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Form **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)

OMB No 1545-0047

2007Department of the Treasury
Internal Revenue Service (77)

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

Open to Public
Inspection

A For the 2007 calendar year, or tax year beginning **2007**, and ending **2007**

B Check if applicable:
☐ Address change
☐ Name change
☐ Initial return
☐ Termination
☐ Amended return
☐ Application pending

C Name of organization
FREE & ACCEPTED MASONS OF NJ - GROUP RETURN
 Number and street (or P.O. box, if mail is not delivered to street addr) Room/suite
1114 OXMEAD ROAD
 City, town or country State ZIP code + 4
BURLINGTON NJ 08016-4204

D Employer identification number
23-713693

E Telephone number
(609) 239-3950

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

G Web site: **HTTP://NJFREEMASONRY.ORG**

J Organization type (check only one) ☒ 501(c) 10 (insert no.) ☐ 4347(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

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 **7,635,137.**

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 **92**
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 **0435**
M Check ☒ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

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

1 Contributions, gifts, grants, and similar amounts received.

1a Contributions to donor advised funds	755,422.
1b Direct public support (not included on line 1a)	
1c Indirect public support (not included on line 1a)	
1d Government contributions (grants) (not included on line 1a)	
1e Total (add lines 1a through 1d) (cash \$ 755,422. noncash \$)	755,422.

2 Program service revenue including government fees and contracts (from Part VII, line 9a) **2**

3 Membership dues and assessments **1,528,478.**

4 Interest on savings and temporary cash investments **703,338.**

5 Dividends and interest from securities **641,923.**

6a Gross rents **424,582.**

6b Less: rental expenses

6c Net rental income or (loss). Subtract line 6b from line 6a **424,582.**

7 Other investment income (describe) **7**

(A) Securities	(B) Other
8a Gross amount from sales of assets other than inventory 2,227,882.	929,670.
8b Less: cost or other basis and sales expenses 1,963,718.	0.
8c Gain or (loss) (attach schedule) See 1-8 Stmt 264,164.	929,670.
8d Net gain or (loss). Combine line 8c, columns (A) and (B) 2,193,834.	

9 Special events and activities (attach schedule). If any amount is from gaming, check here ☐

a Gross revenue (not including \$ of contributions reported on line 1b) **9a**

b Less: direct expenses other than fundraising expenses **9b**

9c Net income or (loss) from special events. Subtract line 9b from line 9a **9c**

10a Gross sales of inventory, less returns and allowances **10a**

10b Less: cost of goods sold **10b**

10c Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a **10c**

11 Other revenue (from Part VI, line 103) **423,892.**

12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11 **5,671,469.**

13 Program services (from line 44, column (B)) **3,746,199.**

14 Management and general (from line 44, column (C))

15 Fundraising (from line 44, column (D))

16 Payments to affiliates (attach schedule)

17 Total expenses. Add lines 13 and 44, column (A) **3,746,199.**

18 Excess or (deficit) for the year. Subtract line 17 from line 12 **1,925,270.**

19 Net assets or fund balances at beginning of year (from line 73, column (A)) **107,258,144.**

20 Other changes in net assets or fund balances (attach explanation) **-65,667,584.**

21 Net assets or fund balances at end of year. Combine lines 18, 19, and 20 **43,515,830.**

BAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

TEEA0101 12/27/07 Form 990 (2007)

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NO STATUTE ISSUE

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TRP BRANCH

Form **2848**(Rev. June 2008)
Department of the Treasury
Internal Revenue Service**Power of Attorney
and Declaration of Representative**

▶ Type or print. ▶ See the separate instructions.

OMB No 1545-0150

For IRS Use Only

Received by:

Name _____

Telephone _____

Function _____

Date ____/____/____

Part I Power of Attorney

Caution: Form 2848 will not be honored for any purpose other than representation before the IRS.

