Return of Organization Exempt From Income Tax

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Do not enter social security numbers on this form as it may be made public. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

A	For the	2017 cal	endar year, or tax year beginning Jul 01, 2017 , and endin	g Jun 30, 2	2018	
		applicable	C Name of organization Lions Club 14257 Kodiak		Identification num	ber
□△	ddress o	change	Doing business as			
$\overline{\Box}$.	lama ah		Number and street (or PO box if mail is not delivered to street address) Room/suite	92-60031	41	
Name change			Box 1735	E Telephone	number	
∐ı	nitial retu	ım	City or town State ZIP code	007 406	2550	
	mutan leni	/terminated	Kodiak AK 99615	907-486-2	2550	
닠'	mai iewiii	Ленницев	Foreign country name Foreign province/state/county Foreign postal code			
\sqcup	mended	i return		G Gross recei	ipts \$1	31785.
\square_A	pplicatio	n pending	F Name and address of principal officer. Joyce Gregory	Is this a group return fo	or subordinates?	Yes X No
ш.			100 7 11 11 11 11 11 11 11 11 11 11 11 11 1	Are all subordinates	7	Yes No
				•		182 [140
1 Ta	x-exem	pt status	501(c)(3) X 501(c) (4) ◀ (insert no) 4947(a)(1) of 2 527	If "No," attach a list	(see instructions)	
<u>J </u>	Vebsite	: ▶	H(c)	Group exemption n	umber 🕨	
(K) F	orm of o	rganization	X Corporation Trust Association Other ▶ L Year of fo	mation 1965	M State of legal	domicile AK
P	art I	Su	mmary	·		
	1			able and ed	ducational	
Governance		progra		***********	**********	
, E	1	Fitzatz				
T P	1 2	Chock	his box if the organization discontinued its operations or disposed of	then 050/	of its mat	
ΤŠ	2			i i		
	3 4		of voting members of the governing body (Part VI, line 1a)		3	11
vities	1		of independent voting members of the governing body (Part VI, line 1b)		4	11
ctivities &	5		mber of individuals employed in calendar year 2017 (Part V, line 2a)	· · · ·	5	
₹₹	6	Total nu	mber of volunteers (estimate if necessary)		6	50
ງ _ີ	7a	Not were	related business revenue from Part VIII, column (PIREZIVED		7a	
	b	Net unre	elated business taxable income from Form 990 T, line 34	Delay Vara	7b	
		Contrib	utions and grants (Part VIII, line 1h)	Prior Year		rent Year
Revenue	8			127		4055.
Н	9			121	92.	12102.
æ	10	investm	ent income (Part VIII, column (A), lines 3, 4 and GODEN UT			
	11	Other re	evenue (Part VIII, column (A), lines 5, 6d, 8c , 9c, 10c, and 11c)	757		61619.
	12		enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1007		77776.
	13		and similar amounts paid (Part IX, column (A), lines 1–3)	749	22.	46624.
	14		s paid to or for members (Part IX, column (A), line 4)			
Expenses	15		other compensation, employee benefits (Part IX, column (A), lines 5–10)			
eus	16a		ional fundraising fees (Part IX, column (A), line 11e)	ns nastarena	35.634	
S.	b			2000年		12
ш	17		xpenses (Part IX, column (A), lines 11a-11d, 11f-24e)	445		40626.
	18		penses. Add lines 13–17 (must equal Part IX, column (A), line 25) .	1194		87250.
	19	Revenu	e less expenses. Subtract line 18 from line 12	-187		-9474.
Net Assets or Fund Balances				ginning of Current		of Year
Sse	20		sets (Part X, line 16)	460	01.	41652.
a a	21		bilities (Part X, line 26)			1845.
4			ets or fund balances. Subtract line 21 from line 20	460	01.	39807.
	rt II		nature Block			
			ry, I declare that I have examined this return, including accompanying schedules and statements, are set, and complete. Declaration of preparer (other than officer) is based on all information of which p			
4110	Deiler, IL	is a de, con	Love Telesall	reparer nessariy kato	····euge	
Sig	jn –		Signature of officer	Date		
He	re				1-5-18	
					/-3 /0	
		Don	Type or print/hame and title It/Type preparer's name Preparer's signature	Date	PTI	N N
Pa	id	[""	C , Lebarer a additator	Ch	neck X if	•
	eparei	Jез	come Selby Jerome Selby	10/31/2018 se	elf-employed PO	1218543
	•		n's name ► Kodiak Tax Service	<u> </u>	92-0078275	
U\$	e Onl	у			907-486-48	
	v the li	KS discu	ss this return with the preparer shown above? (see instructions)		X	Yes No

