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990

# Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047

2006

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

A For the 2006 calendar year, or tax year beginning

, 2006, and ending

, 20

B Check if applicable

- ☐ Address change  
☐ Name change  
☐ Initial return  
☐ Final return  
☐ Amended return  
☐ Application pending

Please use IRS label or print or type See Specific Instructions

C Name of organization **Lawrence N. Greenleaf**

**Masonic Building Association**

Number and street (or P O box if mail is not delivered to street address) Room/suite  
**19751 E. Mainstreet 300**

City or town, state or country, and ZIP + 4  
**Parker, CO 80138-1378**

D Employer identification number

**23 7116631**

E Telephone number

**303,841-1181**

F Accounting method: ☒ Cash ☐ Accrual  
☐ Other (specify) ▶

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Website: ▶ **http://LNG169.ORG**

J Organization type (check only one) ▶ ☒ 501(c) ( 2 ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

K Check here ▶ ☐ if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return

H and I are not applicable to section 527 organizations

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) If "Yes," enter number of affiliates ▶ **n/a**

H(c) Are all affiliates included? ☐ Yes ☐ No  
(If "No," attach a list See instructions)

H(d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☐ No

I Group Exemption Number ▶ **n/a**

M Check ▶ ☐ if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF).

Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ▶

## Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

1	Contributions, gifts, grants, and similar amounts received:		
a	Contributions to donor advised funds	1a	
b	Direct public support (not included on line 1a)	1b	
c	Indirect public support (not included on line 1a)	1c	
d	Government contributions (grants) (not included on line 1a)	1d	
e	Total (add lines 1a through 1d) (cash \$ <b>0</b> non-cash \$ <b>0</b> )	1e	-0-
2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	-0-
3	Membership dues and assessments	3	-0-
4	Interest on savings and temporary cash investments	4	3163.
5	Dividends and interest from securities	5	41017.
6a	Gross rents	6a	
b	Less: rental expenses	6b	
c	Net rental income (or loss). Subtract line 6b from line 6a	6c	-0-
7	Other investment income (describe) ▶	7	-0-
8a	Gross amount from sales of assets other than inventory	(A) Securities	(B) Other
b	Less: cost of other basis and sales expenses.	8a	
c	Gain or (loss) (attach schedule)	8b	
d	Net gain or (loss). Combine line 8c, columns (A) and (B)	8c	
8d			-0-
9	Special events and activities (attach schedule). If any amount is from gaming, check here ▶ <input type="checkbox"/>		
a	Gross revenue (not including \$ _____ of contributions reported on line 1b)	9a	
b	Less: direct expenses other than fundraising expenses	9b	
c	Net income or (loss) from special events. Subtract line 9b from line 9a	9c	-0-
10a	Gross sales of inventory, less returns and allowances	10a	
b	Less: cost of goods sold	10b	
c	Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a	10c	-0-
11	Other revenue (from Part VII, line 103)	11	-0-
12	Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12	44180.
13	Program services (from line 44, column (B))	13	-0-
14	Management and general (from line 44, column (C))	14	42531.
15	Fundraising (from line 44, column (D))	15	-0-
16	Payments to affiliates (attach schedule)	16	-0-
17	Total expenses. Add lines 13 and 14, column (A)	17	42531.
18	Excess or (deficit) for the year Subtract line 17 from line 12	18	1649.
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	1952505.
20	Other changes in net assets or fund balances (attach explanation)	20	109778.
21	Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21	2162283.

91

20

## Lawrence N. Greenleaf Masonic Building Association

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Form 990 (2006)

