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## EXTENDED TO NOVEMBER 15, 2017

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

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.lrs.gov/form990.

Open to Public Inspection

A F	or the	2016 calendar year, or tax year beginning	and	ending				
B c	heck if	C Name of organization			D Employer identific	ation number		
	Addre chang	IMPROVED ORDER OF REDMEN 0004						
	]Name ]chang	Doing business as			92-00	09447		
	]initial return	Number and street (or P.O. box if mail is not delivered to street addres	ss)	Room/suite	E Telephone number			
	Final	PO BOX 5793	·		(907)	225-3050		
JF	termin ated		al code		G Gross receipts \$	1,438,337.		
	Amen				H(a) Is this a group ref			
	Applic		IS		for subordinates?			
	pendu	PO BOX 5793, KETCHIKAN, AK 99901			H(b) Are all subordinates ind	· — —		
1 7	27.07	empt status:	4947(a)(1)	or 527	1 ' '	ist. (see instructions)		
		te: N/A		<u>v. L</u>	H(c) Group exemption	·		
			er > LOD	GE I Year		State of legal domicile: AK		
	rt I	Summary		<u> </u>	0.101111daton: 2500, 111	Otato Or logal dollistic, 2 222		
4	1	Briefly describe the organization's mission or most significant activities	s. TO I	NSPIRE	A GREATER I	LOVE FOR		
Activities & Governance		THE UNITED STATES OF AMERICA AND TH						
'n		Check this box  if the organization discontinued its operation						
Ve		Number of voting members of the governing body (Part VI, line 1a)	•		.  3	8		
Ö		Number of independent voting members of the governing body (Part	VI. line 1b)	•	4	8		
<b>ა</b> ნ		Total number of individuals employed in calendar year 2016 (Part V, lir			5	0		
itie		Total number of volunteers (estimate if necessary)	,	•	6			
cţi		Total unrelated business revenue from Part VIII, column (C), line 12			7a			
Ă		Net unrelated business taxable income from Form 990-T, line 34			7b	0.		
		Net difference business taxable income from 1 on 1 oct 1, into 04	<del></del>		Prior Year	Current Year		
	8	Contributions and grants (Part VIII, line 1h)			5,165.	9,057.		
() ② ?U Revenue		Program service revenue (Part VIII, line 2g)		0.	0.			
ခန္		Investment income (Part VIII, column (A), lines 3, 4, and 7d)			94,333.	47,676.		
<b>≈</b> %		• • • • • • • • • • • • • • • • • • • •		<b>├</b> ─	48,163.	46,040.		
_		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			147,661.	102,773.		
3		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A	4), III (E 12)		8,873.	10,632.		
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		<u> </u>	0.	0.		
Expenses Expenses	14	Benefits paid to or for members (Part IX, column (A), line 4)	l E 10\	·	0.			
See.	1	Salaries, other compensation, employee benefits (Part IX, column (A),	lines 5-10)	-	0.	0.		
	1	Professional fundraising fees (Part IX, column (A), line 11e)		_	<u>0•</u>	0.		
<b>2.5</b>		Total fundraising expenses (Part IX, column (D), line 25)		0.	120 770	140 600		
97		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		<u> </u>	138,778.	142,628.		
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 2			147,651.	153,260.		
- 10	19	Revenue less expenses. Subtract line 18 from line 12	NED.		10.	<u> &lt;50,487.</u> >		
Net Assets or Fund Balances	ļ	(m)		၂၇၂ 🕒	eginning of Current Year	End of Year		
sset	20	Total assets (Part X, line 16)  Total liabilities (Part X, line 26)	0 2017 ·	RS-OS(	4,586,283.	4,812,572.		
₩ E	21	Total liabilities (Part X, line 26)			50,000.	50,000.		
컐	22	Net assets or fund balances Subtract line 21 from line 20		<u> </u>	4,536,283.	<u>4,762,572.</u>		
	ert II		(9)		<del></del>	<del></del>		
	-	alties of perjury, I declare that I have examined this return, including accompany				knowledge and belief, it is		
true	corre	ct, and complete. Declaration of preparer (other than officer) is based on all info	rmation of w	hich prepare	r has any knowledge.			
		Signature of officer			Doto			
Sig	n	1	Ь		Date - 1	-2Mi		
Here DENNIS COLLINS, TRUSTEE 9-12-201								
Type or print name and title								
		Print/Type preparer's name Preparer's signature	KLX		Date Check	— ·		
Paid CHERYL B PORTER Self-employed P000451								
						81-4337507		
Use Only   Firm's address   11429 NE 120TH STREET								
	KIRKLAND, WA 98034 Phone no. (425)821-2994							
May	the l	RS discuss this return with the preparer shown above? (see instruction	ns)		<del></del>	X Yes No		
0000		44 J. HA. For Panaguark Reduction Act Notice, see the senaral	ta instruct	ione		Form <b>990</b> (2016)		

	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission. NONE
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes X N
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?  — Yes X N
4	If "Yes," describe these changes on Schedule O.  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 \$
	SOCIAL ACTIVITIES AND ENTERTAINMENT WHICH BENEFITS ALL LODGE MEMBERS.
4b	(Code) (Expenses \$ 10,632. including grants of \$) (Revenue \$)  DONATIONS GIVEN TO VARIOUS CHARITIES IN THE COMMUNITY TO BE USED FOR CHARITABLE PURPOSES.
4c	(Code) (Expenses \$
4d	Other program services (Describe in Schedule O)  (Expenses \$ including grants of \$ ) (Revenue \$ )  Total program service expenses \$ 43,191.