	art III Statement of Program Service Accomplishments	92-6003141	Page Z
·······	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission:		
	Charıtable and educational programs	• • • • • • • • • • • • • • • • • • • •	
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 No
	If "Yes," describe these new services on Schedule O.		<u></u> 110
3	Did the organization cease conducting, or make significant changes in how it conducts, any program		
	services?	. Yes	X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services	s, as measured b	у
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and all the total expenses, and revenue, if any, for each program service reported.	ocations to other	' S,
	the total expenses, and revenue, it any, for each program service reported.		
4a	(Code:) (Expenses \$ 87250 . including grants of \$) (Revenue	\$	<u> </u>
	Charitable and educational programs	*	/
		· • • • • • • • • • • • • • • • • • • •	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue	\$)
	••••••		
	••••••		
4c	(Code:) (Expenses \$ including grants of \$) (Revenue	\$)
			••••
	•••••••••••••••••••••••••••••••••••••••		
	••••••		
A =1	Other program conjects (Describe in Schedule O.)		
4d	Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$	`	
4e	Total program service expenses ► 87250.		

Form 990 (2017) Lions Club 14257 Kodiak **Checklist of Required Schedules** Part IV Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 Х Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 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, 5 Х 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 6 Х 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 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes." 8 Х 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 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 If the organization's answer to any of the following questions is "Yes," then complete Schedule D. Parts VI, VII, 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 11a b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more 11b Х c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. 11e 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 Х 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a X b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," 12b and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E........ 13 Х 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking. fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14b X Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or 15 Х Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other Х 16 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

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? Х

18

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		_
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	21	^_	<u> </u>
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		,,
22		22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	1		
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K. If "No," go to line 25a	24a		Х
	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 any tax-exempt bonds?	24c		
	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 Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	ř	. 1	1
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		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		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?	<u> </u>		
	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	33		x
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		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled	554		
~	entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	755	-	
	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	30		
٠.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	37		👢
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	31		Х
30	102 Note: All Form 000 filers are required to complete Schooling O			
	19? Note. All Form 990 filers are required to complete Schedule O	38	_X	L

Statements Regarding Other IRS Filings and Tax Compliance
Check if Schedule O contains a response or note to any line in this Part V Part V

	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			
þ	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		大きる	
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	MAN		THE REAL PROPERTY.
	gaming (gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	影響		1
	Statements, filed for the calendar year ending with or within the year covered by this return .			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)		10/15. 10 Tare G	The same
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		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	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		Х
b	If "Yes," enter the name of the foreign country:		2.14	W.
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts	1	3	
	(FBAR).	***		ST.
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	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 any contributions that were not tax deductible as charitable contributions?	6a		Х
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or]
	gifts were not tax deductible?	6b	, -	ļ
7	Organizations that may receive deductible contributions under section 170(c).		34%	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	建		
	and services provided to the payor?	7a ·		
þ	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c	£.3.£ 90.	47 EST 1
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		├
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		├
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		├
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	25.28e.	di serlit
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	\$ T.		1.12
9	Sponsoring organizations maintaining donor advised funds.	8	4 A. O.	16.15
э a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	STATE OF	1 100
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter:	18:30	1334	المقارب الأ
а	Initiation fees and capital contributions included on Part VIII, line 12			建
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		0	
1	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources		12 Mars	
-	against amounts due or received from them.)			3
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	5778 22	Better.
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	美2 蘭	Tuci.	54
3	Section 501(c)(29) qualified nonprofit health insurance issuers.	了整		
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.	经数	2	1300
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			 1235
C	Enter the amount of reserves on hand	12.0		学学
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
b	If "Yes." has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14b		

