Form **990**

Return of Organization Exempt From Income Tax

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

2016

OMB No 1545-0047

Depa Inter	irtment d nal Reve	ofthe Treasury enue Service	► Information about Form 990 and its instructions is at www.irs.gov/form			Inspection
A	For th	ne 2016 calen	dar year, or tax year beginning $\exists ul 1$, 2016, and ending	Jun 30	, 2	2017
В	Check	f applicable	C Name of organization International Association of Lions	D Employ	er identifica	ition number
	Ad	dress change	Doing business as 41442 Odessa Westside	75-	224351	0
	Na	ame change	Number and street (or P O box if mail is not delivered to street address) Room/suite	E Telepho	ne number	
	Ini	itial return	PO Box 69407	(43:	2) 661	-8930
	Fin	nal return/terminated	City or town, state or province, country, and ZIP or foreign postal code			
	An	nended return	Odessa TX 79769-040	7 G Gross r	eceipts \$	708,496.
	M _{Ap}	oplication pending		Is this a group return		
	L		Diane Furlow PO Box 69407 Odessa TX 79769-0407 H(b)	Are all subordinates If 'No,' attach a list (included?	
ī	Тах-	exempt status	501(c)(3) X 501(c) (4) (insert no) 4947(a)(1) or 527	if 'No,' attach a list (see instruction	ons)
J	Wel	bsite: ► N/		Group exemption nu	mber 🟲	0239
ĸ	Form	of organization		1960 M s	tate of legal	
Pa	rt I	Summar				
<u></u>			e the organization's mission or most significant activities To encourag	e service	-minde	:d
ø			o serve their community without personal financia			
Governance			ncourage efficiency and promote high ethical star			
Ĕ			, industry, professions, public works and private			
₹			x 🕨 🔲 if the organization discontinued its operations or disposed of more than 2		sets	
			ting members of the governing body (Part VI, line 1a)		3	5
SS	l .		lependent voting members of the governing body (Part VI, line 1b)		4	5
Activities &			of individuals employed in calendar year 2016 (Part V, line 2a)		5	9
튱	l		of volunteers (estimate if necessary)		6 7a	0
⋖			business taxable income from Form 990-T, line 34		7b	34,575. 21,346.
		Net differated		Prior Year	- 75 -	Current Year
	8	Contributions	and grants (Part VIII, line 1h)RECEIVED	riioi reai		510.
ne	9	Program servi	ice revenue (Part VIII, line 2g)	152,5	37	
Revenue	1 -	Investment in	come (Part VIII, column (A), lines 3, 4, and 7d) JAN 23 2018	132,3		
8			e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			-11,242.
			- add lines 8 through 11 (must equal Part VIII, column (A), line 42)	152,5	37.	-10,732.
7			milar amounts paid (Part IX, column (A), lines 4.3		-	12,229.
	14		to or for members (Part IX, column (A), line 4)	•		
	15		r compensation, employee benefits (Part IX, column (A), lines 5-10)	46,5	65.	
Ses	l		undraising fees (Part IX, column (A), line 11e)			***
Expenses.			ing expenses (Part IX, column (D), line 25) ► 0.			
٣ <u>٠</u>	l .		es (Part IX, column (A), lines 11a-11d, 11f-24e)	122 4	20	1 046
			la di la companya di	133,4		1,846.
29}			es Add lines 13-17 (must equal Part IX, column (A), line 25)	179,9		14,075.
<u> </u>		Revenue less		-27,4		-24,807. End of Year
\$ 50 E	20	Total accete (Part X, line 16)	ginning of Curren		· · · · · · · · · · · · · · · · · · ·
Balz	21		G (Part X, line 26)	73,0	31.	52,683. 8,595.
Net Assets or Fund Balances	22		fund balances Subtract line 21 from line 20	75.0	~=-	
-	rt II	Signatur		75,0	9/.	44,088.
					land at an atomic	
com	olete De	eclaration of prepar	clare that I have examined this return, including accompanying schedules and statements, and to the best of m er (other than officer) is based on all information of which preparer has any knowledge	ly knowledge and be	ner, n is true,	Correct, and
			int Fulow	1-10	5-18	,
Sig	ın	Signatu	re of officer	Date		
He	re	▶ Dia	ne FurlowT	reasurer		
			print name and title			
		Print/Type p	reparer's name Preparer's signature Date	Check	if PTII	v
Pa	id	David	Hettler Name New CA 01/09/18	self-employe	dP0	0200670
Pr	epare					
	e On			Firm's EIN	75-20	684616