			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_		<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		<u> </u>
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_		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	_4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
ē	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		X
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_		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			77
_	If "Yes," complete Schedule D, Part IV	9_		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			37
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	110	x	
<b>.</b>	Part VI  Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	11a		
D	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	x	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	110		
C	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
ч	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			
<u> </u>	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13_		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to		1	
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		_X_
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
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	990 (	X

Form 990 (2016) IMPROVED ORDER OF REDMEN 0004

Part IV Checklist of Required Schedules (continued)

20a but the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20b If "Yes" to be 20a, of the organization are act a copy of its audied financial statements to this return? 21 but the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part X, column (A), in 19 If "Yes," complete Schedule J, Part I and II 22 but the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part X, column (A), in 29 If "Yes," complete Schedule J, Part I and III 23 but the organization answer "Yes" to Part XII. Section A, Ine 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, Part I and III and I	•			Yes	No
21 Dut the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government or Part X, column (A), in 17 II Y Pies, "complete Schedule I, Parts I and II Y Part I Y Pies, "complete Schedule I, Parts I and II Y Part I Y Pies, "complete Schedule I, Parts I and II Y Part I Y Pies, "complete Schedule I, Parts I and II Y Part I Y Pies, "complete Schedule I, Part I And II Y Pies, "complete Schedule I, Part I Y Pies, "complete Schedule I, Part I Y Pies," "complete Schedule I,	<b>2</b> 0a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
domestic government on Part N. column (A), lins 17 if 17 vs.; complete Schedule I, Parts I and II  21 X  22 X  23 Did the organization on more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), lins 27 if 17 vs. complete Schedule I, Parts I and III  22 X  23 Did the organization answer "vs." for 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 Is and to organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the list day of the year, that was issued after December 31, 2002? If "Yes," answer lines 240 through 24d and complete Schedule Is "In "No", go the more 25a  24a X  25b Did the organization nation an escore account other than a retering escore at any time during the year to defease any tax-exempt bonds?  25d Did the organization in west any proceeds of tax-exempt bonds beyond a temporary period exception?  25d Did the organization in west any proceeds of tax-exempt bonds beyond a temporary period exception?  25d Did the organization in west as an "on behalf of" issuer for bonds outstanding at any time during the year?  25d Did the organization aware that it engaged in an excess benefit transaction with a disqualided person of meriod person of the year?  25d Is the organization aware that it engaged in an excess benefit transaction with a disqualided person may prior year, and that the transaction has not been reported on any of the organizations prior forms 950 e950-E27 if Yes, "complete Schedule Is Part II  25d Did the organization aware that it engaged in an excess benefit transaction with a disqualided person on a prior year, and that the transaction has not been reported on any of the organizations provide a prior year, and that the transaction has not been reported on any of the organizations of 950-E27 if Yes, "complete Schedule Is Part IV  25d Did the	b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
22 X  25 Det the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 21 "Nes," complete Schedule I. Part Is and ill  26 Det the organization answer "Yes" to Part VII, Section A, line 3.4, or 5 about compensation of the organization answer serves to Part VII, Section A, line 3.4, or 5 about compensation of more than \$100,000 as of the start day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", or to line 25a  26 Dot the organization have a tax exempt bond issue with an outstanding principal amount of more than \$10,000 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", or to line 25a  27 Detection 50 (c)(3), 50 (c)(4), and 60 (c)(29) organizations beyond a temporary period exception?  28 Det the organization and an an exception of the organization and advantage of the comparization and that the transaction with a disqualified person and a disqualified person during the year?  28 Section 50 (c)(3), 50 (c)(4), and 60 (c)(29) organizations. Did the organization was an axcess benefit transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person? If "Yes," complete Schedule I., Part II  28 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, bey employees, highest compensated employees, or disqualified person? If "Yes," complete Schedule I., Part IV  29 Did the organization provide a grant or other assistance to an officer, director, trustee, key employees as the part IV is a complete Schedule II., Part IV  29 Did the organiza	21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			1
Part IX, column (A), line 27 if 1*Pes,* complete Schedule I, Parts I and III  Dot the organization answer "Yes" to Part IV, 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 I, Part IV and the said day of the year,* that was issued after December 31, 2002? If "Yes,* answer fines 24b through 24d and complete Schedule II. The 10 per			21		X
22 Dot 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, fustees, key employees, and highest compensated employees? If "Yes," complete Schedule I, I' No", or to line 25a 24a Dd the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the list day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", or to line 25a D Dd the organization maintain an escrow account other than a refunding secrow at any time during the year to defease any tax-exempt bonds or than a refunding secrow at any time during the year to defease any tax-exempt bonds or than a refunding secrow at any time during the year to defease any tax-exempt bonds or than a refunding secrow at any time during the year to defease any tax-exempt bonds or than a refunding secrow at any time during the year to defease any tax-exempt bonds or than a refunding secrow at any time during the year and the organization and the secretary to defease any tax-exempt bonds or than a refunding secrow at any time during the year to defease any tax-exempt bonds or the secretary to the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction was not the regarization's prior forms 90 or 930 E27 if "Yes," complete Schedule I, Part IV Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officer, or other assistance to an officer, director, trustee, key employees, substantial contribution or reflect, and the prior of any of these persons? If "Yes," complete Schedule I, Part IV Did the organization provide a grant or	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