**Part II Statement of Functional Expenses**

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
<b>22a</b>	Grants paid from donor advised funds (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	- 0 -			
<b>22b</b>	Other grants and allocations (attach schedule) (cash \$ 31750. noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	31750.			
<b>23</b>	Specific assistance to individuals (attach schedule)	- 0 -			
<b>24</b>	Benefits paid to or for members (attach schedule)	- 0 -			
<b>25a</b>	Compensation of current officers, directors, key employees, etc. listed in Part V-A (attach schedule)	- 0 -			
<b>25b</b>	b Compensation of former officers, directors, key employees, etc. listed in Part V-B (attach schedule)	- 0 -			
<b>25c</b>	c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	- 0 -			
<b>26</b>	Salaries and wages of employees not included on lines 25a, b, and c	- 0 -			
<b>27</b>	Pension plan contributions not included on lines 25a, b, and c	- 0 -			
<b>28</b>	Employee benefits not included on lines 25a - 27	- 0 -			
<b>29</b>	Payroll taxes	- 0 -			
<b>30</b>	Professional fundraising fees	- 0 -			
<b>31</b>	Accounting fees	867.			
<b>32</b>	Legal fees	- 0 -			
<b>33</b>	Supplies	- 0 -			
<b>34</b>	Telephone	- 0 -			
<b>35</b>	Postage and shipping	- 0 -			
<b>36</b>	Occupancy	1800.			
<b>37</b>	Equipment rental and maintenance	- 0 -			
<b>38</b>	Printing and publications	- 0 -			
<b>39</b>	Travel	- 0 -			
<b>40</b>	Conferences, conventions, and meetings	1580.			
<b>41</b>	Interest	- 0 -			
<b>42</b>	Depreciation, depletion, etc. (attach schedule)	- 0 -			
<b>43</b>	Other expenses not covered above (itemize):				
<b>43a</b>	a Investment Management fees	6534.			
<b>43b</b>	b				
<b>43c</b>	c				
<b>43d</b>	d				
<b>43e</b>	e				
<b>43f</b>	f				
<b>43g</b>	g				
<b>44</b>	<b>Total functional expenses.</b> Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	<del>18781.</del> 42531.			

**Joint Costs.** Check ☐ if you are following SOP 98-2.Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ☐ Yes ☒ No

If "Yes," enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_; (ii) the amount allocated to Program services \$ \_\_\_\_\_; (iii) the amount allocated to Management and general \$ \_\_\_\_\_, and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_

**Part III Statement of Program Service Accomplishments** (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ► See Statement 1	Program Service Expenses
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts, but optional for others.)
<b>a</b> Lawrence N. Greenleaf Masonic Lodge #169 AF&AM EIN 84-1516260 The building association donates 80+% of its investment earning to the Lodge which then donates 100% of those funds to other 501 public non-profit organizations which provide services to the public no member of the Lodge or B.A. is affiliated with the other public 501's (Grants and allocations \$ 31750. ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
<b>b</b> _____ _____ _____ _____ _____ (Grants and allocations \$ _____ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
<b>c</b> _____ _____ _____ _____ _____ (Grants and allocations \$ _____ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
<b>d</b> _____ _____ _____ _____ _____ (Grants and allocations \$ _____ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
<b>e</b> Other program services (attach schedule) (Grants and allocations \$ _____ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
<b>f</b> Total of Program Service Expenses (should equal line 44, column (B), Program services). . . . ►	

## Lawrence N. Greenleaf Masonic Building Association

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**Part IV Balance Sheets** (See the instructions.)

