

REPORT OF SHRINE CLUBS AND TEMPLE UNITS

(File with Temple Office)

Name of Shrine Club or Unit
Address
Place of Meetings
Membership End of Year

Employer Identification Number(Shrine Clubs only)
Temple Having Jurisdiction
Charter or Organization Date
Dates Regular Meetings Held

FINANCIAL STATEMENTS

Statement of Activities			
Year Ended December 31, 2017			
(line # on Part VIII, pg 9, Form 990)			
REVENUES			
Line	Code		_____
1b	D	Contribution, Gifts & Donations	_____
2	E	Social Activities & Meals	_____
2	F	Fraternal Meetings & Visitations	_____
2	G	Dues, Initiation Fees & Assessments	_____
3	H	Investment Income*	_____
8a	I	Fundraising* (Gross) - Fraternal	_____
2	J	Fundraising* (Gross) - Charitable	_____
11	K	Sales Tax Collected	_____
11	L	Other Revenues*	_____
** TOTAL REVENUES			0

(line # on Part IX, pg 10, Form 990)			
EXPENSES			
Line			_____
1 <u>Administrative Cost:</u>			
24f	1a	Telephone and Utilities	_____
24f	1b	Office Supplies and Expenses	_____
24f	1c	Taxes, Licenses & Professional Fees	_____
24f	1d	Interest Expense on Indebtedness	_____
Building Operations & Maintenance (excludes depreciation reported below)			
24f	2	Social Activities & Meals	_____
24f	4	Fraternal Meetings & Visitations	_____
21	5	Dues Paid (pymts to affiliates)	_____
24f	6	Promotion & Publicity	_____
24f	7	Charitable Contributions*	_____
24f	8	Fundraising* (Gross) - Fraternal	_____
24f	9	Fundraising* (Gross) - Charitable	_____
24f	10	Member's Relations	_____
24f	11	Transfer to Temple	_____
24f	12	Other Expenses*	_____
TOTAL EXPENSES			0.00
(1 through 12)			_____
Excess of Revenues/(Expenses)			0.00
24f	13	Depreciation	_____
14 Surplus (Deficit)			0.00

8b, Part VIII, pg 9)

Statement of Financial Position	
Year Ended December 31, 2017	
(Part X, pg 11, Form 990)	
ASSETS	
Cash: on hand	_____
Cash: in checking*	_____
Cash: savings flex account*	_____
Certificates of Deposits	_____
Accounts receivable*	_____
Inventories for sale or use	_____
Prepaid expenses*	_____
Investments*	_____
Land (Schedule D, Form 990)	_____
Building (Schedule D, Form 990)	_____
Equipment (Schedule D, Form 990)	_____
(Note: Land, Bldg & Equip s/b at cost.)	
Minus accumulated depreciation	(_____)
Other assets*	_____
a Total Assets	0.00
LIABILITIES	
Accounts payable & accrued expenses	_____
Mortgages & other notes payable*	_____
Other liabilities*	_____
b Total Liabilities	0.00
NET ASSETS	
Balance, beginning of the year	_____
Surplus (Deficit)	0.00
c Balance, end of year	0.00
Total Liabilities & Yearend Balance	_____
d Net Assets	0.00

NOTE: b+c=d and d must = a

**** If amount is greater than \$50,000 for a club, the temple's accountant must include this financial report with annual 990 group return for this year. All unit information must be included on the temple return regardless of the amount.**

*Attach detailed list of activity.