and former officers, directors, frustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 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 2dd and complete Schedule K. If "No", go to line 25a 24b through 2dd and complete Schedule K. If "No", to to line 25a 24b 2db Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization invest any and that a second the than a refunding escrow at any time during the year?  24d			22		X
Schedule J. 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.  24b. Did the organization maintain an escrow account other than a refunding escrow at any time during the year of defease any tax-evempt bonds?  25c. Did the organization maintain an escrow account other than a refunding escrow at any time during the year?  25d. Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  25d. 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.  25d. It 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 vin the disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization provide a grant or other assistance to an officer, director, trustee, key employees, or disqualified persons? If "yes," complete Schedule L, Part III and the organization provide a grant or other assi	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 24th through 24d and complete Schedule K, If "No", go to line 25a  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  24d  25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a dequalified person in a prior year, and that the transaction has not been reported on any of the organization's prior forms 90 or 990-E27 (If "Yes," complete Schedule L, Part I   25a   25b	-				
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  b) Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  d) Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  d) Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  d) Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  24d			23		X
Schedule K. If *No**, go to line 25a b. Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?  Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?  Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?  24d  Did the organization axis as an *on behalf of* issuer for bonds outstanding at any time during the year?  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    25b  Dis the organization axis 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-E27 If *Yes,* complete Schedule L, Part I    25c  Did the organization avair by any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustes, sey employees, highest compensated employees, or disqualified persons? If *Yes,* complete Schedule L, Part II    25c  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 IV    27	24a				
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?  225a 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 uning the year? If 'Yes,' complete Schedule L, Part I    b is the organization oware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction have not been reported on any of the organizations prior Forms 990 or 990-E27 If 'Yes,' complete Schedule L, Part II    25b 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, 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 IV instructions for applicable filing thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, or key employee (if 'Yes,' complete Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, or key employee (or a family member of a current or former officer, director, trustee, or key employee (if 'Yes,' complete Schedule L, Part IV instructions? If 'Yes,' complete Schedule M in the part II is a series of the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M in the organization receive contributions of art, histonical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M in the organization of a current of the organization of an					
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  24d 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 uning the year? "I" "Yes," complete Schedule L. Part I 25a 1					X
any tax-exempt bonds?  d Dd the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  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  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 pnor Forms 990 or 990-E2? If "Yes," complete Schedule L, Part I  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  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 II  28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  29 A nentity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  29 Did the organization receive contributions of art, histonocal treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part II  30 Did the organization on 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701.2 and 301.7701.3? If "Yes," complete	b		24b		
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If "Yes," complete Schedule N, Part I  31		contributions? If "Yes," complete Schedule M	30		X
Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  32 X  33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  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  35 Did the organization have a controlled entity within the meaning of section 512(b)(13)?  35 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  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2  36 Jin 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 X  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	31	Did the organization liquidate, terminate, or dissolve and cease operations?			
Schedule N, Part II  32 X  33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  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, Iine 1  35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  35b 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, Iine 2  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, Iine 2  36 Jid 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 X  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		If "Yes," complete Schedule N, Part I	31		_X
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Did the organization have a controlled entity within the meaning of section 512(b)(13)?  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  35a  X  35a  X  35a  X  35a  X  35a  X  35b  35b  36  37  38  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2  36  37  Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  37  X  Note. All Form 990 filers are required to complete Schedule O  38  X	34				
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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 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 X	36		_		
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Note. All Form 990 filers are required to complete Schedule O	30		3/		
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016) IMPROVED ORDER OF REDMEN 0004
Statements Regarding Other IRS Filings and Tax Compliance Form 990 (2016)
Part V Sta