TX

79423

May the IRS discuss this return with the preparer shown above? (see instructions)

Lubbock

780-7700

Yes

(806)

		Internationa	<u>l Associat</u>	lon of Lions		75-2243510	Page 2
Par	t III Statei	ment of Prograi	m Service Ac	complishments			
	Check i	f Schedule O contain	ns a response or	note to any line in this Part II	·		
1	Briefly describe	the organization's r	nission				
	To encour	age service-	minded				
	people to	serve their	community	without personal	_financial rewar	d,	
	See Form 990	, Page 2, Part III, Lin	e 1 (continued)				- <i></i>
					_		
2				am services during the year v			
	Form 990 or 99	90-EZ?	· · · · · · · · · · · ·				es X No
	•	e these new service				_	
3				ificant changes in how it con	ducts, any program services	.? Y	es X No
		e these changes on					
4	Describe the or	rganization's program (3) and 501(c)(4) oro	n service accomp	lishments for each of its thre quired to report the amount o	e largest program services,	as measured by expe	nses
	and revenue, if	any, for each progra	am service report	ed	r grants and allocations to o	thers, the total expen	ses,
4 a	(Code) (Expenses	\$ 14,0	75. including grants of	\$ 0.)(F	Revenue \$	-10,732.)
	To raise	funds to hel	p the need	ly in our communit	У		
		-			*		- -
		- -					
			. 				
		. 					
						- 	
							
	· -					··	
4 b	(Code	(Expenses	\$	including grants of	\$) (F	Revenue \$)
							
		. – – – – – – -					
							
	(Code) (Evnances		including greate of	S 1/2		
4 0	(Code) (Expenses	\$	including grants of	\$)(F	Levenue \$	
) (Expenses	\$	Including grants of	\$) (F	levenue \$	
) (Expenses	\$	including grants of	\$)(R	levenue \$	
4 0	(Code) (Expenses	\$	including grants of	\$) (R		
4 c	(Code) (Expenses	\$	including grants of	\$) (R	levenue \$	
4 c	(Code) (Expenses	\$	including grants of	\$) (R	levenue \$	
4 0	(Code) (Expenses	\$	including grants of	\$) (R	levenue \$	
4 c	(Code) (Expenses	\$	including grants of	\$)(F	levenue \$	
4 0	(Code) (Expenses	\$	including grants of	\$) (R	levenue \$	
4 0	(Code) (Expenses	\$	including grants of	\$) (F	levenue \$	
4 c	Code) (Expenses	\$	including grants of	\$) (R	levenue \$	
4 0	(Code) (Expenses	\$	including grants of	\$) (R	levenue \$	
) (Expenses		Including grants of	\$	Levenue \$)
	Other program		n Schedule O)	including grants of	\$) (Revenue \$	levenue \$	



	·		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
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	Х	_
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		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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
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			
•	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a		Х
ı	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	11 b		X
•	Did the organization report an amount for investments — program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х
•	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	11 d		Х
(Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Х
1	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	11 f		Х
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a		Х
	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			Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E			X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
,	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
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		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		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19	х	

Part IX Checklist of Required Schedules (continued) No Yes Χ 20a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H. 20a b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 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 Χ Х 22 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 23 Χ 24 a 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 24a Χ b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24c 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 during the year? If 'Yes,' complete Schedule L, Part I........ 25a Х 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 Χ 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, highest compensated employees, or disqualified persons? Χ 26 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 27 of any of these persons? If 'Yes.' complete Schedule L, Part III 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) 20 Х a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV . . . 28a b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Х Schedule L. Part IV 28b Х

		-	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30	х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31	 X
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	 Х
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	 х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1.	34	х
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х
ł	b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 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	х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		

Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M .

