Return of Organization Exempt From Income Tax

2018

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.

Open to Public Inspection

<u>A</u>	Fo	r the	2018 calend	lar year, or	tax year begi	nning		06-01	, 2018, and	ending		05	-31 ,2019	1
В	Che	eck if a	pplicable	C Name of (organization FRA	TERNAL ORD	ER OF EAGLES	528					D Employer idei	ntification no
	Add	dress c	hange	Doing bus	siness as				<u> </u>				31-02871	50
		me cha	-			ox if mail is not deliv	rered to street address)			Roon	n/suite		E Telephone nun	
		al retu	•	i .	FIRST AV		,							
Ī			n/terminated		•		or foreign postal code						G Gross receipts	
Ħ		ended			•		or loreign postal code							84,366
H					LETOWN, O		TARR HOWARD			1,,,	-1			
ш	App	olicatio	n pending	1	d address of princip		VARD HOWARD			- 1			or subordinates?	
_	_			1	AS C ABOY		ri		\sim	— "(s included?	_
<u> </u>			ot status	501(c)(3)	∆ 501(c) (1 C)) ((insert no)	4947(a)(1) or	<u> </u>	V				a list. (see instructi	ons)
<u>1</u>			► N/A	i				1			c) Group exer			
K			ganization X		Trust As	sociation U Oth	er 🕨	L Yea	ar of formation	2012	M State	of lega	I domicile OH	
F	art		Summar	<u> </u>		·								
		1	Bnefly descr	ibe the orga	anization's mis:	sion or most sigi	nificant activities	SOCIAL				7		
çe											IVED			
Governance									FRE	<u> </u>	1 4	18)	\	
err								_	·			10	1	
Š	-	2	Check this b	ox ▶ ∐ if	the organization	n discontinued i	ts operations or dis	posed of mo	ore/thair 25%	2 M/2	et e assets	Jig Sg	21	
∞ ∞	l												1\	409
es		4	Number of ir	ndependent	voting membe	rs of the govern	ing body (Part VI, li	ne 1b) •	سننا ۱۰۰۱		EN U	14	١	405
<u>vit</u>		5	Total numbe	r of individu	ıals employed ı	n calendar year	2018 (Part V, line 2	(a) · ·	/€	ليافاد		5		9
Activities &		6	Total numbe	r of volunte	ers (estimate if	necessary)	ing body (Part VI, li 2018 (Part V, line 2		ا			6		
⋖							nn (C), line 12 -					7a		0
		b	Net unrelate	d business	taxable income	e from Form 990)-T, line 38 · ·					7b		0
											Prior Year		Current	Year
		8	Contributions	s and grant	s (Part VIII, line	e 1h)								44,412
ne		9	Program ser	vice revenu	ue (Part VIII, lin	e 2q)								0
Revenue			-				nd 7d)							43,387
ě							c, 10c, and 11e)							170,380
_		12					t VIII, column (A), I							258,179
	-+						lines 1-3)							24,937
	- 1						ine 4)						 	24,331
							t IX, column (A), line						<u> </u>	126 046
es	- {												 	126,946
Expenses	- 1			-			11e) · · · · ·			-			 	
Š	-					olumn (D), line 2	·						 	
Ш	- 1		•	•		ines 11a-11d, 11	·			-			 	69,360
							column (A), line 25)		• • • • • •				<u> </u>	221,243
	_	19	Revenue les	s expenses	Subtract line	18 from line 12							 	<u>36,936</u>
ssets or	ě									Beginn	ing of Current		End of	
set	릁		Total assets	•	•						186	, 583	3	224,580
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	힡		Total liabilitie		•						2	<u>, 842</u>	2	3,903
		22		 		line 21 from line	2 0 · · · · · ·				183	,741	<u> </u>	220,677
	art			re Block		=								
							npanying schedules and Il information of which pr			y knowle	dge and belief,	ıt ıs		
,	, 00.	1	na complete Be	Claration of pro	Sparer (outer unant	10	/		- Intomicago			T	•	
٥.			MARK	YOUNG	///0	ruce 1	my		<u></u>				09-05-2	019
Sig	jn		Signatui	re of officer	Seseta	rul .		_	600-			Date		
He	re		MARK	YOUNG,	PRESIDEN	# MA	NKE. YO	4 NG	<u>Secr</u>	<u>eta</u>	ry_	/-	20-2	2020
			Type or	print name and	d title									
			Print/Type pre	eparer's name		Preparer's signat	J.Q J	D at	te		Check	ıf	PTIN	
Pa	id		DANA L	PICARD	CPA	DANA L PI	CARD CPA	7 12.	-04-2019		self-employe	ed	P000452	47
Pre	epa	arer	Firm's name	>	NENNI &	COMPANY C				Firm's	EIN P			
Us	e (Only	Firm's addres	is 🕨		UNIVERSITY				Phon	e no			
						OWN OH 450						3-4	24-1939	
May	the	e IRS	discuss this	return with		nown above? (s							· · · X Yes	□No
_						parate instruc								990 (2018)