_	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 . 1a 4			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0		.	İ
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			1
	filed for the calendar year ending with or within the year covered by this return			
Б	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)			
3ạ	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3ь	$\vdash$	<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	1 1	. }	l
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	<b></b>	X
b	If "Yes," enter the name of the foreign country: ►	1 1	,	ļ
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<u>5b</u>		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			7.7
	any contributions that were not tax deductible as charitable contributions?	6a		X
Þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6ь	,	l
7	were not tax deductible?  Organizations that may receive deductible contributions under section 170(c).	OD		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
Ĭ	to file Form 8282?	7c	. !	Х
ď	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?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
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	j	ı	l
	sponsoring organization have excess business holdings at any time during the year?	8	<del></del>	ļ- <del></del>
9	Sponsoring organizations maintaining donor advised funds.			l
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	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  Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b		, ,	ļ
ь 11	Section 501(c)(12) organizations. Enter:			
''	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against		.	ı
-	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	.	ı
	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.	L		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			_
b	Enter the amount of reserves the organization is required to maintain by the states in which the		, 1	
	organization is licensed to issue qualified health plans		, [	ı
_	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u> </u>
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	990 (	(2010)

Form 990 (2016) IMPROVED ORDER OF REDMEN 0004 92-0009447 Part VI | Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI X Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body at the end of the tax year 1a 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. 8 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 X officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision X of officers, directors, or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Х 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 5 Did the organization have members or stockholders? 6 6 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? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or Х persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X a The governing body? 8a X **b** Each committee with authority to act on behalf of the governing body? 8b 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 Revenue Code.) Yes No 10a 10a Did the organization have local chapters, branches, or affiliates? X 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? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11<u>a</u> b Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c Did the organization have a written whistleblower policy? 13 13 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent 15 persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed AK 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. X Upon request Other (explain in Schedule O) Own website \_\_\_\_ Another's website Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

State the name, address, and telephone number of the person who possesses the organization's books and records:

RAY HENDRICKS, TRUSTEE - 907-225-3050

PO BOX 5793, KETCHIKAN,

Form 990 (2016)	IMPROVED	ORDER	OF
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92-0009447

REDMEN 0004 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 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.

X Check this box if neither the organization n	or any related	orga	anıza	ation	cor	npe	nsat	ed any current officer, o	director, or trustee.	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average	(do	Positio (do not check mor			tion		Reportable	Reportable	Estimated
	hours per	box	pox, unless person is both an officer and a director/trustee)				h an	compensation	compensation	amount of
	week	-			Irecto	or/trus	itee)	from	from related	other
	(list any	recto				İ		the	organizations	compensation
	hours for related	50	활			Sate		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the
	organizations	ruste	E S		8	臣		(***2/1099-141130)		organization and related
	below	l and	買	_	를 (	3 st C				organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			Organizations
(1) GERALD HUGHES	3.00									
SACHEM				X				0.	0.	0.
(2) AARON CHATUM	1.00							, , , , , , , , , , , , , , , , , , , ,		<del></del>
SR SAGAMORE				X				0.	0.	0.
(3) STEVE HOFFMAN	1.00									
JR_SAGAMORE				X				0.	0.	0.
(4) THOMAS JONES	3.00									-
KEEPER OF WAMPUM				X				0.	0.	0.
(5) JACOB SCHWARTZ	3.00									
CHIEF OF RECORDS	l	<u> </u>		X				0.	0.	0.
(6) DENNIS COLLINS	3.00									· ·
TRUSTEE _						l		0.	0.	0.
(7) WILLIAM HENDRICKS	1.00									
TRUSTEE								0.	0.	0.
(8) RAY HENDRICKS	1.00	]	ł							
TRUSTEE			L.				<u> </u>	0.	0.	0.
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rar	T VII   Section A. Officers, Directors, Trus	tees, Key Em	ploy	<u>ees</u>	, an	<u>d Hi</u>	ighe	st C	ompensated Employe	es (continued)		,			
	(A)	(B) (C)						_	(D)	(E)					
	Name and title	Average	rage Position					ONA	Reportable	Reportable		E	stimate	∍d	
		hours per	box, unless person is both ar officer and a director/trustee)				is bot	h an	compensation	compensation		ar	nount		
		week (list any	$\vdash$		T	., 6010	J., u us		from	from relate			other		
		hours for	liect				L		the organization	organizatıor (W-2/1099-MI			ipensa rom th		
		related	96 01 (	stee			Safe		(W-2/1099-MISC)	(**-2/1033-1411	30,		janizat		
		organizations	trust	lat tru		),ee	ошо		(** = *********************************			_	d relat		
		below	Individual trustee or director	Institutional trustee	<u>چ</u>	Key employee	Highest compensated employee	늘				org	anızatı	ons	
		line)	皇	ᆵ	Officer	Ke S	물등	ᅙ							
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			1												
1b	Sub-total								0.		0.			0.	
С	Total from continuation sheets to Part V	II, Section A							0.		0.			0.	
	Total (add lines 1b and 1c)							<u> </u>	0.		0.			0.	
2	Total number of individuals (including but n	ot limited to tr	nose	liste	ed a	bov	e) WI	no re	eceived more than \$100	0,000 of reportab	le			^	
	compensation from the organization									·····			Yes	No	
3	Did the organization list any former officer,	director or tra	ieto	o ka	2V Ar	mnlc		or	highest compensated a	mplovee on			163	140	
J	line 1a? If "Yes," complete Schedule J for s			o,	3 y 01	пріс	усс	, 01	riigi lest compensated e	inployee on		3		Х	
4	For any individual listed on line 1a, is the su			omo	ens:	atior	า ลกเ	to h	her compensation from	the organization		<u> </u>			
•	and related organizations greater than \$15	•		•					•	ino organization		4		Х	
5	Did any person listed on line 1a receive or									idual for services	<b>;</b>	•			
	rendered to the organization? If "Yes," com					_						5		Х	
Sec	tion B. Independent Contractors														
1	Complete this table for your five highest co	mpensated in	depe	ende	ent c	ont	racto	ors t	hat received more than	\$100,000 of con	npens	ation f	rom		
	the organization. Report compensation for	the calendar y	ear	end	ıng v	vith	or w	ıthir	n the organization's tax	year.					
	(A) (B)							_	(C						
	Name and business	address	N	ON!	E			$\dashv$	Description of s	ervices		ompe	nsatio	<u> </u>	
								$\dashv$	· · · · · · · · · · · · · · · · · · ·						
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2	Total number of independent contractors (	ncluding but r	ot li	mite	d to	tho	se li	sted	d above) who received m	ore than					
	\$100,000 of compensation from the organi	zation >					0								
												_	^^^		