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	Check of Schedule O contains a response or note to any line in this Part V			. [
	•		Yes	No
1 a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		-
2 a	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 9			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		- 1	
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a	Х	
b	If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O	3 b	Х	
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Х
b	If 'Yes,' enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х
	Old any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
С	: If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		Х
b	olf 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
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 and services provided to the payor?	7 a	P_	X
b	olf 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		Х
	If Yes,' indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
r	n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7 h		
8	, , ,			
	organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 ь		
	Section 501(c)(7) organizations. Enter	,	, *	; د س
	a Initiation fees and capital contributions included on Part VIII, line 12		7,5	1 3
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		25r	ė,
	Section 501(c)(12) organizations. Enter a Gross income from members or shareholders	,	3,4	~
			.	,
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	40		
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	o If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year]	
	Section 501(c)(29) qualified nonprofit health insurance issuers.	13 a		-
2	a Is the organization licensed to issue qualified health plans in more than one state?	134		
	· · · · · · · · · · · · · · · · · · ·	ļ		
	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	İ		
	<u> </u>	14 a		- X
	a Did the organization receive any payments for indoor tanning services during the tax year?	14 a		^
	o If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	140	1	

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. Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O b Enter the number of voting members included in line 1a, above, who are independent 5 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Х Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?..................... Х Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Х 6 Х 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more 7 a Χ b Are any governance decisions of the organization reserved to (or subject to approval by) members, 7 b X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8 a Χ b Each committee with authority to act on behalf of the governing body? 8 b Х 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 9 Χ Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code No 10 a Did the organization have local chapters, branches, or affiliates? Χ 10 a b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . . Χ 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13......... 12a Χ b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12 b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in 12 c 13 Did the organization have a written whistleblower policy? 13 X 14 Did the organization have a written document retention and destruction policy? 14 Χ Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15 a Χ **b** Other officers or key employees of the organization. 15 b Χ 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 16 a Χ 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 ▶ Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records Diane Furlow 9372 W. University Blvd 79764 Odessa (432) 661-8930

Farm 200 (0040)					
Form 990 (2016) International Associat				75-22435	
Rartvilk Compensation of Officers, Directors Independent Contractors	ors, Tru	stees, Key Employe	es, Highest C	ompensated E	nployees, and
Check if Schedule O contains a response or	note to an	y line in this Part VII			[
Section A. Officers, Directors, Trustees, Ke					<u> </u>
1 a Complete this table for all persons required to be listed organization's tax year	Report	compensation for the cale	ndar year ending v	vith or within the	
• List all of the organization's current officers, directo compensation Enter -0- in columns (D), (E), and (F) if no	rs, trustee compensa	es (whether individuals or a ation was paid	organizations), reg	ardless of amount of	F
 List all of the organization's current key employees 	if any Se	ee instructions for definitio	n of 'key employee	e '	
 List the organization's five current highest compens who received reportable compensation (Box 5 of Form Worganization and any related organizations 	ated emp -2 and/or f	oloyees (other than an office Box 7 of Form 1099-MISC	cer, director, truste o) of more than \$10	e, or key employee) 00,000 from the	
• List all of the organization's former officers, key em of reportable compensation from the organization and any	ployees, a related o	and highest compensated irganizations	employees who re	ceived more than \$1	00,000
 List all of the organization's former directors or tru organization, more than \$10,000 of reportable compensat 	stees that	t received, in the capacity he organization and any re	as a former directe elated organization	or or trustee of the	
List persons in the following order individual trustees or demployees, and former such persons	irectors, ir	nstitutional trustees, office	rs, key employees,	, highest compensate	ed
Check this box if neither the organization nor any rela	ted organi	zation compensated any	current officer, dire	ctor, or trustee	
		(C)			
(A) Name and Title	(B) Average hours per	Position (do not check more than one box unless person is both an officer and a director/trustee)	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	week	Former Highest con employee Key employ Officer Institutional Individual to	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations

(A) Name and Title	Average hours per	director/trustee)						(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other
	week (list any hours for related organiza- tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	compensation from the organization and related organizations
(1)_Diane_Furlow	12.00	X		x				9,273.	0.	0.
(2) Lorraine Wilson Pres	10.00	х		Х				1,065.	0.	0.
(3) Linda Baer V-P	1.00	Х		Х				79.	0.	0.
	1.00	Х						0.	0.	0.
(5) Shelly Owens Director	1.00	Х						3,956.	0.	0.
	l									
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)	 									

