Rep													ax
	year.							,	<b>3</b>		3			
	(A)							Γ	(B)			(C)		
	Name and business add	ress							Description of s	ervices	(	Compens		
			-				-		<del></del>					
								$\vdash$						
	<del></del>			<del></del>				$\vdash$	<del></del>					<del></del>
								-			-			
2	Total number of independent contractor	rs (includir	ng hu	t n	ot I	imıt	ed to	th	ose listed ah	ove) who				
_	received more than \$100,000 of compens									,				

Par	VIII	Check if Schedule O contains a response or note to	o any line in this	Part VIII		
	·	Check if Schedule O contains a response or note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D)  Revenue excluded from tax under sections 512-514
ts st	1a	Federated campaigns 1a				
irar	b	Membership dues 1b	]			
S, G	С	Fundraising events 1c		}		
ar Sign	d	Related organizations 1d	] [			
Contributions, Gifts, Grants and Other Similar Amounts	е	Government grants (contributions) 1e		į		
tior sr S	f	All other contributions, gifts, grants,				
ੜ੍ਹੇ €		and similar amounts not included above 1f				
d tr	g	Noncash contributions included in lines 1a-1f: \$				
	h	Total. Add lines 1a-1f				
Program Service Revenue	_	Business Code	ļ_		-	}
eVe	2a	Membership Activities	254527.57	254527.57		
e Œ	b	Dues	3323.00			3323.00
Z;	C	Ohio Lottery Commision	7936.96			7936.96
Se	d				· · · · · · · · · · · · · · · · · · ·	<u> </u>
ram	e	All all and an area and a second		<u>-</u>		<del> </del>
Ţ0	f	All other program service revenue .  Total. Add lines 2a-2f		<del></del>		<u> </u>
	3	Total. Add lines 2a-2f	265787.68	· · · · · · · · · · · · · · · · · · ·		T
	3	and other similar amounts)				
	4	Income from investment of tax-exempt bond proceeds			<del></del>	
	5	•	<del></del>		<del></del>	
	"	Royalties	<del> </del>			<del> </del>
	6a	Gross rents	1 1	į		
	b	Less rental expenses	1			
	c	Rental income or (loss)	1			
	d	Net rental income or (loss)				-
	7a	Gross amount from sales of (i) Securities (ii) Other				
	· ·	assets other than inventory	1 1			
	Ь	Less, cost or other basis	1			
	1	and sales expenses .				
	C	Gain or (loss)	1 1			†
	d	Net gain or (loss)	1		-	Ì
Other Revenue	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c).  See Part IV, line 18				
흪		· · · · · · · · · · · · · · · · · · ·				
Ò		Less: direct expenses b  Net income or (loss) from fundraising events . ▶				
	9a		<del>                                     </del>			<del>                                     </del>
	""	See Part IV, line 19 a	]			
	Ь	Less: direct expenses b	1			
	°	Net income or (loss) from gaming activities	1 1		-	
	_	Gross sales of inventory, less		······································		
		returns and allowances a		•		
	l b	Less: cost of goods sold b	1			
	_ c	Net income or (loss) from sales of inventory	<del> </del>	:		-
	<b>├</b>	Miscellaneous Revenue Business Code	<del> </del>			
	11a		† ~ · · · 1			
	Ь					· · · · · · · · · · · · · · · · · · ·
	C					
	d	All other revenue				
	е	<b>Total.</b> Add lines 11a-11d ▶				
	12	Total revenue. See instructions	265787,68	254527.57		11259,96
						Form <b>990</b> (2015)

Part IX	Statement of Functional Expenses	

Sectio	n 501(c)(3) and 501(c)(4) organizations must con				
	Check if Schedule O contains a respon				<u> </u>
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
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				
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	34941.89			
9	Other employee benefits				
10	Payroll taxes	12986.53			
11 a	Fees for services (non-employees):  Management				
b	Legal				
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				,,,,
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)				· · · · · · · · · · · · · · · · ·
12	Advertising and promotion				
13	Office expenses	10297.05			
14 15	Information technology				
16	Royalties	47452.00		<del></del>	
17	Travel	17153.68 4294.88			
18	Payments of travel or entertainment expenses	4294.88	<del></del> · · · · · · · · · · · · · · · · ·		
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .				
20 21	Interest			<del></del>	
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	Supplies and Misc. Expenses	9348.89			
b	Donation Expense	25890.44			
С	Gaming Expenses	41680.30			
d	Merchandise	74820.27			
е	All other expenses	24216.50			
25	Total functional expenses. Add lines 1 through 24e	255630.43			
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 following SOP 98-2 (ASC 958-720)				