1 Taxpayer information. Taxpayer(s) must sign and date this form on page 2, line 9.

Taxpayer name(s) and address

Free and Accepted Masons
13 PM-WASSOC OF New 13 PM-WASSOC.
C/O EVERETT T. Laine
1037 PINE AVE. UNION, NJ

Social security number(s)

158 09 5715

Daytime telephone number

Employer identification number

23 7254472

Plan number (if applicable)

hereby appoint(s) the following representative(s) as attorney(s)-in-fact:

2 Representative(s) must sign and date this form on page 2, Part II

Name and address

EVERETT T. LAINE
1037 PINE AVE
UNION, NJ 07083

CAF No. _____

Telephone No. _____

Fax No. _____

Check if new: Address ☐Telephone No. ☐Fax No. ☐

Name and address

John Kolchin
29 Hampton Rd
CRANFORD, NJ 07016

CAF No. _____

Telephone No. _____

Fax No. _____

Check if new: Address ☐Telephone No. ☐Fax No. ☐

Name and address

CAF No. _____

Telephone No. _____

Fax No. _____

Check if new: Address ☐Telephone No. ☐Fax No. ☐

to represent the taxpayer(s) before the Internal Revenue Service for the following tax matters:

3 Tax matters

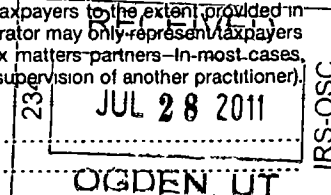
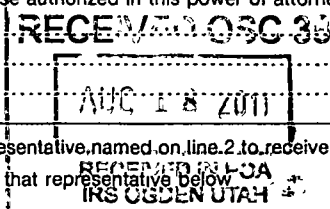
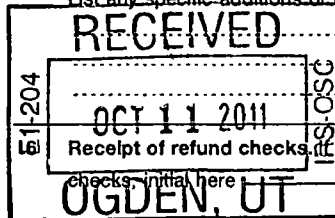
Type of Tax (Income, Employment, Excise, etc.) or Civil Penalty (see the instructions for line 3)	Tax Form Number (1040, 941, 720, etc.)	Year(s) or Period(s) (see the instructions for line 3)
Income tax	990	2008
Income tax	990	2009
Income tax	990	2010

4 Specific use not recorded on Centralized Authorization File (CAF). If the power of attorney is for a specific use not recorded on CAF, check this box. See the instructions for Line 4. Specific Uses Not Recorded on CAF ☐

5 Acts authorized. The representatives are authorized to receive and inspect confidential tax information and to perform any and all acts that I (we) can perform with respect to the tax matters described on line 3, for example, the authority to sign any agreements, consents, or other documents. The authority does not include the power to receive refund checks (see line 6 below), the power to substitute another representative or add additional representatives, the power to sign certain returns, or the power to execute a request for disclosure of tax returns or return information to a third party. See the line 5 instructions for more information.

Exceptions. An unenrolled return preparer cannot sign any document for a taxpayer and may only represent taxpayers in limited situations. See **Unenrolled Return Preparer** on page 1 of the instructions. An enrolled actuary may only represent taxpayers to the extent provided in section 10.3(d) of Treasury Department Circular No. 230 (Circular 230). An enrolled retirement plan administrator may only represent taxpayers to the extent provided in section 10.3(e) of Circular 230. See the line 5 instructions for restrictions on tax matters partners—in most cases, the student practitioner's (levels k and l) authority is limited (for example, they may only practice under the supervision of another practitioner).

List any specific additions or deletions to the acts otherwise authorized in this power of attorney: _____



Receipt of refund checks. If you want to authorize a representative, named on line 2, to receive, BUT NOT TO ENDORSE OR CASH, refund checks, initial here _____ and list the name of that representative below _____

Name of representative to receive refund check(s) ▶

AUG 30 '11

043076445

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7 Notices and communications. Original notices and other written communications will be sent to you and a copy to the first representative listed on line 2.

- a If you also want the second representative listed to receive a copy of notices and communications, check this box ☐
- b If you do not want any notices or communications sent to your representative(s), check this box ☐

8 Retention/revocation of prior power(s) of attorney. The filing of this power of attorney automatically revokes all earlier power(s) of attorney on file with the Internal Revenue Service for the same tax matters and years or periods covered by this document. If you do not want to revoke a prior power of attorney, check here. ☐

YOU MUST ATTACH A COPY OF ANY POWER OF ATTORNEY YOU WANT TO REMAIN IN EFFECT.