Form **990** (2016)

		Check if Schedule O cont	ains a response	or note to any line	e in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ts ts	1 a	Federated campaigns	1a					
E E	b		1b	5,450.				
ٳۼؿ	C		1c					
ぎる	d		1d					
S E	e							
ပ်ပြု	_	A.11 .14		-				
돌	-	similar amounts not included abo		3,607.				
اکظ	g			3,557.				
Contributions, Gifts, Grants and Other Similar Amounts	_	Total. Add lines 1a-1f		. •	9.057.			
				Business Code				
ġ.	2 a							
ه ځ	b							
နှင့်	С							
eve	d							
Program Service Revenue	е							
ď	f	All other program service reve	enue .		_			
	g	Total. Add lines 2a-2f						
	3	Investment income (including	dividends, inter	rest, and				
		other similar amounts)	••	▶ [	99,447.	99,447.		_
	4	Income from investment of ta	x-exempt bond	proceeds -				
	5	Royalties .		<b>•</b>				
			(ı) Real	(ıi) Personal				
	6 a	Gross rents	46,040					
	b	Less: rental expenses	0					
	С	Rental income or (loss)	46,040					
	d	Net rental income or (loss)		•	46,040.	46,040,		
	7 a	Gross amount from sales of	(ı) Securities	(II) Other	·		· -	]
		assets other than inventory	1,283,793					
	b	Less. cost or other basis						
		and sales expenses	1,335,564					
	С	Gain or (loss)	<51,771	.>				
	d	Net gain or (loss)		. •	<51,771.	> <51,771.		
ø.	8 a	Gross income from fundraisin	g events (not		·			
enue		including \$	of					
eve		contributions reported on line	1c). See					
<u>*</u>		Part IV, line 18	ŧ	3				
Other Rever	b	Less: direct expenses	t	·				
U	C	Net income or (loss) from fund	draising events	<b></b>				
	9 a	Gross income from gaming ad	ctivities. See					
		Part IV, line 19	ŧ	3				
	b	Less. direct expenses	. 1	·				
	С	Net income or (loss) from gan	ning activities					
	10 a	Gross sales of inventory, less	returns					
		and allowances	ŧ	a				
	b	Less cost of goods sold	. 1	·				
	c	Net income or (loss) from sale	es of inventory					
		Miscellaneous Revenu		Business Code				
	11 a	·						
	b							
I	c							
	d	All other revenue						
	е	Total. Add lines 11a-11d	•	🕨				
	12	Total revenue. See instructions.		▶ [	102.773.	93 716	0.	0

### 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 response or note to any line in this Part IX (A) Total expenses (C) Management and general expenses (D) Fundraising expenses Do not include amounts reported on lines 6b, Program service 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 750 750 individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign 9,882. 9,882. individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits Payroll taxes 10 Fees for services (non-employees): a Management Legal b 4,936. 4,936. c Accounting Lobbying d e Professional fundraising services. See Part IV, line 17 14,883. 14,883. Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) Advertising and promotion 12 5,273. 5,273. Office expenses 13 14 Information technology Royalties 15 34,023. 34,023 16 Occupancy 7.378. 7,378. Travel 17 Payments of travel or entertainment expenses for any federal, state, or local public officials 2,315. 2,315. 19 Conferences, conventions, and meetings Interest 20 Payments to affiliates 21 23,959. Depreciation, depletion, and amortization 22 9,708. 9,708 23 Other expenses, Itemize expenses not covered 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.) SOCIAL ACTIVITIES 32,559. 32,559. TAXES AND LICENSES 7,594. 7,594. C d All other expenses 153,260. 43,191. Total functional expenses. Add lines 1 through 24e 86,110. 0. 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)

Form 990 (2016)