P	art X				
		Check if Schedule O contains a response or note to any line in this Pa		<u> </u>	<u> </u>
			<b>(A)</b> Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	13592.04	1	9401.67
	2	Savings and temporary cash investments	40.00	2	40.00
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	635.00	4	635.00
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and			
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
Ş.		organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
Ä	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a 266038.65			
	þ	Less: accumulated depreciation 10b	266038.65		266038.65
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	· · · · · · · · · · · · · · · · · · ·
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	280305.69	16	276115.32
	17	Accounts payable and accrued expenses	1144.00	17	3492.00
	18	Grants payable		18	····
	19	Deferred revenue		<del></del>	
	20	Tax-exempt bond liabilities		20	<del></del>
45	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and			
Ē		disqualified persons. Complete Part II of Schedule L	<del>-</del>	22	
<u>.</u>	23	Secured mortgages and notes payable to unrelated third parties	17642.88	23	10942.88
_	24	Unsecured notes and loans payable to unrelated third parties	17042.00	24	10942.00
	25	Other liabilities (including federal income tax, payables to related third	· · · · · · · · · · · · · · · · · · ·		
	25	parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	18786.88	26	14434.88
		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and			
Š		complete lines 27 through 29, and lines 33 and 34.			
aŭ	27	Unrestricted net assets		27	
ä	28	Temporarily restricted net assets		28	
ᅙ	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
8	30	Capital stock or trust principal, or current funds		30	
set	31	Paid-in or capital surplus, or land, building, or equipment fund	·, · · · · · · · · · · · · · · · · · ·	31	
As	32	Retained earnings, endowment, accumulated income, or other funds.	261518.81	32	261680.44
et et	33	Total net assets or fund balances	261518.81	<del></del>	261680.44
~	34	Total liabilities and net assets/fund balances	280305.69		276115.32
_					Form <b>990</b> (2015)

If the organization changed either its oversight process or selection process during the tax year, explain in

За

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Form 990 (2015)

**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.

Schedule O.

#### SCHEDULE D (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990.

OMB No. 1545-0047 2015

Department of the Treasury Internal Revenue Service ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name o	the organization		Employer identification number
Xenia L	odge #1629, Loyal Order of Moose		31-0360080
Par	Organizations Maintaining Donor Adv	rised Funds or Other Similar Fun	ds or Accounts.
	Complete if the organization answered '		
		(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) .		1
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor	advisors in writing that the assets h	eld in donor advised
	funds are the organization's property, subject to th	e organization's exclusive legal contro	ol? 🗌 Yes 🗌 No
6	Did the organization inform all grantees, donors, a	and donor advisors in writing that grain	nt funds can be used
	only for charitable purposes and not for the benef	fit of the donor or donor advisor, or f	or any other purpose
	conferring impermissible private benefit?	<u> </u>	· · · · · · · 🗌 Yes 🗌 No
Pari	Conservation Easements.		
	Complete if the organization answered '	"Yes" on Form 990, Part IV, line 7.	<u> </u>
1	Purpose(s) of conservation easements held by the	organization (check all that apply).	
	Preservation of land for public use (e.g., recrea	tion or education)   Preservation o	f a historically important land area
	☐ Protection of natural habitat	☐ Preservation o	f a certified historic structure
	☐ Preservation of open space		
2	Complete lines 2a through 2d if the organization he	eld a qualified conservation contribution	on in the form of a conservation
	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easement	ts	2b
c	Number of conservation easements on a certified I		
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, tran	sferred, released, extinguished, or teri	minated by the organization during the
	tax year ▶		
4	Number of states where property subject to conse		
5	Does the organization have a written policy re	garding the periodic monitoring, ins	spection, handling of
	violations, and enforcement of the conservation ea		
6	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing	conservation easements during the year
	<b>&gt;</b>		
7	Amount of expenses incurred in monitoring, inspecting	ng, handling of violations, and enforcing	conservation easements during the year
	▶\$		
8	Does each conservation easement reported on line	2(d) above satisfy the requirements o	f 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		nancial statements that describes the
	organization's accounting for conservation easem-		
Par	•		
	Complete if the organization answered		
1a	If the organization elected, as permitted under SF	FAS 116 (ASC 958), not to report in its	s revenue statement and balance sheet
	works of art, historical treasures, or other similar	r assets held for public exhibition, e	ducation, or research in furtherance of
	public service, provide, in Part XIII, the text of the		
b	If the organization elected, as permitted under S	SFAS 116 (ASC 958), to report in its	revenue statement and balance sheet
	works of art, historical treasures, or other simila		ducation, or research in furtherance of
	public service, provide the following amounts related	=	
	(i) Revenue included on Form 990, Part VIII, line 1		<b>▶</b> \$
	(ii) Assets included in Form 990, Part X		<b>▶</b> \$
2	If the organization received or held works of art	t, historical treasures, or other simila	r assets for financial gain, provide the
	following amounts required to be reported under S		
а	Revenue included on Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		<b>▶</b> \$