Part VI

Sect	ion A. Governing Body and Management				
4-	Enter the mumber of crating marshau of the marshault in the state of t		<u> </u>	Yes	No
та	Enter the number of voting members of the governing body at the end of the tax year	1a 11	- [,∗,		ļ, · :
	If there are material differences in voting rights among members of the governing body, or				- 1
	if the governing body delegated broad authority to an executive committee or similar		1.5		ŀ
	committee, explain in Schedule O.			,,	ĺ.
b	Enter the number of voting members included in line 1a, above, who are independent	1b 11	t. [1.7	Ι.
2	Did any officer, director, trustee, or key employee have a family relationship or a business relation	•	-	<u> </u>	
_	any other officer, director, trustee, or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or under				
	supervision of officers, directors, or trustees, or key employees to a management company or o	•	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 w		4		Х
5	Did the organization become aware during the year of a significant diversion of the organization		5		Х
6	Did the organization have members or stockholders?		6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect		}		
	one or more members of the governing body?		7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members	ers,			
	stockholders, or persons other than the governing body?		7b	 ,	Х
8	Did the organization contemporaneously document the meetings held or written actions underta	ken during	1.		
	the year by the following:			~	
а	The governing body?		8a	Х	
b	Each committee with authority to act on behalf of the governing body?		8b		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be				
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule (9		X
Sect	ion B. Policies (This Section B requests information about policies not required by the I	<u>nternal Revenue C</u>	ode.)		
				Yes	No
10a			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of suc				
	affiliates, and branches to ensure their operations are consistent with the organization's exempt		10b		
11a	• • • • • • • • • • • • • • • • • • • •	e filing the form? .	11a		X
ь	, , ,				- ``'
12a		· . · . · · · . ·	12a		X
þ	Were officers, directors, or trustees, and key employees required to disclose annually interests that could gi		12b	<u> </u>	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy?	If "Yes,"			
	describe in Schedule O how this was done		12c		
13	Did the organization have a written whistleblower policy?		13		X
14	Did the organization have a written document retention and destruction policy?		14		X
15	Did the process for determining compensation of the following persons include a review and app	•		-57	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation			·	
a	The organization's CEO, Executive Director, or top management official		15a		X
b	Other officers or key employees of the organization		15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		19. 18. 18. 18. 18. 18. 18. 18. 18. 18. 18	, ,	, ,
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arra	-	7	ور سند ادا	
_	with a taxable entity during the year?		16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to ev			,	,
	participation in joint venture arrangements under applicable federal tax law, and take steps to sa		3.7.	~ -	
	the organization's exempt status with respect to such arrangements?	· · · · · · · · · · · · · · · · · · ·	16b		
	tion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed ► AK				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and	990-T (Section 501(c)(3)s c	nly)	
	available for public inspection. Indicate how you made these available. Check all that apply.				
		kplain in Schedule O			
19	Describe in Schedule O whether (and if so, how) the organization made its governing document	s, conflict of interest	policy	and	
	financial statements available to the public during the tax year.				
20	State the name, address, and telephone number of the person who possesses the organization'				
	Joyce Gregory	907-539-53	81		-
	Box 1735 KODIAK AK 99615				

Form 990 (2017)	Lions Club	14257	Kodiak

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. Position (do not check more than one (F) Estimated Name and Title Average Reportable Reportable box, unless person is both an compensation compensation hours per officer and a director/trustee) amount of week (list any from from related other Officer Highest compensated employee Individual trustee Institutional trustee Key employee hours for the organizations compensation related organization (W-2/1099-MISC) from the organizations (W-2/1099-MISC) organization below dotted and related organizations (1) Lloyd Shanley Past President Х (2) Jeremiah Meyer President Х (3) Kris Jones 4 1st Vice Pres Х 0 0 (4) Hap Heiberg 2nd Vice Pres 0 0 (5) Tracy Craig Secretary Х 0 0 0 (6) Joyce Gregory 9 Treasurer 0 0 (7)_____