Form 990 (2018)

	1990 (2018) FRATERNAL ORDER OF EAGLES 528	31-0287150	Page 2
Рą	rt III Statement of Program Service Accomplishments		
_	Check if Schedule O contains a response or note to any line in this Part III	· · · · · · · · · · · ·	· · · · · <u> </u>
1	Briefly describe the organization's mission		
	SOCIAL CLUB		
			-
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	□ No
	If "Yes." describe these new services on Schedule O		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program		
	services?	· · · · Yes	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, as measured	d by	
	expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other		
	the total expenses, and revenue, if any, for each program service reported		
4a	(Code) (Expenses \$188,990 including grants of \$) (Revenue	\$)
	SOCIAL CLUB		
41.	(O. d.) (D.)		
4b	(Code) (Expenses \$ including grants of \$) (Revenue	\$,
		-	
		-	
4c	(Code) (Expenses \$ including grants of \$) (Revenue	\$)
		·	
4d	, , , , , , , , , , , , , , , , , , , ,		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► 188,990		

Form 990 (2018)
Part IV C 8) FRATERNAL ORDER OF EAGLES 528
Checklist of Required Schedules

٠.,			1	
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
_	complete Schedule A · · · · · · · · · · · · · · · · · ·	1		<u>X</u>
2 3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
•	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		
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		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7_		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9	<u> </u>	<u>X</u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	40		v
44	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		<u>X</u>
11	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			
2	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"		~ -	[
a	complete Schedule D, Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more		11	
~	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Χ
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		_X_
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If	426		v
12	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	14a		<u>^</u>
14a b	Did the organization maintain an office, employees, or agents outside or the Office States >	170		
	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		X
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		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (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		<u>X</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		,	
20	If "Yes," complete Schedule G, Part III	19	Х	
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u>X</u>
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	24		v
FFA		21	200 /20	X

<u>ra</u>	rt IV Checklist of Required Schedules (continued)		, · · ·	
22	Up the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	<u> </u>	Yes	No
、	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			<u>^`</u>
	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			<u> </u>
	\$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		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		i
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		
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?	İ		
	If "Yes," complete Schedule L, Part I	25b		
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		X
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		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			ĺ
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			١
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			,
•	conservation contributions? If "Yes," complete Schedule M	30_		X
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,"	,,		Į,
22	Complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	33		v
34	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	-33		X
34	or IV, and Part V, line 1 · · · · · · · · · · · · · · · · · ·	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	1000		_^_
•	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	1		
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	Х	
Par			-	
	Check if Schedule O contains a response or note to any line in this Part V			
		_	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
b	Enter the number of Form W-2G included in line 1a Enter -0- if not applicable]		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and]		
	reportable gaming (gambling) winnings to prize winners?	1c	Х	

_	990 (2018) FRATERNAL ORDER OF EAGLES 528 31-02871	50	F	age 5
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
,	•		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		٠.	
	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?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
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		X
b	If "Yes," enter the name of the foreign country	ŀ		-
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			<u> </u>
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	1	Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	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		1	
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	1	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	<u> </u>	<u> </u>	ليب
	and services provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			١
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	<u> </u>	-	1 1
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	\vdash	X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		X
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?	8		- 1
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		-
10	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII. line 12	-	- 2	
a	Initiation fees and capital contributions included on Part VIII, line 12	1		
ь 11	Section 501(c)(12) organizations. Enter	ł		
''a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources	1		
•	against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			·ï
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1	1	,
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			1
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	1_		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year	15		Χ
	If "Yes," see instructions and file Form 4720, Schedule N			1
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O			1
EEA		Form	990 (2	2018)