Part	Organizations Maintaining	Collections of	Art, His	torical 1	reasures,	or Ot	her Similar As	sets (continued)
3	Using the organization's acquisition, collection items (check all that apply):	accession, and oth						
а	☐ Public exhibition		d	□ Loan	or exchange	progr	ams	
b	☐ Scholarly research							
c	☐ Preservation for future generations	s	_					
4	Provide a description of the organiza		and expla	an how t	hev further th	he ora	anızatıon's exen	not purpose in Part
	XIII.		•		,	J		, , , , , , , , , , , , , , , , , , , ,
5	During the year, did the organization	solicit or receive	donation	s of art,	historical tre	asures	s, or other simila	ır
	assets to be sold to raise funds rather	r than to be mainta	ined as p	part of the	e organizatio	n's co	llection?	☐ Yes ☐ No
Part	IV Escrow and Custodial Arra							
	Complete if the organization	answered "Yes"	' on For	m 990, F	Part IV, line	9, or	reported an arr	ount on Form
	990, Part X, line 21.							
1a		, custodian or oth	er interm	nediary fo	or contribution	ons or	other assets no	ot
	included on Form 990, Part X?							☐ Yes ☐ No
b	If "Yes," explain the arrangement in P	art XIII and comple	ete the fo	llowing to	able:			
							Aı	mount
C	Beginning balance					1c	<del></del>	<del></del>
d	Additions during the year					1d	<del></del>	
e	Distributions during the year					1e		
f	Ending balance					1f		
2a	Did the organization include an amou							
Par	If "Yes," explain the arrangement in P  Endowment Funds.	art Alli. Check nere	e ir the ex	cpianatio	n nas been p	rovide	on Part XIII.	<u> </u>
rai	Complete if the organization	answered "Ves"	on For	~ 000 E	Port IV line	10		
	Complete if the organization	(a) Current year		or year	(c) Two years		(d) Three years back	(e) Four years back
1a	Beginning of year balance	(a) canon your	(2)		(c) (wo years	Duck	(a) Three years back	(c) i our years buck
b	Contributions		<del></del>		· · · · · · · · · · · · · · · · · · ·			
c	Net investment earnings, gains, and							<del> </del>
•	losses				ł	ļ		
d	Grants or scholarships		· ·· ···					
e	Other expenditures for facilities and		<del></del>					
	programs							
f	Administrative expenses							···-
g	End of year balance			·· ·				
2	Provide the estimated percentage of t	the current year en	d balanc	e (line 1g	, column (a))	held a	ns:	
а	Board designated or quasi-endowme	nt ▶	%					
þ	Permanent endowment ▶	<u></u> %						
C	Temporarily restricted endowment ▶	%						
	The percentages on lines 2a, 2b, and							
3a	Are there endowment funds not in the	e possession of th	e organi	zation tha	at are held a	nd adı	ministered for th	e
	organization by:							Yes No
	(i) unrelated organizations							3a(i)
	(ii) related organizations							3a(ii)
b	If "Yes" on line 3a(II), are the related o	-	•					3b
4	Describe in Part XIII the intended uses		n's endo	wment for	unds.		<del> </del>	
Part			,	000 [	D = 4 D 4 P = =	44.4	0 F 000	Deat V. Cara 40
	Complete if the organization							<del></del>
	Description of property	(a) Cost or oth			or other basis ther)		Accumulated epreciation	(d) Book value
1a	Land	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						24000.00
b	Buildings	•			24699.60			24699.60 222296.40
0	Leasehold improvements	.			19042.55			19042.55
d	Equipment	·			19042.33			19042,33
e	Other				-	<del></del>		
	Add lines 1a through 1e. (Column (d) n	nust equal Form 99	0. Part	C. column	n (B), line 10d	:.) .	•	266038.65