92-6003141

Page 7

Pa	art VII Section A. Officers, Directors, Tr	ustees, Key Er	nplo	yee	s, a	nd i	High	est	Compensated	Employees	(continu	ed)
	(A) Nàme and title	(B) Average hours per week (list any	box, office	unles er an	Pos neck s pe d a d	rson	than on the street of the stre	an ee)	(D) Reportable compensation from	(E) Reportabli compensati	on a	(F) Estimated imount of other
		hours for related organizations below dotted tine)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizatio (W-2/1099-M	ns cor ISC) or a	mpensation from the ganization nd related ganizations
(15)				<u> </u>								
(16)												
<u>(17)</u>												
(18)												
(19)												
(20)												··· · · · · · · · · · · · · · · · · ·
(21)									- 12			·
(22)												
(23)												
(24)			-									-
(25)									_			
1b c	Sub-total	Section A						ightharpoons				
2	Total number of individuals (including but not in reportable compensation from the organization	imited to those							ed more than \$	100,000 of		,
3	Did the organization list any former officer, die employee on line 1a? If "Yes," complete Sche	rector, or trustee									3	Yes No
4	For any individual listed on line 1a, is the sum the organization and related organizations greindividual	of reportable co ater than \$150,	mpe	nsa	tion	and	d othe	er co	ompensation fro	m	4	X
5	Did any person listed on line 1a receive or acc for services rendered to the organization? If "	rue compensati									5	X
Sec	tion B. Independent Contractors											
1	Complete this table for your five highest comp compensation from the organization. Report o year.											x
	(A) Name and business add	Iress							(B) Description of se	rvices		C) ensation
					_							
2	Total number of independent contractors (inclumore than \$100,000 of compensation from the		nited	to th	1056	e lis	ted a	bov	e) who received	7. 7.	ing grown	MARINE !

Form 990 (2017) Lions Club 14257 Kodiak 92-6003141 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII. (D) Related or Unrelated Total revenue Revenue exempt business excluded from function revenue tax under sections revenue 512-514 Federated campaigns Contributions, Gifts, Grants and Other Similar Amounts Membership dues 1b 4055 c Fundraising events 1c d Related organizations 1d Government grants (contributions) . . . 1e All other contributions, gifts, grants, and similar amounts not included above . . . 1f Noncash contributions included in lines 1a-1f: Total. Add lines 1a-1f **Business Code** Program Service Revenue 12102 12102 2a club activities f All other program service revenue Total. Add lines 2a-2f. . . . 12102 Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds > (ı) Real (II) Personal 6a Gross rents **b** Less: rental expenses . . . c Rental income or (loss) . . . d Net rental income or (loss) . . (i) Securities (II) Other 7a Gross amount from sales of assets other than inventory. b Less: cost or other basis and sales expenses . . . c Gain or (loss) . . . d Net gain or (loss) . . . Other Revenue 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses b c Net income or (loss) from fundraising events. 9a Gross income from gaming activities. 115628 See Part IV, line 19. **b** Less: direct expenses 54009 c Net income or (loss) from gaming activities . . 61619 10a Gross sales of inventory, less returns and allowances **b** Less: cost of goods sold b Net income or (loss) from sales of inventory . Miscellaneous Revenue **Business Code** 11a All other revenue

77776

73721

Total revenue. See instructions. .

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4)	organizations i	must complete	all columns.	All other org	ganizations mus	st complete co	olumn (A).	
	neck if Schedule								•

	Check it Schedule O contains a response of note	to any mie in tins	raitin		
	not include amounts reported on lines 6b, 7b, 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				新海洲省外 党部
	domestic governments. See Part IV, line 21	46624.	46624.	100	
2	Grants and other assistance to domestic				
_	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				经常规则 。2012年11日
•	organizations, foreign governments, and foreign				THE PARTY OF THE
	individuals. See Part IV, lines 15 and 16				
A	Benefits paid to or for members				以为了一个工作的。 在1000年更多的第二人。 1000年更多的第二人。
4				建工作工程等的指示的	ALCOHOLD STATE OF
5	Compensation of current officers, directors,				
_	trustees, and key employees .			,	
6	Compensation not included above, to disqualified		,		
	persons (as defined under section 4958(f)(1)) and			-	
_	persons described in section 4958(c)(3)(B)				
7	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):				
а	Management				
b	Legal.			······································	
C	Accounting				
đ	Lobbying		, spa a stadional contraction contract	a Santa Santa Santa Santa Maria Santa Sant	
е	Professional fundraising services. See Part IV, line 17.				;
f	Investment management fees				*
g	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				
13	Office expenses	1023.	1023.		
14	Information technology				
15	Royalties	-			
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2757.	2757.		
20	Interest				
21	Payments to affiliates				
22 23	Depreciation, depletion, and amortization		· · · · · · · · · · · · · · · · · · ·		
23 24	Insurance		Carl Part Branch	De années de l'années de l	100 de a Como II and 15 6 6 5 7
24	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	club activities	2943.	2943.	MINE STAND READS AND	10000000-5015 (1-4-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-
b		4515.	4515.		
c		1677.	1677.		
d	Education Community activities	27711.	27711.		
_	All other expenses	27711.	2,,11.		
25	Total functional expenses. Add lines 1 through 24e .	87250.	87250.		
26	Joint costs. Complete this line only if the				
-	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here ▶ if				
	following SOP 98-2 (ASC 958-720)				
			· · · · · · · · · · · · · · · · · · ·		- 000