9 Signature of taxpayer(s). If a tax matter concerns a joint return, both husband and wife must sign if joint representation is requested, otherwise, see the instructions. If signed by a corporate officer, partner, guardian, tax matters partner, executor, receiver, administrator, or trustee on behalf of the taxpayer, certify that I have the authority to execute this form on behalf of the taxpayer.

IF NOT SIGNED AND DATED, THIS POWER OF ATTORNEY WILL BE RETURNED.

Everett T. Lains Signature *7/20/11* Date *Treasurer* Title (if applicable)

EVERETT T. LAINS Print Name ☐☐☐☐☐ PIN Number Print name of taxpayer from line 1 if other than individual

John Koles Signature *7/20/11* Date *Secretary* Title (if applicable)

John Koles Print Name ☐☐☐☐☐ PIN Number

Part II Declaration of Representative

Caution: Students with a special order to represent taxpayers in qualified Low Income Taxpayer Clinics or the Student Tax Clinic Program (levels k and l), see the instructions for Part II.

Under penalties of perjury, I declare that:

- I am not currently under suspension or disbarment from practice before the Internal Revenue Service;
- I am aware of regulations contained in Circular 230 (31 CFR, Part 10), as amended, concerning the practice of attorneys, certified public accountants, enrolled agents, enrolled actuaries, and others;
- I am authorized to represent the taxpayer(s) identified in Part I for the tax matter(s) specified there, and
- I am one of the following
 - a Attorney—a member in good standing of the bar of the highest court of the jurisdiction shown below.
 - b Certified Public Accountant—duly qualified to practice as a certified public accountant in the jurisdiction shown below.
 - c Enrolled Agent—enrolled as an agent under the requirements of Circular 230.
 - d Officer—a bona fide officer of the taxpayer's organization.
 - e Full-Time Employee—a full-time employee of the taxpayer.
 - f Family Member—a member of the taxpayer's immediate family (for example, spouse, parent, child, brother, or sister).
 - g Enrolled Actuary—enrolled as an actuary by the Joint Board for the Enrollment of Actuaries under 29 U.S.C. 1242 (the authority to practice before the Internal Revenue Service is limited by section 10.3(d) of Circular 230).
 - h Unenrolled Return Preparer—the authority to practice before the Internal Revenue Service is limited by Circular 230, section 10.7(c)(1)(viii). You must have prepared the return in question and the return must be under examination by the IRS. See Unenrolled Return Preparer on page 1 of the instructions.
 - k Student Attorney—student who receives permission to practice before the IRS by virtue of their status as a law student under section 10.7(d) of Circular 230
 - l Student CPA—student who receives permission to practice before the IRS by virtue of their status as a CPA student under section 10.7(d) of Circular 230.
 - r Enrolled Retirement Plan Agent—enrolled as a retirement plan agent under the requirements of Circular 230 (the authority to practice before the Internal Revenue Service is limited by section 10.3(e)).

IF THIS DECLARATION OF REPRESENTATIVE IS NOT SIGNED AND DATED, THE POWER OF ATTORNEY WILL BE RETURNED. See the Part II instructions

Designation—Insert above letter (a-r)	Jurisdiction (state) or identification	Signature	Date
a Attorney	KH0359 New Jersey	<i>Howard Z. Kanowitz</i>	7/25/2011
		Howard Z. Kanowitz Attorney at Law State of New Jersey	

FREE & ACCEPTED MASONS OF NEW JERSEY - GROUP RETURN
FORM 990 TAX YEAR ENDING 2007
23-7133693

Exhibit 1: List of affiliates not included in this combined Form 990: (Receipts less than \$25,000)