Part VII	Investments — Other Securities.  Complete if the organization answe	red "Yes" on For	m 990 Part IV lir	ne 11b. See Form	990. Part X. line 12
	(a) Description of security or category (including name of security)		(b) Book value	(c) Met	hod of valuation -of-year market value
(1) Financial	derivatives				
(2) Closely-t	eld equity interests				
(3) Other					
(A)					
(B)					
(C)					
(D)			<u> </u>		
(E)					<del> </del>
(F) (G)					
(H)			<del> </del>	·	·······
	o) must equal Form 990, Part X, col. (B) line 12.) ▶			<b>+</b>	
Part VIII	Investments—Program Related.			J	
Tark Tark	Complete if the organization answe	red "Yes" on For	m 990, Part IV, lir	ne 11c. See Form	990, Part X, line 13.
	(a) Description of investment		(b) Book value	(c) Me	thod of valuation: -of-year market value
(1)					······································
(2)					
(3)					
(4)					
(5)					•
(6)					
(7)		,			
(8)				ļ	
(9)	(5 000 D (V (7))			<del></del>	
	b) must equal Form 990, Part X, col. (B) line 13.)		<u> </u>	1	
Part IX	Other Assets. Complete if the organization answer	red "Yes" on Fo	rm 990, Part IV, III	ne 11d. See Form	990, Part X, line 15.
	(a) D	escription			(b) Book value
(1)					
(2)					
(3)					
(4)				·	
(5)					
(6)				·	
(8)					
(9)			······································		
Total. (Colu	mn (b) must equal Form 990, Part X, col. Other Liabilities.	(B) line 15.)			
	Complete if the organization answer	ered "Yes" on Fo	rm 990, Part IV, III	ne 11e or 11f. Se	e Form 990, Part X,
1.	(a) Description of liability	(b) Book value			
(1) Federal II	ncome taxes				
(2)					
(3)					
(4)					
(5)					
(6)		,			
(7)					
(8)					
(9)	N				
	b) must equal Form 990, Part X, col. (B) line 25 )  r uncertain tax positions. In Part XIII, provide	the toyt of the fa-t-	ote to the ergenization	on's financial statem	ente that reports the
organization	s liability for uncertain tax positions under F	IN 48 (ASC 740). Ch	eck here if the text of	the footnote has bee	en provided in Part XIII

