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# Form **990**

CHANGE OF ACCOUNTING PERIOD

### **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

Department of the Treasury

Open to Public

in	erna	Hevenue	a Service The digatilization may have to use a copy of this return to satisfy state		Inspection					
Α	F	or the 2	2008 calendar year, or tax year beginning JUL 1, 2009 and ending	OCT 31, 2009						
В	Ch an	eck if plicable	Please C Name of organization	D Employer identifi	cation number					
Г		Address	use IRS label or CALLECTRITA MACONICO EQUINDADION							
Ī		change  Name	print or type CALIFORNIA MASONIC FOUNDATION  Doing Business As	-  22_7	013074					
Ì	-	change Initial	Doilig Business As	·						
Ì		return  Termin-	Specific 1111 CALTEORATA CORRECT	1 -	415-776-7000					
Ī		lation  Amended  return		G Gross receipts \$	0 400 000					
Ī		Applica- tion	SAN FRANCISCO, CA 94108	H(a) Is this a group re						
		pending	F Name and address of principal officer JOHN FREDERICK LOWE	for affiliates?	Yes X No					
			SAME AS C ABOVE	H(b) Are all affiliates inc						
	Τε	x-exen	npt status X 501(c) ( 3 ) ◀ (insert no )		list (see instructions)					
<u>J</u>	W	ebsite:	▶ WWW.FREEMASON.ORG	H(c) Group exemptio	n number					
<u>K</u>	Ту	pe of or	ganization: X Corporation	ar of formation: 1969 N	A State of legal domicile: CA					
Ĺ	Pa	rt I   5	Summary							
	١٠	<b>1</b> Br	riefly describe the organization's mission or most significant activities APPLICATI	ON OF MASONI	<u>C</u>					
		<u>P</u>	RINCIPLES IN SUPPORT OF EDUCATION, LEADERSHI	P, AND COMMU	NITIES.					
	Governance	2 C	heck this box 🕨 📖 if the organization discontinued its operations or disposed of mo	ore than 25% of its asset	s					
	Š	3 N	umber of voting members of the governing body (Part VI, line 1a)	3	9					
ì	8	4 N	umber of independent voting members of the governing body (Part VI, line 1b)	4	9					
⊇ .	98	5 To	otal number of employees (Part V, line 2a)	5	0					
<u> </u>	ACTIVITIES &	<b>6</b> To	otal number of volunteers (estimate if necessary)	6	9					
<b>റ</b> രെ'	\ <u>G</u>		otal gross unrelated business revenue from Part VIII, line 12, column (C)	7a	0.					
∌ –	_	b N	et unrelated business taxable income from Form 990-T, line 34	7b	0.					
			<u> </u>	Prior Year	Current Year					
ALK	9		ontributions and grants (Part VIII, line 1h)	346,164.	628,608.					
	Hevenue		rogram service revenue (Part VIII, line 2g)	0.044.440	150 001					
2) (	<b>9</b>		vestment income (Part VIII, column (A), lines 3, 4, and 7d)	<2,244,443.	<u> </u>					
2	ł		ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	8,815.	504.050					
Z-	+		otal revenue add lines othrough 11 (must equal Part VIII, column (A), line 12)	<1,889,464.						
			rants and smilar and courts paid (Part IX, column (A), lines 1-3)	1,408,871.	271,245.					
			efits paid to or for members/Part IX, column (A), line 4)							
	Ses	15 5	harres   முழ்ந்திர் எழுத்திர் பிறிய விறிய	· · · · · · · · · · · · · · · · · · ·						
	Expenses									
	3	47	ther expenses (Part IX, column (D), line 25) there expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	748,883.	268,495.					
			otal expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	2,157,754.	539,740.					
			evenue less expenses Subtract line 18 from line 12	<4,047,218.						
_	s	10 10	Svende less expenses Subtract line 10 from line 12	Beginning of Year	End of Year					
ots i	d Balances	<b>20</b> To	otal assets (Part X, line 16)	18,620,572.	19,567,028.					
Ass	1 Ba		otal liabilities (Part X, line 26)	1,171,643.	111,537.					
Net			et assets or fund balances Subtract line 21 from line 20	17,448,929.	19,455,491.					
			Signature Block							
_			inder penalties of perjury, I declare that I have examined this return, including accompanying schedules and statement	s, and to the best of my knowled	ge and belief, it is true, correct,					
		a	nd complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge	ge _	,					
s	ign		1 / Komer J. Boyan	1/3/12/	10					
Н	ere	.	Signature of officer	Date						
			THOMAS BOYER, CFO							
			Type or print name and title							
D.	aid	P	Topaloi S		er's identifying number structions)					
		s	ignature 3 (0) 2010 6	emptoyed						
	٠.	- 15	ours if MOSS ANDAMS LLP	EIN ►						
0.		'''' <b>'</b>  s	eff-employed), 3121 WEST MARCH LANE, SUITE 100							
_			STOCKTON, CA 95219	Phone no. ▶ 2	09-955-6100					
<u>M</u>	ay	the IRS	discuss this return with the preparer shown above? (see instructions)		X Yes No					
					1 918-					