**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year
<b>Assets</b>	45 Cash—non-interest-bearing . . . . .	8783.	45	654.
	46 Savings and temporary cash investments . . . . .		46	
	47a Accounts receivable . . . . .	47a		
	b Less: allowance for doubtful accounts . . . . .	47b	47c	-0-
	48a Pledges receivable . . . . .	48a		
	b Less: allowance for doubtful accounts . . . . .	48b	48c	-0-
	49 Grants receivable . . . . .	-0-	49	-0-
	50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule) . . . . .	-0-	50a	-0-
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule) . . . . .	-0-	50b	-0-
	51a Other notes and loans receivable (attach schedule) . . . . .	51a		
	b Less: allowance for doubtful accounts . . . . .	51b	51c	-0-
	52 Inventories for sale or use . . . . .	-0-	52	-0-
	53 Prepaid expenses and deferred charges . . . . .	-0-	53	-0-
	54a Investments—publicly-traded securities . . . . .	1941722.	54a	2049851.
	b Investments—other securities (attach schedule) . . . . .	-0-	54b	-0-
	55a Investments—land, buildings, and equipment basis . . . . .	55a		
	b Less: accumulated depreciation (attach schedule) . . . . .	55b	55c	-0-
	56 Investments—other (attach schedule) . . . . .	-0-	56	-0-
	57a Land, buildings, and equipment: basis . . . . .	57a		
b Less: accumulated depreciation (attach schedule) . . . . .	57b	57c	-0-	
58 Other assets, including program-related investments (describe ▶ <u>Oversting Loan to Lodge #169</u> ) . . . . .	2000.	58	2000.	
59 <b>Total assets</b> (must equal line 74) Add lines 45 through 58 . . . . .	1952505	59	2052505.	
<b>Liabilities</b>	60 Accounts payable and accrued expenses . . . . .	-0-	60	-0-
	61 Grants payable . . . . .	-0-	61	-0-
	62 Deferred revenue . . . . .	-0-	62	-0-
	63 Loans from officers, directors, trustees, and key employees (attach schedule) . . . . .	-0-	63	-0-
	64a Tax-exempt bond liabilities (attach schedule) . . . . .	-0-	64a	-0-
	b Mortgages and other notes payable (attach schedule) . . . . .	-0-	64b	-0-
	65 Other liabilities (describe ▶ . . . . .)	-0-	65	-0-
66 <b>Total liabilities.</b> Add lines 60 through 65 . . . . .	-0-	66	-0-	
<b>Net Assets or Fund Balances</b>	Organizations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted . . . . .		67	
	68 Temporarily restricted . . . . .		68	
	69 Permanently restricted . . . . .		69	
	Organizations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds . . . . .	1952505.	70	2052505.
	71 Paid-in or capital surplus, or land, building, and equipment fund . . . . .		71	
	72 Retained earnings, endowment, accumulated income, or other funds . . . . .		72	109778.
	73 <b>Total net assets or fund balances.</b> Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21) . . . . .	1952505.	73	2162283.
74 <b>Total liabilities and net assets/fund balances.</b> Add lines 66 and 73 . . . . .	1952505.	74	2162283.	





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**Part VI Other Information (continued)**

Yes No

82a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a		X
b If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	82b	n/a	
83a Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
b Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	83b	X	
84a Did the organization solicit any contributions or gifts that were not tax deductible?	84a		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b		
85 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a		
b Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.	85b		
c Dues, assessments, and similar amounts from members	85c	n/a	
d Section 162(e) lobbying and political expenditures	85d	n/a	
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	n/a	
f Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	n/a	
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g		
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h		
86 501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	86a	n/a	
b Gross receipts, included on line 12, for public use of club facilities	86b	n/a	
87 501(c)(12) orgs. Enter: a Gross income from members or shareholders	87a	n/a	
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	n/a	
88a At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88a		X
b At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI	88b		X
89a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under section 4911	89a	n/a	
b 501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b		
c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	89c	n/a	
d Enter: Amount of tax on line 89c, above, reimbursed by the organization	89d	n/a	
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e		X
f All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f		X
g For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g	n/a	
90a List the states with which a copy of this return is filed		None	
b Number of employees employed in the pay period that includes March 12, 2006 (See instructions.)	90b	0	
91a The books are in care of David S. Rolfe Located at 19751 E. Mainstreet, Suite 300 Parker, CO			
b 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)?	91b		X
If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		n/a	



**Part VI Other Information (continued)**

- c** At any time during the calendar year, did the organization maintain an office outside of the United States? **91c** ☐ Yes ☒ No  
If "Yes," enter the name of the foreign country **n/a**
- 92** Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here ☐  
and enter the amount of tax-exempt interest received or accrued during the tax year **92** **n/a**

**Part VII Analysis of Income-Producing Activities (See the instructions.)**

**Note:** Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
<b>93</b> Program service revenue:					
<b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>f</b> Medicare/Medicaid payments . . . . .					
<b>g</b> Fees and contracts from government agencies					
<b>94</b> Membership dues and assessments . . . . .					
<b>95</b> Interest on savings and temporary cash investments	90001	3163.			
<b>96</b> Dividends and interest from securities . . . . .	90001	41017.			
<b>97</b> Net rental income or (loss) from real estate:					
<b>a</b> debt-financed property . . . . .					
<b>b</b> not debt-financed property . . . . .					
<b>98</b> Net rental income or (loss) from personal property					
<b>99</b> Other investment income . . . . .					
<b>100</b> Gain or (loss) from sales of assets other than inventory					
<b>101</b> Net income or (loss) from special events . . . . .					
<b>102</b> Gross profit or (loss) from sales of inventory					
<b>103</b> Other revenue: <b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>104</b> Subtotal (add columns (B), (D), and (E)) . . . . .		44180.			
<b>105</b> Total (add line 104, columns (B), (D), and (E)) . . . . .					44180.