	Reconciliation of Revenue per Audited Financial Statements With Revenue per	r Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	· · · · · · · · · · · · · · · · · · ·
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:	
а	Net unrealized gains (losses) on investments	
b	Donated services and use of facilities	
C	Recoveries of prior year grants	_
d	Other (Describe in Part XIII.)	
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.)	<u> </u>
С	Add lines <b>4a</b> and <b>4b</b>	4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses p	er Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	
1	Total expenses and losses per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	
а	Donated services and use of facilities	
b	Prior year adjustments	]
C	Other losses	
d	Other (Describe in Part XIII.)	
9	Add lines <b>2a</b> through <b>2d</b>	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b	Other (Describe in Part XIII.)	
C	Add lines <b>4a</b> and <b>4b</b>	4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5
Part	XIII Supplemental Information.	
Part Provid	Supplemental information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2	b; Part V, line 4; Part X, line
Part Provid	XIII Supplemental Information.	b; Part V, line 4; Part X, line
Part Provid	Supplemental information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2	b; Part V, line 4; Part X, line information.
Part Provid	XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2 t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional in the second s	b; Part V, line 4; Part X, line information.
Part Provid	XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2 t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional in the second s	b; Part V, line 4; Part X, line information.
Part Provid	XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2 t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional to the complete this part to the complete this part to provide any additional to the complete this part to the	b; Part V, line 4; Part X, line information.
Part Provid	XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2 t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional to the complete this part to the complete this part to provide any additional to the complete this part to the	b; Part V, line 4; Part X, line information.
Part Provid	XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2 t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional in the complete the part to provide any additional in the complete the part to provide any additional in the complete the part to provide any additional in the complete the part to provide any additional in the complete the part to provide any additional in the complete the part IV, lines 1b and 2 to 2 to 3 to 3 to 3 to 3 to 3 to 3 to	b; Part V, line 4; Part X, line information.
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Part Provid	XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2 t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional in the complete the part to provide any additional in the complete the part to provide any additional in the complete the part to provide any additional in the complete the part to provide any additional in the complete the part to provide any additional in the complete the part IV, lines 1b and 2 to 2 to 3 to 3 to 3 to 3 to 3 to 3 to	b; Part V, line 4; Part X, line information.
Part Provid	XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2 t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional in the complete the part to provide any additional in the complete the part to provide any additional in the complete the part to provide any additional in the complete the part to provide any additional in the complete the part to provide any additional in the complete the part IV, lines 1b and 2 to 2 to 3 to 3 to 3 to 3 to 3 to 3 to	b; Part V, line 4; Part X, line information.
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Part Provid	XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2 t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional in the complete this part to provide any additional in the complete this part to provide any additional in the complete this part to provide any additional in the complete this part to provide any additional in the complete this part to provide any additional interest and the complete this part to provide any additional interest and the complete this part to provide any additional interest and the complete this part to provide any additional interest and the complete this part to provide any additional interest and the complete this part to provide any additional interest and the complete this part to provide any additional interest and the complete this part to provide any additional interest and the complete this part to provide any additional interest and the complete this part to provide any additional interest and the complete this part to provide any additional interest and the complete this part to provide any additional interest and the complete this part to provide any additional interest and the complete this part to provide any additional interest and the complete this part to provide any additional interest and the complete the comp	b; Part V, line 4; Part X, line information.
Part	XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2 t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional in the complete this part to provide any additional in the complete this part to provide any additional in the complete this part to provide any additional in the complete this part to provide any additional in the complete this part to provide any additional interest and the complete this part to provide any additional interest and the complete this part to provide any additional interest and the complete this part to provide any additional interest and the complete this part to provide any additional interest and the complete this part to provide any additional interest and the complete this part to provide any additional interest and the complete this part to provide any additional interest and the complete this part to provide any additional interest and the complete this part to provide any additional interest and the complete this part to provide any additional interest and the complete this part to provide any additional interest and the complete this part to provide any additional interest and the complete this part to provide any additional interest and the complete this part to provide any additional interest and the complete the comp	b; Part V, line 4; Part X, line information.

Schedule D (Form 490) 2015 Part XIII Supplemental Information (continued)					
Part XIII	Supplemental Information (continued)	Page <b>5</b>			
· · · · · · · · · · · · · · · · · · ·					
		·			
		·			
- <b>-</b>					

## SCHEDULE D (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990.

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

OMB No 1545-0047

Name o	f the or	ganization		En	nployer identif	ication number
Xenia l	Lodge i	#1629, Loyal Order of Moose				31-0360080
Par	t I	Organizations Maintaining Donor Adv			or Accou	nts.
	<del></del> .	Complete if the organization answered	<del></del>		<del> </del>	
			(a) Donor advised	l funds	(b) Fund	ds and other accounts
1		number at end of year				<del></del>
2		egate value of contributions to (during year)			<del> </del>	
3	Aggre	egate value of grants from (during year) .			<u></u>	
4	Aggre	egate value at end of year				
5		ne organization inform all donors and donor				
		are the organization's property, subject to the	•			
6		ne organization inform all grantees, donors, a				
		for charitable purposes and not for the bene				
		rring impermissible private benefit?		· · · · ·	· · · ·	· · L Yes L No
Par	t III	Conservation Easements.	‴			
		Complete if the organization answered				······································
1	•	ose(s) of conservation easements held by the				
		reservation of land for public use (e.g., recrea			-	-
	_	rotection of natural habitat	∐ F	Preservation of a	certified his	toric structure
		reservation of open space				
2		olete lines 2a through 2d if the organization h	eld a qualified conservat	tion contribution		
		ment on the last day of the tax year.				eld at the End of the Tax Year
а			· · · · · · · · ·			
b		acreage restricted by conservation easemen				
C		per of conservation easements on a certified				
d		per of conservation easements included in				
		<u> </u>	· · · · · · · · ·			
3		per of conservation easements modified, tran	sferred, released, exting	juished, or termin	ated by the	organization during the
	tax ye					
4		per of states where property subject to conse				
5		the organization have a written policy re				
		ions, and enforcement of the conservation ea				
6	Staff a	and volunteer hours devoted to monitoring, inspec	ting, handling of violations	, and enforcing cor	servation eas	sements during the year
_	<u> </u>	······				
7		int of expenses incurred in monitoring, inspecti	ng, handling of violations,	and enforcing co	nservation ea	asements during the year
_	<b>▶</b> \$	······	0(1) 1 11 11			(4)(7)()
8		each conservation easement reported on line				
_						0010
9		rt XIII, describe how the organization reports				
		ice sheet, and include, if applicable, the text of nization's accounting for conservation easem		ganization's iman	ciai stateme	ents that describes the
					than Cimaile	
Par	t III	Organizations Maintaining Collection			tner Simila	ar Assets.
		Complete if the organization answered		<del>~</del>		
1a		organization elected, as permitted under SF				
		s of art, historical treasures, or other simila c service, provide, in Part XIII, the text of the				
	•	•				
þ		organization elected, as permitted under S		•		
		s of art, historical treasures, or other simila		exhibition, eauc	ation, or re	search in furtherance o
	•	c service, provide the following amounts rela	•		_	•
	(i) R	evenue included on Form 990, Part VIII, line 1		· · · · · ·	🟲	\$
_	(ii) As	ssets included in Form 990, Part X				\$
2		e organization received or held works of art				nancial gain, provide the
		ving amounts required to be reported under S				•
а		nue included on Form 990, Part VIII, line 1				\$
b		ts included in Form 990, Part X			<u> ▶</u>	\$
For Pa	aperwo	rk Reduction Act Notice, see the Instructions fo	or Form 990.	Cat. No. 52283D		Schedule D (Form 990) 2015