Pa	rt 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			\cdot X
Sec	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or	١ ١	_]
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O		٠	
b	Enter the number of voting members included in line 1a, above, who are independent 1b 405		<u></u>	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Χ
6	Did the organization have members or stockholders?	6	Χ	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a	Χ	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b	Χ	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		,	ļ
	the year by the following			
а	The governing body?	8a	Χ	
þ	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 reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)	,		
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	<u>X</u>	, ,
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	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	ļ
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			١.,
	describe in Schedule O how this was done	12c		X
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	
15	Did the process for determining compensation of the following persons include a review and approval by		^	
_	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	450		-~
a		15a 15b		X
b	· ·	130		
16-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	'		.
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
h	with a taxable entity during the year?	104		
b	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	100		L
17	List the states with which a copy of this Form 990 is required to be filed Ohio			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A 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 Donnerquest Other (explain in Schedule O)			
19	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			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	MARK YOUNG (513)465-0239, 1300 FIRST AVE, MIDDLETOWN, OH 45044			

Form	990	(2018)	

FRATERNAL ORDER OF EAGLES 528

31-0287150

Page 7

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

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

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - · List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the
 organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee (C) (B) (D) (F) (A) (do not check more than one Name and Title Average Reportable Reportable Estimated box, unless person is both an hours per compensation compensation from amount of officer and a director/trustee) veek (list any hours for organizations compensation the (W-2/1099-MISC) related Individual organization from the Institutional trustee Key employee ighest compensated rganizations (W-2/1099-MISC) organization and related below dotted organizations line) Itrustee (1) EARSHEL PHILPOT TRUSTEE CHAIRMAN Х 0 0 (2) MICHAEL COPE Χ 0 TRUSTEE 0 (3) DARRELL COLDIRON Х 0 0 TRUSTEE (4) THEODORE BLOCK JR Х 0 0 TRUSTEE (5) JEFFREY REIDEL 0 TREASURER ٥ 0 (6) EDWARD HOWARD JR PAST WORTHY PRESIDENT 0 0 (7) ERIC SPEARS 0 0 WORTHY PRESIDENT (8) PERRY DAVIS TRUSTEE 0 0 (9) DOANALD BOYD Χ WORTHY CONDUCTOR 0 0 (10)TIMOTHY WEHR X 0 0 WORTHY VICE PRESIDENT 0 (11)TODD JOHNSON Χ 0 WORTHY CHAPLAIN 0 0 (12) JUSTIN PFAU INSIDE GUARD 0 0 $(14)_{-}$

Part	90 (2018) FRATERNAL ORDER OF VII Section A. Officers, Directors, Trustees, I			nd Hi	ighe	st C	ompe	nsat	ted Employees (c	31-028 ontinued)	7150 Page 8
,	(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(do n	ot che unless er and	Posi eck mes pers	tion ore th	e an e) Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
<u>(15)</u>						_					
(16)											
(17)											-
<u>(18)</u>											
(19)											
(20)											
<u>(21)</u>											
(22)											
(23)_											
(24)											
(25)											
1b c d	Sub-total		 	· ·	· ·			* *	0		0 0
2	Total number of individuals (including but not limited reportable compensation from the organization	to those liste	d abo	ve) w	vho r	ece	ived m	ore	than \$100,000 of	()
3 4 5	Did the organization list any former officer, director, employee on line 1a? If "Yes," complete Schedule J For any individual listed on line 1a, is the sum of reporganization and related organizations greater than sindividual	for such indivortable comp \$150,000? If the compound of the co	ridual ensati "Yes," from a	on a comp	nd o plete	ther Sci	compe hedule organ	ensa J fo 	ition from the		Yes No
Secti 1	Complete this table for your five highest compensate compensation from the organization. Report compenses	· ·									
	(A) Name and business address								(B) Description of	services	(C) Compensation