Form 990 (2016) International Association Part VIII Section A. Officers, Directors, True	on of	Lic	ns E~	anle				d Highaat Can	75-2243	510	Pa	age 8
(A) Name and title	Average hours per	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				than o	ne an ee)	(D) Reportable compensation from	(E) Reportable compensation from	n am	(F) Estimated amount of other	
	(list any hours for related organiza - tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organization (W-2/1099-MISC)	OI a	compensation from the organization and related organizations	
(15)												
(16)												
(17)												
(18)												
(19)												
(20)												
(21)												-
(22)												
(23)												
(24)							-		• • • • • • • • • • • • • • • • • • • •			
(25)												-
1 b Sub-total	on A						>	14,373.	().		0.
d Total (add lines 1b and 1c)							eive	14,373. d more than \$100,		compens	ation	0.
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such ii	, or trustee	e, key	y em			-	•	st compensated en	• •	3	Yes	No X
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater to such individual	han \$150,	00Ò?	' If 'Y	'es,'	com	plete	Sc.	mpensation from thedule J for		4		Х
5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,' of										5		X
1 Complete this table for your five highest compensa compensation from the organization Report compe	ted indepe	nden r the	t coi	ntrac	ctors	that ar end	rece	eived more than \$1	00,000 of	vear		
(A) Name and business addr							Ť	(B) Description o			C) ensatio	n
			-				-					
											-	
2 Total number of independent contractors (including	but not lin	nited	to th	1066	liete	ad ah	ove) who received mo	re than			

\$100,000 of compensation from the organization

	Check if Schedule O contains a response or note to any line in this Part VIII									
		•	· · · · · · · · · · · · · · · · · · ·		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514		
ts ts	1 a	Federated campaigns	1 a							
돌필	b	Membership dues	1 b	510.		1				
5 E	С	Fundraising events	1 c							
r ts		Related organizations	1 d					Ì		
ું ≅		Government grants (contributions)	1 e							
Contributions, Gifts, Grants and Other Similar Amounts		All other contributions, gifts, grants, and similar amounts not included above.	1 f							
풀히		Noncash contributions included in lines	la-1f S							
اع کی	_	Total. Add lines 1a-1f			510.					
<u></u>				Business Code	3.0.					
Program Service Revenue	2 a									
્રહ્	b		- - -				· · · · · · · · · · · · · · · · · · ·			
- 8	~									
اچُ	4									
ဖွဲ့	-									
틸	٠	All -4b								
ଛ		All other program service revenue						<u> </u>		
۵	g	Total. Add lines 2a-2f								
	3	Investment income (including divother similar amounts)	ıdends,	interest and						
		•								
	4	Income from investment of tax-ex	-				-			
	5	Royalties								
		<u>``</u>	Real	(ii) Personal						
		Gross rents								
	t	Less rental expenses								
	C	Rental income or (loss)								
	C	Net rental income or (loss)								
	7 2	Gross amount from sales of (i) Se	curities	(ii) Other						
	, ,	assets other than inventory								
	t	Less cost or other basis and sales expenses								
	c	Gain or (loss)								
		Net gain or (loss)								
۵.		•						· · · · · · · · · · · · · · · · · ·		
nue	øa	Gross income from fundraising e (not including: \$	vents							
Vei		of contributions reported on line	1c)							
æ		See Part IV, line 18		a						
ē	ŀ	Less direct expenses		b	,					
Other Revenu		: Net income or (loss) from fundra		<u>'</u>						
J		Gross income from gaming activ See Part IV, line 19								
		Less direct expenses		a 707,986. b 719,228.						
		Net income or (loss) from gaming			11 242	AE 017	24 575			
		· · · · · · · · · · · · · · · · · · ·	-		-11,242.	-45,817.	34,575.	0.		
		a Gross sales of inventory, less ref		a						
		Less cost of goods sold		b						
		Net income or (loss) from sales of	of inven							
		Miscellaneous Revenue		Business Code						
	11 8							•		
)								
	(; 								
		d All other revenue								
		Total. Add lines 11a-11d								
	12	Total revenue. See instructions			-10 732	-45 817	34 575			

Form 990 (2016)

Form 990 (2016) International Association of Lions Part IX | Statement of Functional Expenses