Schedul	e D (F	om 9	990)	201	5
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raue	_

Part	III Organizations Maintaining	Coll	ections of	Art, His	torical 1	reasures,	or O	ther Similar A	ssets (continued)
3	Using the organization's acquisition, collection items (check all that apply):	acces	ssion, and o	ther reco	rds, chec	k any of th	e follo	wing that are a	significant use of its
а	☐ Public exhibition			d	☐ Loan	or exchang	e prog	ırams	
b	Scholarly research			е	☐ Othe	r <u></u>			
C	Preservation for future generations								
4	Provide a description of the organiza XIII.	tion's	collections	and expl	ain how t	hey further	the or	ganization's exe	empt purpose in Part
5	During the year, did the organization	solici	it or receive	donation	s of art,	historical tr	easure	s, or other sim	ılar
	assets to be sold to raise funds rather			ained as	part of the	e organizati	on's c	ollection? .	· 🔲 Yes 🗌 No
Par	Complete if the organization 990, Part X, line 21.			" on For	m 990, I	Part IV, line	9, or	reported an a	mount on Form
1a	Is the organization an agent, trustee included on Form 990, Part X?	, cust	odian or oth	ner intern	nediary fo	or contribut	ions o	r other assets	not Yes No
b	If "Yes," explain the arrangement in P	art XII	I and compl	ete the fo	llowing ta	able:			
							<u> </u>		Amount
C	Beginning balance						10		
d	Additions during the year						10		
e f	Distributions during the year Ending balance						16		
2a	Did the organization include an amount						1		hu? □ Vaa □ Na
	If "Yes," explain the arrangement in P	art XII	I. Check her	e if the e	xolanatio	n has been	provid	ed on Part XIII	iy: 🗀 Tes 🗀 No
	t V Endowment Funds.			<u> </u>		11100 00011	provid	od om rane Am	· · · · · ·
	Complete if the organization	ans	wered "Yes	" on For	m 990, f	art IV, line	10.		
		(a)	Current year	<b>(b)</b> Pri	or year	(c) Two years	s back	(d) Three years ba	ck (e) Four years back
1a	Beginning of year balance								
b	Contributions								
С	Net investment earnings, gains, and losses								
d	Grants or scholarships								
е	Other expenditures for facilities and								
	programs	ļ							
f	Administrative expenses			ļ	· · · · · · · · · · · · · · · · · · ·				
g	End of year balance	<u> </u>		<u> </u>				L	
2	Provide the estimated percentage of t		rrent year er	nd baland	e (line 1g	, column (a)	) held	as:	•
a	Board designated or quasi-endowment Permanent endowment ▶			%					
b	Temporarily restricted endowment	%	%						
·	The percentages on lines 2a, 2b, and	2c sh		nn%					
За	Are there endowment funds not in the	e pos	session of th	ne organi	zation tha	at are held a	and ac	lministered for t	he
	organization by:	-		3					Yes No
	(i) unrelated organizations					. <i></i> .			3a(i)
	(ii) related organizations								3a(ii)
b	If "Yes" on line 3a(ii), are the related o								3b
4	Describe in Part XIII the intended uses			on's endo	owment fu	unds.			
Part	VI Land, Buildings, and Equip								
<del></del>	Complete if the organization	ansy							
<u></u>	Description of property		(a) Cost or ot (investm		, , ,	r other basis ther)		Accumulated epreciation	(d) Book value
1a	Land	. [				24699.60			24699.60
b	Buildings	.				222296.40			222296.40
C	Leasehold improvements	.	<del> </del>			19042.55			19042.55
d	Equipment	.							
E Total	Other	·	aud Earn O	00 0	<u> </u>	(D) li 10		+	
i Orali	Add intes ta unough re. (Columni (a) n	iust e	чиаі готт 9	συ, raπ /	s, column	ווחe וU, ווחe ו	C.j.	<b></b>	266038.65