Part X | Balance Sheet

art X	<u> </u>	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
1		Cash · non-interest-bearing	14,950.	1	11,195
2	2	Savings and temporary cash investments	50,000.	2	216,522
3	3	Pledges and grants receivable, net		3	
4	ļ	Accounts receivable, net		4	
5		Loans and other receivables from current and former officers, directors,			
-		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
. 6	;	Loans and other receivables from other disqualified persons (as defined under			
-		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
.		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
7	,	Notes and loans receivable, net		7	
8	3	Inventories for sale or use		8	·
9	)	Prepaid expenses and deferred charges		9	
10	)a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 1,483,802.			
	b	Less. accumulated depreciation 10b 200, 431.	1,307,330.	10c	1,283,371
11	l	Investments - publicly traded securities	1,374,008.	11	1,592,006
12	2	Investments - other securities. See Part IV, line 11	1,807,781.	12	1,670,191
13	3	Investments - program-related. See Part IV, line 11		13	
14	ļ	Intangible assets		14	
15	5	Other assets See Part IV, line 11	32,214.	15	39,287
16	3	Total assets. Add lines 1 through 15 (must equal line 34)	4,586,283.	16	4,812,572
17	,	Accounts payable and accrued expenses		17	
18	3	Grants payable		18	
19	•	Deferred revenue		19	
20	)	Tax-exempt bond liabilities		20	
21	1	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
22	2	Loans and other payables to current and former officers, directors, trustees,			
		key employees, highest compensated employees, and disqualified persons.			
22		Complete Part II of Schedule L		22	
23	3	Secured mortgages and notes payable to unrelated third parties .		23	
24	1	Unsecured notes and loans payable to unrelated third parties		24	
25	5	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of			
		Schedule D	50,000.	25	50,000
26	3	Total liabilities. Add lines 17 through 25	50,000.	26	50,000
		Organizations that follow SFAS 117 (ASC 958), check here ▶			
3		complete lines 27 through 29, and lines 33 and 34.			
27	7	Unrestricted net assets		27	
28	3	Temporarily restricted net assets		28	<del>-</del>
29	•	Permanently restricted net assets		29	
•		Organizations that do not follow SFAS 117 (ASC 958), check here ► X			
5		and complete lines 30 through 34.			
30	)	Capital stock or trust principal, or current funds	0.	30_	0
}   31	1	Paid-in or capital surplus, or land, building, or equipment fund	0.	31	0
27 28 29 29 31 31 32	2	Retained earnings, endowment, accumulated income, or other funds	4,536,283.	32	4,762,572
<sup>2</sup> 33	3	Total net assets or fund balances	4,536,283.		4,762,572
	4	Total liabilities and net assets/fund balances	4,586,283.	34	4,812,572

orm	990 (2016) IMPROVED ORDER OF REDMEN 0004	<u>92-000</u>	9447	Page <b>12</b>
	t XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI		:	
			100	772
1	Total revenue (must equal Part VIII, column (A), line 12)	1		,773. ,260.
2	Total expenses (must equal Part IX, column (A), line 25)	2		
3	Revenue less expenses. Subtract line 2 from line 1	3		<u>,487.</u> :
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))			<u>,283.</u>
5	Net unrealized gains (losses) on investments	5	2/6	<u>,776.</u>
6	Donated services and use of facilities	6		·
7	Investment expenses	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9		0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,	İ		
	column (B))	10	4,762	<u>,572.</u>
Pai	t XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII	•		<del></del>
				'es No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other		1 1	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	l on a		
	separate basis, consolidated basis, or both.			
	Separate basis Consolidated basis Both consolidated and separate basis			,,
b	Were the organization's financial statements audited by an independent accountant?		2b	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,		1
	consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,	1.1	
	review, or compilation of its financial statements and selection of an independent accountant?		2c	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit		77
	Act and OMB Circular A-133?		3a	X_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired audit		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		<u>  3b  </u>	00 12 2 1 = 1
			Form 9	<b>90</b> (2016)

# **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.

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

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

IMPROVED ORDER OF REDMEN 0004

**Employer identification number** 92-0009447

Pa	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	e 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		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a		e used only
•	for charitable purposes and not for the benefit of the donor of		
	impermissible private benefit?		Yes No
Pa	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization		
Ť	Preservation of land for public use (e.g., recreation or e		torically important land area
	Protection of natural habitat		rtified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form	n 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 easements		2b
G	Number of conservation easements on a certified historic str	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired		<del> </del>
_	listed in the National Register	,	2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by th	ne organization during the tax
•	year >	•	
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the per		, <b>f</b>
Ŭ	violations, and enforcement of the conservation easements i		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		nservation easements during the year
Ū	<b>&gt;</b>		
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserv	ration easements during the year
•	<b>▶</b> \$		• •
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 17	0(h)(4)(B)(ı)
•	and section 170(h)(4)(B)(ii)?		☐ Yes ☐ No
9	In Part XIII, describe how the organization reports conservat	ion easements in its revenue and expens	se statement, and balance sheet, and
•	include, if applicable, the text of the footnote to the organiza		
	conservation easements.		
Pa	rt III Organizations Maintaining Collections o	f Art, Historical Treasures, or 0	Other Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue state	ement and balance sheet works of art,
	historical treasures, or other similar assets held for public ex	hibition, education, or research in further	rance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descr	ibes these items	
b	If the organization elected, as permitted under SFAS 116 (As	SC 958), to report in its revenue stateme	nt and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e		
	relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
	(ii) Assets included in Form 000. Bort V		<b>&gt;</b> \$
2	If the organization received or held works of art, historical tre		
_	the following amounts required to be reported under SFAS 1		
а	D		<b>&gt;</b> \$
	Assets included in Form 990, Part X	· · · · · · · · · · · · · · · · · · ·	<b>&gt;</b> \$