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶

Page 9

Form 990 (2018)

Form 990 (2018)
Part VIII FRATERNAL ORDER OF EAGLES 528 Statement of Revenue

	•	Check if Schedule O contains a response or n	ote 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
ν ν	1a	Federated campaigns 1a				1	
an t	ь		10,135				
ည်ရှိ	C	Fundraising events 1c	10,135			-	
ifts	ď	<u>*</u>	 				
9,5 E	e	Government grants (contributions) · · 1e]
S S	f	All other contributions, gifts, grants,	 				
the	'	and similar amounts not included above	34,277				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines 1a-1f \$	34,211				
್ರಿ ಕ	9 h	Total. Add lines 1a-1f		44 412			
	 "	Total. Add lines (a-1)	7	44,412			
e	2a		Business Code				
ven	_						
Program Service Revenue	b						
Š	ا ا						
Se	d						
gran	e	Allaka				-	
Pro		All other program service revenue					
	i e	Total. Add lines 2a-2f					
	3	Investment income (including dividends, interest,	_				*
	١.	and other similar amounts)		2,159	2,159		
		Income from investment of tax-exempt bond proc				<u> </u>	
	5	Royalties	1				
		(i) Real	(ii) Personat			•	
		Gross rents · · · · · · ·					4
	l	Less rental expenses · · · ·					
	С	Rental income or (loss) · · ·					
	d	Net rental income or (loss)					
	7a	Gross amount from sales of (i) Securities	(II) Other			•	
		assets other than inventory	41,228				
	b	Less cost or other basis					
		and sales expenses · · · ·					1
		Gain or (loss)					
4.		Net gain or (loss) $\cdots \cdots \cdots \cdots \cdots \cdots$		41,228	41,228		
Ž	8a	Gross income from fundraising					•
Š		events (not including \$					
ř		of contributions reported on line 1c)		•	1		,
Other Revenue		See Part IV, line 18 · · · · · · · a					
ō		Less direct expenses $aaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaa$					
	С	Net income or (loss) from fundraising events -					
	9a	Gross income from gaming activities				•	ľ
		See Part IV, line 19 · · · · · · · · a	796,388				
	b	Less direct expenses $\cdots $ b	690,386	:			
	С	Net income or (loss) from gaming activities $\cdot\cdot$		106,002	106,002		
	10a	Gross sales of inventory, less					
		returns and allowances $\ \cdot \ a$	200,179				
	b	Less cost of goods sold $ \cdot \cdot \cdot \cdot \cdot \cdot \cdot \cdot b$	135,801			· ·	
	С	Net income or (loss) from sales of inventory · ·		64,378	64,378		
	_	Miscellaneous Revenue	Business Code				
	11a						
	b						
	С						
	d	All other revenue					
i	e	Total. Add lines 11a-11d	. •				
	12	Total revenue. See instructions	▶ ∫	258,179	213,767	0	0

Page 10

FRATERNAL ORDER OF EAGLES 528

Part IX Statement of Functional Expens
--

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (C) (D) (A) Total expenses (B) Do not include amounts reported on lines 6b, 7b, Fundraising Management and Program service 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21. 24,937 24,937 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 Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages 115,189 115,189 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 1,400 700 700 10 10,357 9,334 1,023 11 Fees for services (non-employees) 3,025 3,025 Lobbying d Professional fundraising services See Part IV, line 17 f Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 12 Advertising and promotion 10 10 13 Office expenses 4,032 885 3,147 14 1,746 1,415 3,161 15 16 43,955 21,012 22,943 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 500 500 20 21 5,587 5,587 22 Depreciation, depletion, and amortization 23 6,501 6,501 24 Other expenses litemize 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) GAMING LICENSE 969 969 b FEESDUES TO GRAND AERIE 793 793 С DEATH BENEFIT 200 200 d All other expenses 627 627 Total functional expenses Add lines 1 through 24e 221,243 188,990 32,253 0 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)