**Note:** Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)**

Line No. ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
	n/a

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)**

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
None	%			
	%			
	%			
	%			

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)**

- (a)** Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No
- (b)** Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No
- Note:** If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

## Lawrence N. Greenleaf Masonic Building Association

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**Part XI** Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13).

<b>106</b>	Did the reporting organization <b>make</b> any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.	Yes	No
			X

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	n/a			
b				
c				
<b>Totals</b>				

<b>107</b>	Did the reporting organization <b>receive</b> any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.	Yes	No
			X

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	n/a			
b				
c				
<b>Totals</b>				

<b>108</b>	Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?	Yes	No
			X

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Please Sign Here**

Signature of officer: David S. Rolfe Date: 10/14/10

Type or print name and title: David S. Rolfe Treasurer

This is an estimated return  
See Statement

<b>Paid Preparer's Use Only</b>	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN (See Gen Inst X)
	Firm's name (or yours if self-employed), address, and ZIP + 4	EIN	Phone no	

Form 990 (2006)



Printed on recycled paper

Form 990

STATEMENT OF ESTIMATED RETURN

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THE BUILDING ASSOCIATION IS FILING AN ESTIMATED RETURN FOR THE FOLLOWING REASON:

ON FRIDAY, OCTOBER 9, 2010, OUR ACCOUNTING FIRM RETURNED ALL OUR PAPERS STATING THAT THEY WERE UNABLE TO COMPLETE OUR FORM 990 FILINGS FOR 2006, 2007, 2008, AND 2009 BEFORE THE OCTOBER 15 DEADLINE AS THEIR CLIENTS ON FORM 1040 EXTENSIONS TOOK PRIORITY. THEIR FAILURE TO ADDRESS THE BUILDING ASSOCIATION'S COMES NINE (9) MONTHS AFTER THEY WERE RETAINED. THE BUILDING ASSOCIATION WAS UNABLE TO RETAIN ANOTHER FIRM ON SUCH SHORT NOTICE AND ELECTED TO FILE AN ESTIMATED RETURN WHILE ANOTHER ACCOUNTING FIRM IS RETAINED AND A COMPLETE AMENDED FORM 990 CAN BE PREPARED.

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Lawrence N. Greenleaf Masonic Building Association 23-7116631

Form 990

STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE

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THE BUILDING ASSOCIATION IS A FRATERNAL ORGANIZATION, WHICH IN ADDITION TO PROVIDING SUPPORT TO LAWRENCE N. GREENLEAF MASONIC LODGE No. 169 HAS ELECTED TO CONTRIBUTE 80+% OF ITS INVESTMENT INCOME TO OTHER PUBLIC NON-PROFITS WITH A 501 DESIGNATION WHO PROVIDE CHARITABLE SERVICES TO THE PUBLIC.

Lawrence N. Greenleaf Masonic Building Association 23-7116631

Form 990

EXPLANATION: Other Changes in net balances or fund balances

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THE AMOUNTS SHOWN REFLECT UNREALIZED GAINS TO THE BUILDING ASSOCIATION'S  
INVESTMENT ACCOUNTS

Lawrence N. Greenleaf Masonic Building Association 23-7116631

Form 990 - 2006

STATEMENT: Part IV Line 45

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WE HAVE ADJUSTED THE BEGINNING BALANCE BY \$71,973 TO REMOVE AN ACCOUNT THAT WAS INCLUDED ON OUR FORM 990-2005 BY MISTAKE. AN AMENDED RETURN WILL BE FORTHCOMING.

THE ACCOUNT ACTUALLY BELONGS TO THE MASONIC LODGE NOT THE BUILDING ASSOCIATION.