<u>Lodge Name</u>	<u>#</u>	<u>Address</u>	<u>Federal EIN</u>
Brearley Lodge	2	Bank & Cedar Sts., Birdgeton, NJ	21-0454923
Amwell Lodge	12	19 - 23 Bridge Street, Lambertville, NJ	22-1693189
Prospect Lodge	24	370 E. Main Street, Chester, NJ	21-7118189
Jerusalem Lodge	26	105 E. Seventh St., Plainfield, NJ	22-0924814
Orion Masonic Center (Darcy Lodge)	37	39 Eventtstown Rd. Frenchtown, NJ	22-6047999
Independence Lodge	42	226 Main St., Hackettstown, NJ	22-1448641
Central Lodge	44	Townhall 2nd Flr Plum Street, Vincentown, NJ	22-2494729
Caeasarea Lodge	64	PO Box 602, Keyport, NJ	22-0192974
Star Lodge	65	Dennisville & State Rds., Tuckahoe, NJ	23-7113711
Aconiram - Highland, Wafefield - Rising Star	80	321 Second Ave., Lyndhurst, NJ	22-1929268
Glassboro Lodge	85	Liberty & Reading Sts., Glassboro, NJ	23-7194965
Pyramid Lodge	92	9 Brindletown, Rd., New Egypt, NJ	22-1999763
Unity Lodge	96	82 Mill St., Mays Landing, NJ	21-0409360
Evening Star Lodge	97	325 Main Street, Cedarville, NJ	23-7173954
Fulton Freindship Lodge	102	147 Kinderkamack Rd., Park Ridge, NJ	23-7176647
Beverly-Riverside Lodge	107	621 Chester Avenue, Riverside, NJ	22-6049176
Palestine Lodge	111	345 River Rd., Montgomery Township, NJ	23-7116959
Mozart Lodge	121	Rt. 295 & Haddonfield-Berlin Rd., Cherry Hill, NJ	21-0519624
Mount Zion Lodge	135	483 Middlesex Ave., Metuchen, NJ	22-1439978
Orpheus Lodge	137	PO Box 123, Sergeantsville, NJ	23-7236737
Elmer Lodge	160	PO Box 26, Elmer, NJ	22-6062712
Kittatinny Lodge	164	PO Box 82, Branchville, NJ	22-1449300
Blairstown Lodge	165	11 Stillwater Roac, Blairstown, NJ	22-1146430
Monmouth Lodge	172	14 E. Garfield Ave., Atlantic Highlands, NJ	23-7173277
Lakewood Lodge	174	36 Pierson Rd., Toms River, NJ	23-7178839
Hereford Lodge	177	6300 Atlantic Ave., Wildwood Crest, NJ	22-1924821
Whitehead Lodge	184	242 Knox Ave., Cliffside Park, NJ	22-1002380
Matawan Lodge	192	192 Main Street, Matawan, NJ	21-6017260
Mosaic Lodge	194	Main & Hobart Sts., Ridgefield, NJ	22-0924944
Audubon-Parkside Lodge	218	East Atlantic & Pine St., Audubon, NJ	22-3009328
Theodore Roosevelt Lodge	219	86 Elm & Taylor Aves., Carteret, NJ	22-3358720
Atlantic Lodge	221	633 Bayview Dr., Absecon, NJ	21-6017867
Jephthah Lodge	233	55 W. Main St., Rockaway, NJ	22-6035490
Henry S. Haines Lodge	253	16 Kings Highway East, Haddonfield, NJ	23-7112582
Eclipse Lodge	259	169 Park Ave., Rutherford, NJ	23-7110136
Little Falls Lodge	263	14 Lincoln Ave., Little Falls, NJ	22-6033698
William L. Daniels Lodge	269	537 Windsor Road, Bemenfield, NJ	23-7217113
North Arlington Lodge	271	321 Second Ave., Lyndhurst, NJ	22-0924841
Justice Lodge	285	808 Shore Road, Linwood, NJ	21-0626965
Sunrise Lodge	288	PO Box 771, Toms River, NJ	23-7134618
Milltown Lodge	294	30 N. Main Street, Milltown, NJ	23-7110138
Horizon Daylight Lodge	299	131 Burd St., Pennington, NJ	23-1237259
Sons of Liberty Lodge	301	240 Knox Ave., Cliffside Park, NJ	75-2992486
Jacques DeMolay Lodge	318	99 Two Bridges Rd, Lincoln Park, NJ	26-0216953
10th. Dist. Sch. Foundation Lodge	10th	PO Box 70, Roselle Park, NJ	23-7254472
Masters, Wardens & Past Masters Assc	1st	P.O. Box 331 Oxford, NJ 07863	22-2101852
Masters, Wardens & Past Masters Assc	8th	29 Ellis Road West Caldwell, NJ	23-7133693
Masonic District Officers Assn	2nd	72 Albany Avenue Pompton Lakes, NJ	