Part X **Balance Sheet**

		Check if Schedule O contains a response or note to any line in this Part X	(A)	ĖΤ	(B)
•			Beginning of year		End of year
	1	Cash - non-interest-bearing	2,854	1	15,613
	2	Savings and temporary cash investments	117,185	2	165,605
	3	Pledges and grants receivable, net	· • · · ·	3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			. "
		trustees, key employees, and highest compensated employees			
		Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and			
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary		ŀ	<u> </u>
		organizations (see instructions) Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	-	8	
As	9	Prepaid expenses and deferred charges		9	
-	10a	Land, buildings, and equipment cost or			
		other basis Complete Part VI of Schedule D 10a 120 , 511		ll	
	b	Less accumulated depreciation 10b 77,149	66,544	10c	43,362
	11	Investments - publicly traded secunties		11	
	12	Investments - other securities See Part IV, line 11		12	
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	186,583	16	224,580
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
es	22	Loans and other payables to current and former officers, directors,			+
Liabilities		trustees, key employees, highest compensated employees, and			ν.
iab.		disqualified persons Complete Part II of Schedule L		22	
_	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			
		parties, and other liabilities not included on lines 17-24) Complete Part X			
		of Schedule D	2,842	25	3,903_
	26	Total liabilities. Add lines 17 through 25	2,842	26	3,903
w		Organizations that follow SFAS 117 (ASC 958), check here ▶ 🔯 and		[
Š		complete lines 27 through 29, and lines 33 and 34.			
alar	27	Unrestricted net assets	183,741	27	220,677
Ä	28	Temporarily restricted net assets		28	
ŭ,	29	Permanently restricted net assets		29	
ų.		Organizations that do not follow SFAS 117 (ASC 958), check here	,		
S		complete lines 30 through 34			<u></u>
se	30	Capital stock or trust principal, or current funds		30	****
Net Assets or Fund Balances	31	Paid-in or capital surplus, or land, building, or equipment fund		31 32	
Š	32	Retained earnings, endowment, accumulated income, or other funds	100 741	32	000 655
	33 34	Total net assets or fund balances	183,741		220,677
	34	Total liabilities and net assets/fund balances · · · · · · · · · · · · · · · · · · ·	186,583	34	224,580

		<u>1-02871!</u>	50	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
•	• Check if Schedule O contains a response or note to any line in this Part XI		· · ·		<u>· 🔲</u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2	258,1	.79
2	Total expenses (must equal Part IX, column (A), line 25)	2	2	21,2	243
3	Revenue less expenses Subtract line 2 from line 1	3		36,9	36
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1	.83,7	/41
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	2	20,6	577
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				· 🔲
				Yes	No
1	Accounting method used to prepare the Form 990 🐰 Cash 🔲 Accrual 🔲 Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			<u>.</u>	1
	Schedule O		1[<u></u>
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				``'[
	reviewed on a separate basis, consolidated basis, or both			١, ١	
	Separate basis Consolidated basis Both consolidated and separate basis			. <u></u>	
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	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		-	ı l	1
	Separate basis Consolidated basis Both consolidated and separate basis			, -	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight			اــــا	
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		L
	If the organization changed either its oversight process or selection process during the tax year, explain in				1
	Schedule O				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			-	i
	the Single Audit Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			Ī	
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
EΑ			Form	990 (2	2018)