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See   (a) Description of security or category (including name of security)   (b) Book value	(c) Method of valuation or end-of-year market value
(2) Closely-held equity interests	
(3) Other (A) (B) (C) (D)	
(A) (B) (C) (D)	
(A) (B) (C) (D)	
(C) (D)	
(D)	
(F)	
(G)	
(H)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	· · · · · · · · · · · · · · · · · · ·
Part VIII Investments—Program Related.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See	Form 990, Part X, line 13.
(a) Description of investment (b) Book value	(c) Method of valuation or end-of-year market value
(1)	
(2)	
(3)	
(4)	<del>,</del>
(5)	
(6)	
(7)	
(8)	
(9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13 ) ▶	
Part IX Other Assets.	
Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See	Form 990, Part X, line 15.
(1)	(E) BOOK VALIBO
(2)	· · · · · · · · · · · · · · · · · · ·
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	f. See Form 990, Part X,
1. (a) Description of liability (b) Book value	
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9) Total (Column (h) must count Form 900, Part Y col. (P) line 25.)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶  2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial state.	tatements that reports the
organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote li	

Part			Return.
	Complete if the organization answered "Yes" on Form 990,		· · · · · · · · · · · · · · · · · · ·
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:		
а	Net unrealized gains (losses) on investments	2a	_
b	Donated services and use of facilities	<del></del>	_
C	Recoveries of prior year grants	2c	_
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d		2e
3	Subtract line <b>2e</b> from line <b>1</b>		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		_
b	Other (Describe in Part XIII.)		4
_c	Add lines <b>4a</b> and <b>4b</b>		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		5
Part	<del>-</del>		er Heturn.
	Complete if the organization answered "Yes" on Form 990, Total expenses and losses per audited financial statements		T-2-T-
1			1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:  Donated services and use of facilities	0-	
a			
b	Prior year adjustments	· · · · · · · · · · · · · · · · · · ·	-
C	Other losses		-
d			120
е 3	Add lines <b>2a</b> through <b>2d</b>		2e   3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	i	3
	Investment expenses not included on Form 990, Part VIII, line 7b	40	
a b	Other (Describe in Part XIII.)		-
_	Add lines <b>4a</b> and <b>4b</b>		4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lines	ne 18 )	5
	XIII Supplemental Information.		
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a ar	nd 4; Part IV, lines 1b and 2	b; Part V, line 4; Part X, line
2; Parl	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this par	t to provide any additional ii	nformation.

chedule D (Form 990) 2015 Page 5 Part XIII Supplemental Information (continued)						
n (continued)	art XIII Supplemental Info					
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#### SCHEDULE Q (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

Open to Public

Department of the Treasury

▶ Attach to Form 990 or 990-EZ.

Internal Revenue Service	► Information about Schedule O (Form 990 of 990-E2) and its instructions is at www	
Name of the organization		Employer identification number
Kenia Lodge #1629, Lo	oyal Order of Moose	31-0360080
Part VI, Section B, 11E	3. The Treasurer and President Each review the form for its contents and to dete	rmine if entries are correct.
	All I	
Part VI, Section C, 19.	All docuements were available at open meetings of the members and guest.	

Schedule O (Form 990 or 990-EZ) (2015)	•	Page 2
Name of the organization	Employer identification number	
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Schedule O (Form 990 or 990-EZ) (2015)