	dule D (Form 990) 2016 IMPROVE										<u> </u>		ge <b>2</b>
Par													
3	Using the organization's acquisition, accessi	on, and othe	r records	s, chec	k any of	f the fol	lowing tha	t are a s	ignificant	use of its	collection	items	3
	(check all that apply):												
а	Public exhibition		d		Loan or	r exchai	nge progra	ams					
b	Scholarly research		е		Other_								
С	Preservation for future generations												
4	Provide a description of the organization's co	ollections an	d explain	how t	hey furtl	her the	organizatio	on's exe	mpt purp	ose in Pa	rt XIII.		
5	During the year, did the organization solicit of	r receive doi	nations o	f art, h	istorical	l treasui	res, or othe	er simıla	r assets	_			
	to be sold to raise funds rather than to be ma	aintained as	part of th	ne orga	nızatıor	n's colle	ction?				Yes		No
Pär	t IV Escrow and Custodial Arran reported an amount on Form 990, Pal	_	Complet	te if the	e organı	ızation a	answered "	"Yes" or	Form 990	0, Part IV	, line 9, or		
	Is the organization an agent, trustee, custod		ntormodi	any for	contrib	vitione (	or other as	eate not	tuncluded				
اعرا	on Form 990, Part X?	ian or other i	memeu	ary ioi	COMMIND	ations (	Ji Ottiei as	3613 110	included		Yes		No
_	•	and asmalat	 o the fell	owina	table:	•				L.,	res		NO
D	If "Yes," explain the arrangement in Part XIII	and complet	e the foli	owing	table.					l	Amount	-	
_	Decimand holonos								1-	<u> </u>	Amount		
	Beginning balance			•					1c 1d	<u> </u>			
	Additions during the year	••			•	•							
_	Distributions during the year		•	•				•	<u>1e</u> 1f				
f	Ending balance	orm 000 Bo	 ntVluno."	21 for	oporow	or ount	odial acco	unt link			Yes	Т	No
	•								_		res	$\vdash$	NO
Par	t V Endowment Funds. Complete												
, ai	Endownione Fands: Complete				Prior yea					veare hack	(e) Four y	oare h	nack
4.	Beginning of year balance	(a) Curren	t year	(0) •	nor yes	<u>ai (</u>	C) I WO you	3 Dack	(u) inice	yours back	(e) roury	carsi	Jack
	Contributions												
b	Net investment earnings, gains, and losses			·-									
	Grants or scholarships										<del></del>		
	·												
е	Other expenditures for facilities												
	and programs										·		
	Administrative expenses		+										
g	End of year balance	ront voor on	d bolono	/line 1	1a colu		hold on:						
2	Board designated or quasi-endowment		Juanance	%	rg, colui	11111 (a,,, 1	neiu as.						
	Permanent endowment		•	_70									
	Temporarily restricted endowment		%										
С	The percentages on lines 2a, 2b, and 2c sho	uld oqual 10											
2-	•			tion th	at are b	ald and	Ladminista	rad for t	ho organi	zation			
Sa	Are there endowment funds not in the posse	5551011 01 1116	Organiza		al alt II	ieiu anu	aummiste	iled IOI I	ine organi.	Zation	Г	<b>/</b> 00	No.
	by: (i) unrelated organizations											/es	<u>No</u>
									•		3a(i)		
	(ii) related organizations If "Yes" on line 3a(ii), are the related organizations	 stiona listadi:	oo roquir	ad an 9	Schodul	lo P2	•			•	. 3a(ii)	-	
b 4	Describe in Part XIII the intended uses of the		•			10 171		-			3b		
Pai			ii s endo	wineiit	iurius.	<del></del>							
<u> </u>	Complete if the organization answere		orm 990	Part I	V line 1	11a See	Form 990	) Part X	line 10				
	Description of property	ı	Cost or ot		7	Cost or			ccumulate	ed le	(d) Book	مر بادی	
	Description of property	, , ,	(investm		, , ,	pasis (ot		٠,	preciation	I	(a) Dook	vaide	
19	Land			•			,497.				139	40	7.
b	Buildings				<del> </del>		,333.		164,9	91.	693		
	Leasehold improvements			_			, , , , , ,		<u> </u>		0,00	<u>, , , , , , , , , , , , , , , , , , , </u>	<u></u>
d	Equipment				1								
	Other	-			<del>                                     </del>	485	,972.		35,4	40.	450	. 53	2.
	I. Add lines 1a through 1e (Column (d) must e	egual Form 9	90. Part	X. colu	mn (R)				/ <del>-</del>		$\frac{1}{283}$		
	15/11/00/			, _ = =	\=/1				•	Schedul	e D (Form		
												, -	· <del>-</del>

Complete if the diganization answered Tes On Form 950, Fait	. IV, line the of the Sections		
1. (a) Description of liability	(b) Book value		
(1) Federal income taxes			
(2) TENANT DEPOSIT	50,000.		
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	50.000.		