EEA

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization Employer identification number FRATERNAL ORDER OF EAGLES 528 31-0287150 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts 1 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for chantable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Tyes No conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 Held at the End of the Tax Year easement on the last day of the tax year Total number of conservation easements 2b Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 7/25/06, and not on a 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > Number of states where property subject to conservation easement is located 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8 If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Sched	ule D (Form 990) 2018 FRATERNAL ORDER OF	EAGLES 528		31-02	87150 Page 2
Pa	rt III Organizations Maintaining Colle	ctions of Art, Histo	rical Treasures, o	r Other Similar As	sets (continued)
3 .	Using the organization's acquisition, accession, and o	ther records, check any o	f the following that are a	a significant use of its	
	collection items (check all that apply)	·	·	_	
а	Public exhibition	d Loan or excha	nge programs		
b	Scholarly research	e Other			
С	Preservation for future generations				
4	Provide a description of the organization's collections	and explain how they furt	her the organization's ex	xempt purpose in Part	
	XIII	,	ŭ		
5	During the year, did the organization solicit or receive	donations of art, historica	I treasures, or other sim	nilar	
	assets to be sold to raise funds rather than to be mair	ntained as part of the orga	nization's collection?		· · · 🗌 Yes 🗌 No
Pai	rt IV Escrow and Custodial Arrangem				
	Complete if the organization answer	ered "Yes" on Form	990, Part IV, line 9	, or reported an amo	ount on Form
1a	is the organization an agent, trustee, custodian or oth	er intermediary for contrib	utions or other assets r	not	
	included on Form 990, Part X?				☐ Yes ☐ No
b	If "Yes," explain the arrangement in Part XIII and com-	plete the following table			
	3	5		A	Amount
С	Beginning balance			1c	
d				1d	
е	Distributions during the year			1e	
f	Ending balance			1f	
2a	Did the organization include an amount on Form 990,	Part X, line 21, for escrov	v or custodial account li	ability? · · · ·	· · · · 🗌 Yes 📗 No
b	If "Yes," explain the arrangement in Part XIII Check h	ere if the explanation has	been provided on Part	XIII	
	rt V Endowment Funds.	·	· · · · · · · · · · · · · · · · · · ·		
	Complete if the organization answer	ered "Yes" on Form 9	990, Part IV, line 1	0	
	(a	Current year (b) Pri	or year (c) Two year	s back (d) Three years ba	ck (e) Four years back
1a	Beginning of year balance				
b	Contributions				
С	Net investment earnings, gains, and				
	losses				
d	Grants or scholarships				
е	Other expenditures for facilities and				
	programs				
f	Administrative expenses				
g	End of year balance				
2	Provide the estimated percentage of the current year	end balance (line 1g, colu	mn (a)) held as		
а	Board designated or quasi-endowment	%			
b	Permanent endowment > %				
С	Temporarily restricted endowment	%			
	The percentages on lines 2a, 2b, and 2c should equal	100%			
3a	Are there endowment funds not in the possession of t	he organization that are h	eld and administered fo	r the	
	organization by				Yes No
	(i) unrelated organizations				· · 3a(i)
	(ii) related organizations · · · · · · · · · · · · · · · · · · ·	• • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •		· · 3a(ii)
b	If "Yes" on line 3a(ii), are the related organizations list		le R? · · · · · · · ·		· · 3b
4	Describe in Part XIII the intended uses of the organiza				
Pai	t VI Land, Buildings, and Equipment.		000 Daw 97 P - 4	4- O F 000 :	Dank V. Jones 40
	Complete if the organization answer	erea "Yes" on Form S	I '	ta See Form 990, I	<u> </u>
	Description of property	(a) Cost or other basis	(b) Cost or other basis	(c) Accumulated	(d) Book value
		(investment)	(other)	depreciation	
1a	Land	10,000			10,000
b	Buildings	110,511		77,149	33,362
С	Leasehold improvements	1	1		1

d Equipment

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10c)

43,362

			21.00	071 FA Pag
Part VII	Investments - Other Securities.	R OF EAGLES 528	31-02	87150 Pag
•	Complete if the organization answere	ed "Yes" on Form 990, P	art IV, line 11b See Form 990	, Part X, line 12
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuati Cost or end-of-year market	on
(1) Financial	denvatives · · · · · · · · · · · · · · · · · · ·			
(2) Closely-he	eld equity interests			
(3) Other				
(A)				
(B)				
(C)				<u> </u>
(D)				
(E)				
(F)				
(G)				
(H)				
	must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments - Program Related.			5
	Complete if the organization answere	ed "Yes" on Form 990, Pa	art IV, line 11c See Form 990	, Part X, line 13
	(a) Description of investment	(b) Book value	(c) Method of valuate Cost or end-of-year market	
(1)				
(2)		,		
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	must equal Form 990, Part X, col. (B) line 13.)		<u> </u>	
Part IX	Other Assets.			
	Complete if the organization answere	ed "Yes" on Form 990, Pa	art IV, line 11d See Form 990	, Part X, line 15
	(a) D	Pescription		(b) Book value
(1)				
(2)				
(3)		, = 0		
(4)	<u> </u>			
(5)				
(6)		<u>-</u>		
(7)				
(8)				
(9)	(h)			
	n (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities.			<u> </u>
Part X	Complete if the organization answere line 25	ed "Yes" on Form 990, Pa	art IV, line 11e or 11f See For	m 990, Part X,
1.	(a) Description of liability	(b) Book value		