	990 (2008) CALIFORNIA MASONIC FOUNDATION  rt III   Statement of Program Service Accomplishments (see instructions)	23-7013074	Page 2
1	Briefly describe the organization's mission  THE CALIFORNIA MASONIC FOUNDATION'S MISSION IS TO APPLY	MASONIC	<del></del>
	PRINCIPLES IN SUPPORT OF EDUCATION, LEADERSHIP, AND COM		
	THROUGH SEVERAL IMPORTANT PROGRAMS THAT TOUCH THE LIVES EACH YEAR.		S
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?  If "Yes", describe these new services on Schedule O	Yes	X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X No
	If "Yes", describe these changes on Schedule O		
4	Describe the exempt purpose achievements for each of the organization's three largest program services by exp		
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of allocations to others, the total expenses, and revenue, if any, for each program service reported	grants and	
	and database to denote, the total opposition, and resemble, in any, for each program on the reported		
4a	(Code ) (Expenses \$ 83,351. including grants of \$ 80,000.) (ReUNIVERSITY PARTNERSHIP PROGRAM - THIS PROGRAM FUNDS A PARTNERSHIP BETWEEN THE MASONIC FOUNDATION AND THE UNIVERSITY AND UNDERSTANDED TO ADVANCE THE STUDY AND ADVANCE THE STUD	SCHOLARLY ERSITY OF	)
	FREEMASONRY.		
	·		
			<del> </del>
			· ·
4b	(Code ) (Expenses \$ 74,460. including grants of \$ 73,118.) (ReMASONIC EDUCATION AND LEADERSHIP TRAINING (MELT) DEVELOR MASONIC LEADERS AND ENRICHES MASONIC EDUCATION THROUGH \$ 1.00 to 1.00 t	PS FUTURE	) OF
	THE WARDENS LEADERSHIP RETREATS, LODGE MANAGEMENT CERTIF		
	AND ENHANCED EDUCATION OPPORTUNITIES. THE FOUNDATION UNI	DERWRITES A	
	GREAT PORTION OF THE PROGRAM EXPENSES EACH YEAR.		
			<del></del>
4c	(Code ) (Expenses \$ 29,196. including grants of \$ 20,500.) (Re		)
	ANNUAL COLLEGE SCHOLARSHIP HELPS MAKE THE DREAM OF COLLEGE FOR HUNDREDS OF TOMORROW'S LEADERS. SINCE 1970 MORE THAN		
	HAVE BEEN ASSISTED WITH SCHOLARSHIP AWARDS RANGING FROM		
	\$40,000 PER STUDENT OVER FOUR YEARS.		
	· · · · · · · · · · · · · · · · · · ·		
	Other many (Danacha in Cabada)		
4d	Other program services (Describe in Schedule O)  (Expenses \$ 143,851. including grants of \$ 97,627.) (Revenue \$	)	
4e	Total program service expenses ▶\$ 330,858. (Must equal Part IX, Line 25, column (B))		
		Form <b>99</b>	<b>90</b> (2008)

Form 990 (2008) CALIFORNIA MASONIC FOUNDATION

Part IV | Checklist of Required Schedules

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	_1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	_X_	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	1		
	public office? If "Yes," complete Schedule C, Part I	3		X
	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		X
	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	_ 5		
	Did the organization maintain any donor advised funds or any accounts where 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		X
	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_
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
	Did the organization report an amount in Part X, line 21, 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	••	X
	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?		37	
	If "Yes," complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	X	
	Did the organization receive an audited financial statement for the year for which it is completing this return that was	40		<b>.</b>
	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	-	X
	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  Did the organization maintain an office, employees, or agents outside of the U.S.?	13 14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	144		
	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		х
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity			
	located outside the United States? If "Yes," complete Schedule F, Part II	15		x
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	-:-		
	located outside the United States? If "Yes," complete Schedule F, Part III	16		x
	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	_21	X	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K			
	If "No", go to question 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			7.7
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		_X_
	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a			v
	prior year? If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			X
	nominal matching and of the and of the association is true and if the association is the state of the state o			· 🔨
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		
27	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II  Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	26		x