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements 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

	rt XI Reconciliation of Revenue per Audited Financial Stateme		Return	
Га	<del></del>		netarri.	
_	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	·	1	
1	Total revenue, gains, and other support per audited financial statements	•	<del>                                     </del>	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	امدا		
a		2a		
b	•	2b		
С.	. , ,	2c	-	
d	,	2d	.	
e -			2e	_
3	Subtract line 2e from line 1		3	—
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1.1		
.a	, , , , , , , , , , , , , , , , , , , ,	4a		
b	,	_4b	.	
C			4c	
5	rt XII Reconciliation of Expenses per Audited Financial Statem	onto With Expenses n	5 Poture	_
Pa	<del></del>		er Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	<u> </u>	<del></del>	
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.	1.1		
а				
b	• • •	2b	_	
С	· · ·	2c		
d				
е	•	•	2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1.	1 1		
а		4a		
b	Other (Describe in Part XIII.)	1 4b 1	1 1	
_	,		<del> </del>	
C	Add lines 4a and 4b		4c	
c 5	Add lines <b>4a</b> and <b>4b</b> Total expenses Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)		4c 5	_
5 Pa	Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  Int XIII Supplemental Information.		5	
5 Pa	Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  Int XIII Supplemental Information.  Inde the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part	IV, lines 1b and 2b, Part V, lir	5	
5 Pa	Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  Int XIII Supplemental Information.	IV, lines 1b and 2b, Part V, lir	5	
5 Pa	Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  Int XIII Supplemental Information.  Inde the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part	IV, lines 1b and 2b, Part V, lir	5	
5 Pa	Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  Int XIII Supplemental Information.  Inde the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part	IV, lines 1b and 2b, Part V, lir	5	
5 Pa	Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  Int XIII Supplemental Information.  Inde the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part	IV, lines 1b and 2b, Part V, lir	5	
5 Pa	Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  Int XIII Supplemental Information.  Inde the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part	IV, lines 1b and 2b, Part V, lir	5	
5 Pa	Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  Int XIII Supplemental Information.  Inde the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part	IV, lines 1b and 2b, Part V, lir	5	
5 Pa	Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  Int XIII Supplemental Information.  Inde the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part	IV, lines 1b and 2b, Part V, lir	5	
5 Pa	Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  Int XIII Supplemental Information.  Inde the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part	IV, lines 1b and 2b, Part V, lir	5	
5 Pa	Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  Int XIII Supplemental Information.  Inde the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part	IV, lines 1b and 2b, Part V, lir	5	
5 Pa	Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  Int XIII Supplemental Information.  Inde the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part	IV, lines 1b and 2b, Part V, lir	5	
5 Pa	Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  Int XIII Supplemental Information.  Inde the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part	IV, lines 1b and 2b, Part V, lir	5	
5 Pa	Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  Int XIII Supplemental Information.  Inde the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part	IV, lines 1b and 2b, Part V, lir	5	
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Schedule D (Form 990) 2016

#### **SCHEDULE 0**

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ. Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.lrs.gov/form990. Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

IMPROVED ORDER OF REDMEN 0004

**Employer identification number** 92-0009447

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
THROUGH ITS MEMBERS LINKED TOGETHER IN A COMMON BOND OF BROTHERHOOD AND
FRIENDSHIP AND TO HELP OTHERS THROUGH ORGANIZED LOCAL CHARITABLE
EFFORTS WITH THE NATIONAL CHARITY EFFORT DIRECTED TO ALZHEIMER'S
RESEARCH.
FORM 990, PART VI, SECTION A, LINE 6:
THE MEMBERS OF THE LODGE ELECT THE OFFICERS OF THE GOVERNING BODY ANNUALLY.
FORM 990, PART VI, SECTION A, LINE 7A:
THE MEMBERS ELECT THE MEMBERS OF THE GOVERNING BODY ANNUALLY AND IN THE
EVENT OF A MID YEAR VACANCY.
FORM 990, PART VI, SECTION A, LINE 7B:
THE MEMBERS HAVE THE RIGHT TO VOTE ON MAJOR DECISIONS AFFECTING THE LODGE.
FORM 990, PART VI, SECTION B, LINE 11B:
THE LODGE MEETS EVERY WEEK, OFFICERS OF THE CLUB REVIEW THE INCOME TAX
RETURN AND IT IS NOTED IN THE MINUTES.
FORM 990, PART VI, SECTION C, LINE 19:
A WRITTEN REQUEST DELIVERED TO SACHEM.