				
1. (a) Description of	liability	(b) Book value		
(1) Federal income taxes				
(2) PAYROLL LIABILITIE	S	3,90	03	
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				, .
(9)				
Total (Column (b) must equal Form 990, Part.	X, col (B) line 25)	3,90	03	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII.

SCHEDULE G (Form 990 or 990-EZ)

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.

OMB No 1545-0047

2018

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

Employer identification number FRATERNAL ORDER OF EAGLES 528 31-0287150 Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17 Part I Form 990-EZ filers are not required to complete this part Indicate whether the organization raised funds through any of the following activities. Check all that apply a Mail solicitations e Solicitation of non-government grants Internet and email solicitations Solicitation of government grants c Phone solicitations g Special fundraising events d | In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, ∏ No or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (v) Amount paid to (vi) Amount paid to (III) Did fundraiser have (i) Name and address of individual (iv) Gross receipts (or retained by) (II) Activity custody or control of (or retained by) or entity (fundraiser) from activity fundraiser listed in contributions? organization col (I) Yes No 1 2 3 8 9 10 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

	o volunteer labor 1.1.1.1. [] No	
	7 Direct expense summary Add lines 2 through 5 in column (d)	690,386
	8 Net gaming income summary Subtract line 7 from line 1, column (d)	106,002
9	Enter the state(s) in which the organization conducts gaming activities OH	
а	Is the organization licensed to conduct gaming activities in each of these states?	· · · · 🔀 Yes 📙 No
b	If "No," explain	
	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? If "Yes," explain	· · · · 🗌 Yes 🛚 No

Sched	tule G (Form 990 or 990-EZ) 2018 FRATERNAL ORDER OF EAGLES 528 31-028/150 Page						
11	Does the organization conduct gaming activities with nonmembers?						
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?						
13`	Indicate the percentage of gaming activity conducted in						
а	The organization's facility						
b	An outside facility · · · · · · · · · · · · · · · · · · ·						
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records						
	Name ► MARK YOUNG						
	Address ► 1300 FIRST AVENUE, MIDDLETOWN, OH 45044						
15a	Does the organization have a contract with a third party from whom the organization receives gaming						
	revenue?						
ь	If "Yes," enter the amount of gaming revenue received by the organization \$\bigs\\$ and the						
	amount of gaming revenue retained by the third party						
С	If "Yes," enter name and address of the third party						
	Name ► THE OHIO STATE EAGLES CHARITY FUND						
	Address ► 1190 RICHFIELD CENTER, DAYTON, OH 45430						
16	Gaming manager information						
	Name ► DEBBIE PELFRY						
	Gaming manager compensation ► \$ 34,450						
	Description of services provided MANAGES GAMING						
	☐ Director/officer ☐ Employee ☐ Independent contractor						
17	Mandatory distributions						
а	is the organization required under state law to make charitable distributions from the gaming proceeds to						
	retain the state gaming license?						
b	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 ▶ \$						
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information.						
	See instructions						
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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.

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Employer identification number FRATERNAL ORDER OF EAGLES 528 31-0287150 01. Members or stockholder classes and rights (Part VI, line 6) MEMBERS PAY DUES AND CAN VOTE. 02. Member election for additional members (Part VI, line 7a) MEMBERS PAY DUES AND CAN VOTE 03. Governing body decisions (Part VI, line 7b) BOARD DECISIONS ARE APPROVED BY MEMBERS 04. Form 990 governing body review (Part VI, line 11) GOVERNING BODY REVIEWS TAX RETURN. 05. Governing documents, etc, available to public (Part VI, line 19) TAX RETURN IS AVAILABLE UPON REQUEST.