Form 990 (2008) CALIFORNIA MASONIC FOUNDATION

Part IV Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an			
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other			
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		X
C	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? 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," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	X	
35	is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35	X	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36	X	
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
		Form	990 (	้วบบรา

### 008) CALIFORNIA MASONIC FOUNDATION Statements Regarding Other IRS Filings and Tax Compliance Form 990 (2008). | Part V | Sta

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of				
	U.S. Information Returns. Enter -0- if not applicable	1a	10		Ì
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eportable gaming			
	(gambling) winnings to prize winners?	1 1	1c	X	<u> </u>
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	1			į
	filed for the calendar year ending with or within the year covered by this return	2a	0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	rns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see	instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	ed by this return?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	authority over, a	ļ	Ì	
	$financial\ account\ in\ a\ foreign\ country\ (such\ as\ a\ bank\ account,\ securities\ account,\ or\ other\ financial\ accou$	account)?	4a		X
b	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				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		<u>5a</u>		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transe	action?	. 5b		X
C	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity	Regarding Prohibited	<b>.</b>		
	Tax Shelter Transaction?		<u>5c</u>		
6a	Did the organization solicit any contributions that were not tax deductible?		6a	-	X
b	If "Yes," did the organization include with every solicitation an express statement that such contribute	tions or gifts	1		
	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more	e than <b>\$</b> 75?	7a		<u> </u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required			
	to file Form 8282?	1 1	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
0	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a product of the control	oersonal			
_	benefit contract?		7е		X
T	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit conti		7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required'		7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-0	•	7h	-	
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sec				
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring or	rganization, nave			
0	excess business holdings at any time during the year?		8		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.				
a _	Did the organization make any taxable distributions under section 4966?		9a	-	<del> </del>
10	Did the organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter N/A		9b		<del>                                     </del>
10	Initiation fees and capital contributions included on Part VIII, line 12	100			
a b	·	10a 10b	-		
11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  Section 501(c)(12) organizations. Enter N/A	וטטן	$\overline{}$		
''	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against	110			
J	amounts due or received from them)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a		1
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A	12b	124		
<u>~</u> _	11/A	1201	Form	990	(2008)

Form 990 (2008). CALIFORNIA MASONIC FOUNDATION 23-7013074 Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

<u>Sec</u>	tion A. Governing Body and Management			г.—
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,			
	processes, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body	9		
D	Enter the number of voting members that are independent  Did any officers director to standard and independent	9		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			7.7
_	officer, director, trustee, or key employee?	_2_	-	X
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 organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5	-	X
6 7-	Does the organization have members or stockholders?	6		
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
_	governing body?	7a	-	X
	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
_	by the following  The governing hadron	۔ ا	v	
a	The governing body?	8a	X	<u> </u>
b	Each committee with authority to act on behalf of the governing body?	8b	Α_	v
9a	Does the organization have local chapters, branches, or affiliates?	9a		X
D	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,	0.		
10	and branches to ensure their operations are consistent with those of the organization?	9Ь	-	
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must	40		x
11	describe in Schedule O the process, if any, the organization uses to review the Form 990  Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	10		
• • •	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		х
Sec	tion B. Policies		<u> </u>	Λ
	Wall Dill allaloo		Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	140
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise	124	- 21	
	to conflicts?	12b	х	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	125		
·	In Schedule O how this is done	12c	Х	
13	Does the organization have a written whistleblower policy?	13	Х	
14	Does the organization have a written document retention and destruction policy?	14	X	_
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а	The organization's CEO, Executive Director, or top management official?	15a		_X
b	Other officers or key employees of the organization?	15b		X
_	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	1	х
ь	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶CA			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) availab	le for	-	
	public inspection. Indicate how you make these available. Check all that apply			
	Own website X Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy,	and fina	incial	
	statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	ation	•	
	TOM BOYER - 415-292-9133			_
	1111 CALIFORNIA STREET, SAN FRANCISCO, CA 94108			

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- 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