Sec	tion 501(c)(3) and 501(c)(4) organizations must co	mplete all columns. All o	ther organizations must	complete column (A)	
	Check if Schedule O contains a re-	sponse or note to any lin	e in this Part IX		
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	·(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	12,229.	12,229.		
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	Benefits paid to or for members				
5	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	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
	Management				
•	Legal				
	Accounting				
_	Lobbying				
	Professional fundraising services See Part IV, line 17			· · · · · · · · · · · · · · · · · · ·	
	Investment management fees		——————————————————————————————————————		
-	Other (If line 11g amount exceeds 10% of line 25, column		·· · - · · · · · · · · · · · · · · · · 		
	(A) amount, list line 11g expenses on Schedule O)				
12	-				
13	Office expenses				
14	Information technology		···	_ 	
15	Royalties ,				
16	Occupancy				<u> </u>
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	133.	133.	0.	0.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	0.	0.	0.	0.
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)				
ā	Dues and subs	480.	480.	0.	0.
	Pad debts	1,233.	1,233.	0.	0.
			-		
	a All other expenses				·
	Total functional expenses Add lines 1 through 24e	14,075.	14,075.	0.	0.
		14,075.	14,013.		
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				
DAA	SOP 98-2 (ASC 958-720)				Form 990 (2016)

Part X **Balance Sheet** (A) (B) Beginning of year End of vear 75,097 1 52,683 2 3 3 4 Loans and other receivables from current and former officers, directors, 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 Assets 7 8 Prepaid expenses and deferred charges 9 10 a b Less accumulated depreciation 10 b 10 c 11 11 12 Investments - other securities See Part IV. line 11 12 Investments - program-related See Part IV, line 11 13 13 14 14 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 75,097 16 52,683 Accounts payable and accrued expenses. . . . 17 17 8.595 18 18 Deferred revenue 19 19 20 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Liabilities Loans and other payables to current and former officers, directors, trustees. 22 22 23 23 24 24 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. . . . 25 25 26 Total liabilities. Add lines 17 through 25...... 0 26 595 Organizations that follow SFAS 117 (ASC 958), check here ► X and complete Balances lines 27 through 29, and lines 33 and 34.

BAA

Fund

ծ

Assets

Net 33

27

28

29

30

31

32

34

Unrestricted net assets.......

and complete lines 30 through 34.

Temporarily restricted net assets

Capital stock or trust principal, or current funds.

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

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

Retained earnings, endowment, accumulated income, or other funds

52,683 Form 990 (2016)

44,088

44,088

75,097

75,097

75,097

27

28

29

30

31

32

33

34

		2243510)	Page 12			
Par	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI		· · · ·	<u> </u>	\cdot		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		10,7	732.		
2	Total expenses (must equal Part IX, column (A), line 25)		_	14,C	75.		
3	Revenue less expenses Subtract line 2 from line 1	3		24,8	307.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).	4		75,C)97.		
5	Net unrealized gains (losses) on investments	5					
6	Donated services and use of facilities						
7	Investment expenses						
8	Prior period adjustments	8		-6,2	202.		
9	Other changes in net assets or fund balances (explain in Schedule O)	9					
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		44,0	188.		
Pai	rt XII Financial Statements and Reporting			<u>-</u>			
	Check if Schedule O contains a response or note to any line in this Part XII				. \square		
				Yes	No		
1	Accounting method used to prepare the Form 990 X Cash Accrual Other						
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O						
2 a	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		X		
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a	1					
	separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis		-	-			
ı	b Were the organization's financial statements audited by an independent accountant?		. 2b		Х		
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate						
	basis, consolidated basis, or both		1 1	- 1	1		
	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 auditive review, or compilation of its financial statements and selection of an independent accountant?	dit, 	2 c				
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O						
3 8	3 a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?						
ı	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required a	ıudıt					
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		. 3 b				
BAA			Form	990 (2	2016)		