Form 990 (2017) Lions Club 14257 Kodiak Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Parl	t X		
		•	(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	42721.	1	41652.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	2683.	4	
	5	Loans and other receivables from current and former officers, directors,	Consultation Con-	的數學	
		trustees, key employees, and highest compensated employees.		1.777	
		Complete Part II of Schedule L	CONTRACTOR LEGISLES EDITION CONTRACTOR CONTRACTOR	5	The second of Children and Children is a children in the child
	6	Loans and other receivables from other disqualified persons (as defined under section	ENGINE DE LE CONTROL DE LA	極端	WED TO WELL THE
		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			
23		organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
A8	8	Inventories for sale or use	597.	8	
	9	Prepaid expenses and deferred charges	357.	9	,
	10a	Land, buildings, and equipment: cost or		\$200 MS	
	104	other basis. Complete Part VI of Schedule D 10a			
	ь	Less: accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	· ·		14	
	15	Intangible assets		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	46001.	16	41652.
	17	Accounts payable and accrued expenses	40001.	17	1845.
	18	Grants payable		18	, 1043.
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
60	22	Loans and other payables to current and former officers, directors,		EN RE	
Liabilities	~~	trustees, key employees, highest compensated employees, and			
Ē		disqualified persons. Complete Part II of Schedule L		22	
<u></u>	23	Secured mortgages and notes payable to unrelated third parties		23	
_	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third		24	
	25			,	
		parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	ļ.	25	
	20			25	1045
	26	Total liabilities. Add lines 17 through 25	CANADA CA	26	1845.
m		Organizations that follow SFAS 117 (ASC 958), check here ► X and			
ë		complete lines 27 through 29, and lines 33 and 34.		建	
lan	27	Unrestricted net assets	46001.	27	39807.
Ba	28	Temporarily restricted net assets		28	
פַ	29	Permanently restricted net assets		29	
Fund Balances		Organizations that do not follow SFAS 117 (ASC958), check here			
6		complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ä	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net	33	Total net assets or fund balances	46001.	33	39807.
-	34	Total liabilities and net assets/fund balances	46001.	34	41652.
				<u> </u>	

	Reconciliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI	1			ge 12
	al revenue (must equal Part VIII, column (A), line 12)				
		4		,	
2 Tota	al expenses (must equal Part IX, column (A), line 25)	B[77	776.
		2		87:	250.
3 Rev	venue less expenses. Subtract line 2 from line 1	3		-9	474.
4 Net	assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		46	001.
5 Net	unrealized gains (losses) on investments	5			
6 Dor	nated services and use of facilities	6			
7 Inve	estment expenses	7			
8 Prio	or period adjustments	8		3:	280.
9 Oth	er changes in net assets or fund balances (explain in Schedule O)	9			
	assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	<u>umn (B)) </u>	10		39	807.
Part XII	Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
	counting method used to prepare the Form 990: X Cash Accrual Other		_ []		. 3
	e organization changed its method of accounting from a prior year or checked "Other," explain in		\`.	'	
	nedule O.		· , ,		_
	re the organization's financial statements compiled or reviewed by an independent accountant?		2a	Х	
	es," check a box below to indicate whether the financial statements for the year were compiled or				
rev	iewed on a separate basis, consolidated basis, or both:		Ĭ.	, ,	
х	Separate basis		<u>.</u>	1, 1	· · ·
b We	re the organization's financial statements audited by an independent accountant?		2b		х
	res," check a box below to indicate whether the financial statements for the year were audited on a			7.5	
	parate basis, consolidated basis, or both:			,	,
	Separate basis				l.
c If"	/es" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight	of			
	audit, review, or compilation of its financial statements and selection of an independent accountant?	OI .	2c	r <u>.</u> 1.	x
	ne organization changed either its oversight process or selection process during the tax year, explain in		20	-, ,	^
	nedule O.	1			, ,
	a result of a federal award, was the organization required to undergo an audit or audits as set forth in		Ĭ	مرا بي بيائر	ĺ
	Single Audit Act and OMB Circular A-133?		. За		х
	res," did the organization undergo the required audit or audits? If the organization did not undergo the	• •			
	uired audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
<u> </u>				990	(2017)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

► Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

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-B

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 (Proxy Tax) (see separate instructions), then

_ • •	ection 50 ((c)(4), (5), or (6) or	ganizations. Complete Part III.			
Nam	e of organization				r Identification number
Lic	ons Club 14257	Kodiak		92-60	03141
Pa	rt I-A Complete if t	he organization is exempt und	er section 501(c) or is a section 527 o	organization.
1	Provide a description of the	he organization's direct and indirect	political campaign	activities in Part IV (see i	nstructions for
	definition of "political cam			•	
2	Political campaign activity	y expenditures (see instructions)			
3	Volunteer hours for politic	cal campaign activities (see instruction			
Pa	rt I-B Complete if t	he organization is exempt und	er section 501(c)(3).	
1	Enter the amount of any	excise tax incurred by the organization	on under section	4955 ▶ \$	
2		excise tax incurred by organization r			
3		ed a section 4955 tax, did it file Form			
4a	_		-		. Yes No
b	If "Yes," describe in Part	IV.			
Pa	rt I-C Complete if the	he organization is exempt und	er section 501(c), except section 501((c)(3).
1		expended by the filing organization			
2		iling organization's funds contributed			
	527 exempt function activ	vities			
3	•	penditures. Add lines 1 and 2. Enter			
				·	
4		file Form 1120-POL for this year?			
5	Enter the names, address	ses and employer identification num	ber (EIN) of all se	ction 527 political organiza	itions to which the filing
		ents. For each organization listed, e			
	the amount of political co	ntributions received that were promp	otly and directly de	elivered to a separate politi	cal organization, such
	as a separate segregated	fund or a political action committee	(PAC). If addition	al space is needed, provid	le information in Part IV.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds if none, enter -0-	contributions received and promptly and directly
				tunus ir none, enter-u-	delivered to a separate
					political organization If
			:		none, enter -0-
(1)					
· ·					
(2)					
(3)					
(4)					
(5)					
	· - · · · · · · · · · · · · · · · · · ·	··· ·· · · · · · · · · · · · · · · · ·			
(6)		p	ł	1	i

Par	t II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	For	n 5768	}	
For e	each "Ye	s," response on lines 1a through 1i below, provide in Part IV a detailed	(6	a)		(b)	
		f the lobbying activity.	Yes	No	A	mount	t
1	During	he year, did the filing organization attempt to influence foreign, national, state or local	;	~			·····
		on, including any attempt to influence public opinion on a legislative matter or		,			
		dum, through the use of:	- ' , '				
a		ers?		X			
b		ff or management (include compensation in expenses reported on lines 1c through 1i)?	ļ	X			
c d		dvertisements?		X			
e		ions, or published or broadcast statements?		X			
f		o other organizations for lobbying purposes?		X			
g		ontact with legislators, their staffs, government officials, or a legislative body?		X			
h		demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Х			
i		ctivities?		Χ			
j		dd lines 1c through 1i		13/2			
2a		activities in line 1 cause the organization to be not described in section 501(c)(3)?	<u> </u>	Χ	و سر منا د لگ	a-14-1	
b		enter the amount of any tax incurred under section 4912	' .				
		enter the amount of any tax incurred by organization managers under section 4912		~ X	·		
	t III-A	ng organization incurred a section 4912 tax, did it file Form 4720 for this year?	-\/F\				
rai	L III-A	Complete if the organization is exempt under section 501(c)(4), section 501(501(c)(6).	C)(5),	or s	ection		
						Yes	No
1		ubstantially all (90% or more) dues received nondeductible by members?			1	Х	
2		organization make only in-house lobbying expenditures of \$2,000 or less?			2		X
3	t III-B	organization agree to carry over lobbying and political campaign activity expenditures from the prior year. Complete if the organization is exempt under section 501(c)(4), section 501(3		Χ
		501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes."				line :	3, is
1		ssessments and similar amounts from members		1_			
2		162(e) nondeductible lobbying and political expenditures (do not include amounts of I expenses for which the section 527(f) tax was paid).					
а		year	:	' بــــــــــــــــــــــــــــــــــــ			
a h		er from last year	•	2a 2b			
c			•	2c			
3	Agarea	ate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues.	•	3			
4		s were sent and the amount on line 2c exceeds the amount on line 3, what portion of the	•	1.70 A			
		does the organization agree to carryover to the reasonable estimate of nondeductible		. 2			
	lobbyin	g and political expenditure next year?		4			
5		amount of lobbying and political expenditures (see instructions)		5			
Part		upplemental information					
		escriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro	up list); Par	t II-A, lii	nes 1	and
2 (se	e instruc	ions); and Part II-B, line 1. Also, complete this part for any additional information.					
							.
							• • • • •
				• • • • •			
							. -
			-		-		-
				- 	. .		