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2016

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

If the organization answered 'Yes,' on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered 'Yes.' on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered 'Yes,' on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c

	xy Tax) (see separate instruct Section 501(c)(4), (5), or (6) orga		•	,	,
	of organization	anizations Complete Fait in	· · · · · · · · · · · · · · · · · · ·	Employer identific	ation number
	ernational Associa	tion of lions	,	75-224351	
Ran	tal-Ab Complete if the or	rganization is exempt under section	on 501(c) or is a	section 527 organi	zation.
	Provide a description of the or	ganization's direct and indirect political camp of 'political campaign activities')			
2	Political campaign activity exp	enditures (see instructions)			3
3		impaign activities (see instructions)			
Pai	til-Ba Complete if the o	rganization is exempt under secti	on 501(c)(3).		
1	Enter the amount of any excis-	e tax incurred by the organization under sect	ion 4955	<u> </u>	3
2	Enter the amount of any excis-	e tax incurred by organization managers und	er section 4955		3
3	If the organization incurred a s	section 4955 tax, did it file Form 4720 for this	year?		· · · Yes No
4 a	Was a correction made?				· · · · Yes No
<u>-</u>	If 'Yes,' describe in Part IV				
Par	t I-C Complete if the o	rganization is exempt under secti	on 501(c) , excep	t section 501(c)(3).	•
1	Enter the amount directly expe	ended by the filing organization for section 52	7 exempt function act	ivities ▶ \$	
2	Enter the amount of the filing of function activities	organization's funds contributed to other orga	inizations for section 5	27 exempt	
3	Total exempt function expending 17b	stures Add lines 1 and 2 Enter here and on I	Form 1120-POL,		S
4	Did the filing organization file i	Form 1120-POL for this year?			Yes No
5	organization made payments	and employer identification number (EIN) of a For each organization listed, enter the amounts received that were promptly and directly diaction committee (PAC). If additional space is	nt paid from the filing of	organization's funds. Also	enter the
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none enter -0-
(1)				ı	
(2)					
(3)					
(4)					
(5)					
(6)					

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2016

Sched	ule C (For	m 990 o	990-EZ) 2016 International Association	of Lions	75-2243510	Page 2
Par		Com	plete if the organization is exempt under on 501(h)).		d filed Form 5768 (election ur	nder
Α	Check		if the filing organization belongs to an affiliated group (and list in Part IV each affi	iliated group member's name,	

A Chadle > Defination									
	A Check In the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name,								
address, EIN, expenses, and share of excess lobbying expenditures) B Check ► if the filing organization checked box A and 'limited control' provisions apply									
(The term	Limits on Lobbyi	ng Expenditures ins amounts paid or incur	red.)	(a) Filing organization's totals	(b) Affiliated group totals				
1 a Total lobbying expenditur	res to influence publi	c opinion (grass roots lobby	ing)						
• • •	•	islative body (direct lobbying							
• • •	_	1b)	•						
• • •	•								
e Total exempt purpose ex	penditures (add lines	s 1c and 1d)							
f Lobbying nontaxable amboth columns	ount Enter the amou	int from the following table i	n 						
If the amount on line 1e, colu	umn (a) or (b) is	The lobbying nontaxable	amount is						
Not over \$500,000		·20% of the amount on line 1e							
Over \$500,000 but not over \$1	,000,000	\$100,000 plus 15% of the excess	over \$500,000	1					
Over \$1,000,000 but not over \$	1,500,000	\$175,000 plus 10% of the excess	over \$1,000,000						
Over \$1,500,000 but not over \$	17,000,000	\$225,000 plus 5% of the excess	over \$1,500,000						
Over \$17,000,000		\$1,000,000							
g Grassroots nontaxable a	mount (enter 25% of	line 1f)							
h Subtract line 1g from line	1a If zero or less, e	nter -0							
i Subtract line 1f from line	1c If zero or less, er	nter -0							
		r line 1h or line 1i, did the or			· · Yes No				
		4-Year Averaging Period U	Inder section 501(h)						
	•								
(Som	e organizations tha	t made a section 501(h) el							
(Som	e organizations tha columns be	t made a section 501(h) el low. See the separate inst bying Expenditures During	ructions for lines 2a th	rough 2f.)					
(Som	e organizations tha columns be	low. See the separate inst	ructions for lines 2a th	rough 2f.)					
Calendar year (or fiscal year beginning in)	e organizations tha columns be	low. See the separate inst	ructions for lines 2a th	rough 2f.)	(e) Total				
Calendar year (or fiscal	e organizations tha columns be Lobb	low. See the separate inst bying Expenditures During	ructions for lines 2a th 4-Year Averaging Peri	rough 2f.) od	(e) Total				
Calendar year (or fiscal year beginning in) 2 a Lobbying nontaxable	e organizations tha columns be Lobb	low. See the separate inst bying Expenditures During	ructions for lines 2a th 4-Year Averaging Peri	rough 2f.) od	(e) Total				
Calendar year (or fiscal year beginning in) 2 a Lobbying nontaxable amount	e organizations tha columns be Lobb	low. See the separate inst bying Expenditures During	ructions for lines 2a th 4-Year Averaging Peri	rough 2f.) od	(e) Total				
Calendar year (or fiscal year beginning in) 2 a Lobbying nontaxable amount	e organizations tha columns be Lobb	low. See the separate inst bying Expenditures During	ructions for lines 2a th 4-Year Averaging Peri	rough 2f.) od	(e) Total				

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2016

Schedule C (Form 990 or 990-EZ) 2016 International Association of Lions 75-2243510 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

•			(b)		
For each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity	Yes	No	Am	ount	
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
a Volunteers?					
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c Media advertisements?					
d Mailings to members, legislators, or the public?					
e Publications, or published or broadcast statements?					
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officials, or a legislative body?					
h Railies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i Other activities?					
j Total Add lines 1c through 1i					
2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b If 'Yes,' enter the amount of any tax incurred under section 4912					
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912		Ī			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501	c)(5)	, or			
section 501(c)(6).				·	
				Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?				X	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?					X
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior ye					Χ
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) answered 'Yes.'	Part I	ors II-A,	ection 5 line 3, is	01(c)	
1 Dues, assessments and similar amounts from members	[1			
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
a Current year		2 a			
b Carryover from last year		2 b	·		
c Total		2 c			
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?		4			
5 Taxable amount of lobbying and political expenditures (see instructions)		5			
Part IV Supplemental Information					

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ

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

OMB No 1545-0047 2016 Open to Public

Name of the organization						Employer identific	
International Association	of Lions	3				75-224351	.0
Partil Fundraising Activities. Comp	lete if the orgar uired to comple	nization ans te this part	swered 'Yes	s' on Form 990, Part IV,	line 17		
1 Indicate whether the organization ra	ised funds throi	ugh any of t	the followin				
a Mail solicitations			е	Solicitation of non-g		-	
b Internet and email solicitations		f	Solicitation of gover	rnment g	rants		
c Phone solicitations			g	Special fundraising	events		
d In-person solicitations							
2 a Did the organization have a written of employees listed in Form 990, Part V	or oral agreeme	ent with any connection	individual with profes	(including officers, direc	tors, trus	tees, or key	Yes No
b If 'Yes,' list the 10 highest paid indiv compensated at least \$5,000 by the	iduals or entitie organization	s (fundraise	ers) pursua	nt to agreements under	which the	e fundraiser is t	o be
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	have custo	undraiser dy or control ibutions?	(iv) Gross receipts from activity	(or re	nount paid to etained by) aiser listed in olumn (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
1							
2							
3							
4							
5	,						
6							
7							
8							
9							
10							
Total			>				
List all states in which the organization licensing	ion is registere	d or license	d to solicit	contributions or has bee	n notified	d it is exempt fro	om registration
		_					