Lions Club 14257 Kodiak 92-6003141 Page 2 Schedule G (Form 990 or 990-EZ) 2017 Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events (add col (a) through col (c)) (event type) (event type) (total number) Revenue Gross receipts Less: Contributions . . . Gross income (line 1 minus line 2) . . . Cash prizes Noncash prizes Direct Expenses Rent/facility costs Food and beverages . . . Entertainment Other direct expenses . . Net income summary. Subtract line 10 from line 3, column (d) Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more Part III than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col (a) through col (c)) 60,991. 54,637. 115,628. Gross revenue . . . 16,640. 16,640. Direct Expenses Cash prizes Noncash prizes Rent/facility costs 36,796. 573. Other direct expenses 0.0% X Yes 100.0% Yes 0.0% Yes No X No Volunteer labor 54,009. Direct expense summary. Add lines 2 through 5 in column (d) 61,619. Net gaming income summary. Subtract line 7 from line 1, column (d) Enter the state(s) in which the organization conducts gaming activities: AK If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? . . Yes b If "Yes," explain:

Schedu	ule G (Form 990 or 990-EZ) 2017 Lions Club 14257 Kodiak	<u>92-</u>	<u>600:</u>	3141 Pa	ge 3
11	Does the organization conduct gaming activities with nonmembers?			res N	
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?		\Box	es XN	lo
13	Indicate the percentage of gaming activity conducted in:	•	ш.		•
а	The organization's facility	13a		0.00	
ь	An outside facility	13b		100.00) %
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	;			
	Name ▶				 -
	Address •				
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		XY	∕es	lo
	If "Yes," enter the amount of gaming revenue received by the organization \blacktriangleright \$ 60,991. and the amount of gaming revenue retained by the third party \blacktriangleright \$ 18,297. If "Yes," enter name and address of the third party:		.		-
	Name ► The Village Bar				
	Address ► 410 Marine Way KODIAK AK 99615-			• • • • • • • • • • • • • • • • • • • •	
16	Gaming manager information:				
	Name ▶ Joyce Gregory				
	Gaming manager compensation > \$				
	Description of services provided ▶oversees gaming income and reports				
	X Director/officer				
	Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		XY	/es 🔲 N	lo
	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$			43,000).
Part	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional See instructions				
		-			
	•••••••••••••••••••••••••••••••••••••••				
					· -
					· • • •
		, 			·
	•	· 			

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service

Name of the organization

Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Grants and Other Assistance to Organizations,

► Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information.

2017	nen to Public
Ø	Ones

OMB No. 1545-0047

Employer Identification number 92-6003141

ş Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form |X| Yes | Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. the selection criteria used to award the grants or assistance?. General Information on Grants and Assistance Lions Club 14257 Kodiak Parti Part II

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) KIB School Dist 730 Mi 99615 AK KO	92-6000147	7	16,564.		,		Education
(2)							
(6)							
(4)							
(9)							
(9)							
(μ)							
(8)							
(6)							
(10)							
(11)							
(12)							
2 Enter total number of section 501(c)(3) and government organiz3 Enter total number of other organizations listed in the line 1 tabl	n 501(c)(3) and organizations list	government organizited in the line 1 tabl	zations listed in the line 1 table.	e 1 table.		A A	

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

Schedule I (Form 990) (2017)

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.

Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service **Employer identification number** Name of the organization Lions Club 14257 Kodiak 92-6003141 Page 6, Part VI, Line 11b Form 990 is reviewed by the Treasurer who then reports to the board when the 990 is completed and has been sent. Any board member is free to review the Form 990 upon request. Page 10, Line 1, Grants See attached list of grants. \$46,624.