	dule (G (Form 990 or 990-EZ) 2016 Internat	lional Associat	ion of Lions	75-22	
Ran		Fundraising Events. Complete if the more than \$15,000 of fundraising events with gross receipts great	ent contributions ar	wered 'Yes' on Form nd gross income on	i 990, Part IV, line Form 990-EZ, line:	18, or reported s 1 and 6b.
		•	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add column (a)
R E			(event type)	(event type)	(total number)	through column (c))
ボーンボンド	1	Gross receipts				
E	2	Less Contributions				
	3	Gross income (line 1 minus line 2)				<u> </u>
	4	Cash prizes				
_	5	Noncash prizes				
D-RECT	6	Rent/facility costs			<u>.</u>	
Č	7	Food and beverages				
E X P	8	Entertainment				
EXPEZSE	9	Other direct expenses				
S	10	Direct expense summary Add lines 4 through	gh 9 in column (d)			
	11	Net income summary Subtract line 10 from	line 3, column (d)	<u> </u>		
Par	ťЩ;	Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a	on answered 'Yes' (on Form 990, Part IV	, line 19, or report	ed more than
R				(b) Pull tabs/instant		
Ě			(a) Bingo	bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
おおくまとしま	1	Gross revenue	(a) Bingo	`bingo/progressive	(c) Other gaming	(add column (a)
V E N U E			194,543.	bingo/progressive bingo	(c) Other gaming	(add column (a) through column (c))
	2	Cash prizes	194,543.	bingo/progressive bingo	(c) Other gaming	(add column (a) through column (c))
DIRE		Cash prizes	194,543. 206,400.	bingo/progressive bingo 513,443. 372,208.	(c) Other gaming	(add column (a) through column (c)) 707,986. 578,608.
	2	Cash prizes	194,543.	bingo/progressive bingo	(c) Other gaming	(add column (a) through column (c))
DIRE	2	Cash prizes	194,543. 206,400. 11,621. 22,339.	513,443. 372,208. 30,671.		(add column (a) through column (c)) 707,986. 578,608.
DIRE	3	Cash prizes	194,543. 206,400. 11,621.	513,443. 372,208.	(c) Other gaming Yes % No	(add column (a) through column (c)) 707,986. 578,608.
DIRE	3 4 5	Cash prizes	194,543. 206,400. 11,621. 22,339. Yes %	513,443. 372,208. 30,671. 75,989. X No	Yes %	(add column (a) through column (c)) 707,986. 578,608.
DIRE	2 3 4 5	Cash prizes	194,543. 206,400. 11,621. 22,339. Yes % X No gh 5 in column (d)	513,443. 372,208. 30,671. 75,989. Yes% No	Yes %	(add column (a) through column (c)) 707,986. 578,608. 42,292. 98,328.
DIRECT	2 3 4 5 6 7	Cash prizes	194,543. 206,400. 11,621. 22,339. Yes % X No gh 5 in column (d) 7 from line 1, column (d)	513,443. 372,208. 30,671. 75,989. Yes% X No	Yes %	(add column (a) through column (c)) 707,986. 578,608. 42,292. 98,328.
D-RECT 9	2 3 4 5 6 7 8 Entra a ls th	Cash prizes	194, 543. 206, 400. 11, 621. 22, 339. Yes	513,443. 372,208. 30,671. 75,989. Yes% X No	Yes %	(add column (a) through column (c)) 707,986. 578,608. 42,292. 98,328. 719,228. -11,242.
D-RECT 9	2 3 4 5 6 7 8 Entra a ls th	Cash prizes	194, 543. 206, 400. 11, 621. 22, 339. Yes	513,443. 372,208. 30,671. 75,989. Yes% X No	Yes %	(add column (a) through column (c)) 707,986. 578,608. 42,292. 98,328. 719,228. -11,242.

b If 'Yes,' explain

		243510	Page .
11	Does the organization conduct gaming activities with nonmembers?	· · X Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?	· · Yes	XNo
13	Indicate the percentage of gaming activity conducted in	1	
	The organization's facility	a	ક
b	An outside facility	b 100	9.00%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
	Name Diane Furlow		
	Address • 9372 W University Blvd Odessa, TX 79764		
15 a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	· · · Tyes	XNo
t	o If 'Yes,' enter the amount of gaming revenue received by the organization	ount	_
	of gaming revenue retained by the third party \$		
C	of 'Yes,' enter name and address of the third party		
	Name •	- -	
	Address		
16	Gaming manager information		
	Name •		
	Gaming manager compensation		
	Description of services provided		. – – –
	Director/officer Employee Independent contractor		
17	Mandatory distributions		
	a is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	X Yes	No
ı	b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
D-	organization's own exempt activities during the tax year \$ 12,229. It IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (in) and (v)	
Pai	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any addition information. See instructions	nal	

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2016

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

Open to Public Inspection

Name of the organization

International Association of Lions

Pt VI, Line 6 The Organization has volunteer members from the community.

Pt VI, Line 8b No committees.
Pt VI, Line 11b The Board approves the Form 990 prior to filing.

TEEA4901 08/16/16