(A)	(B)	y officer, director, truste (C)						(D)	(E)	(F)
Name and Title	Average	,_		Position eck all that apply)			L A	Reportable	Reportable	Estimated
	hours per week	Individual trustee or director	Institutional frustee			Highest compensated B		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
JOHN F. LOWE										
PRESIDENT	3.00	X			L			0.	0.	0
MYRON A. TISDEL										
VICE PRESIDENT	2.00	X	_					0.	0.	0
THOMAS T. ALBERS										
TRUSTEE	2.00	X	<u> </u>					0.	0.	0
WESLEY W. DANIELS										
TRUSTEE	2.00	X	<u> </u>					0.	0.	0
DAVID D. JOHNSON										
TRUSTEE	2.00	X	L_					0.	0.	0
EDMUND M. LIM										
TRUSTEE	2.00	X	<u> </u>			ļ		0.	0.	0
KENNETH G. NAGEL TRUSTEE	2.00	x						0.	0.	0
MARK E. PRESSEY										
TRUSTEE	2.00	X						0.	0.	0
ARTHUR H. WEISS										
TRUSTEE	2.00	X			L	ļ		0.	0.	0
ALLAN LESLEY CASALOU										
SECRETARY	2.00	X	ļ	X	_	<u> </u>		0.	177,974.	10,268
GLENN WOODY										_
TREASURER	2.00	ļ.,	<u> </u>	Х	<u> </u>	$ldsymbol{oxed}$		0.	0.	0
TOM BOYER									405 1-5	
CFO	2.00		-	Х	-	┡		0.	123,450.	5,935
						_				

from the organization

	990 (2008). CALIFORN	IA MASO	NI	<u>C_</u>	FOT	JN!	DA′	<u>ri</u>	ON	23-70	13074	1	Page 8
Pa	rt VII Section A. Officers, Directors, Tr	ustees, Key E	mpl	оуөе	s, a	nd I	High	est	Compensated Employ	ees (continued)			
	(A)	(B)			-	<b>)</b>			(D)	(E)		(F)	)
	Name and title	Average	1,		Posi		app		Reportable	Reportable	l l	stime	
		hours per		Tieca	T	liiat	app	עיי ו	compensation from	compensation from related	·   a	mour othe	
		week	Tracto				_		the	organizations	cor		sation
			B8 OT (	sta			ısate		organization	(W-2/1099-MIS		from t	
			II trust	멸		98.	8 e		(W-2/1099-MISC)		l l	ganız nd rel	
			Indiwdual trustee or directo	Institutional trustee	Officer	Көу етрюуөө	Highest compensated employee	Ē					ations
			<del>  -</del>	-	P	_	T 5	2					
											,		
							$\top$						
									-			·	
									:				
					ļ .		-				_		
		-	+	-	<u> </u>		-				<del></del>		-
									!				
		ļ	-		-		-	_					
	<u> </u>		1.				Ļ			201 40	4		202
1b 2	Total  Total number of individuals (including thos	e in 1a) who r		ed r	nore	tha	<u>►</u> n.\$1	00.6	0.00 in reportable	301,42	4.	L <b>6</b> ,	203
	compensation from the organization	o in ray who h	300.1	<u>.</u>				00,			<b>&gt;</b>		(
												Yes	s No
3	Did the organization list any former officer	•		, ke	у өп	plo	уөө,	or h	nighest compensated er	nployee on			
	line 1a? If "Yes," complete Schedule J for								h		3	<del> </del>	X
4	For any individual listed on line 1a, is the sand related organizations greater than \$15									the organization	4	x	
5	Did any person listed on line 1a receive or			-						ices rendered to	-	121	
	the organization? If "Yes," complete Scheo	•									5	<u> </u>	X
Sec	tion B. Independent Contractors								· · · · · · · · · · · · · · · · · · ·				
1	Complete this table for your five highest of the organization <b>NONE</b>	ompensated ir	ndep	ende	ent c	onti	racto	ors t	that received more than	\$100,000 of comp	ensation	from	
	the organization NONE (A)								(B)			(C)	
_	Name and business	address							Description of s	ervices	Comp		ion
								$\dashv$	<del></del>				
	<del></del>							$\dashv$					
2	Total number of independent contractors	including thos	e in	1) w	ho re	cei	ved	mor	e than \$100,000 in com	pensation			

		(2008), CALI.	FORNIA MA	SONIC FO	UNDATION		23-7013	074 Page <b>9</b>
Pa	rt VI	II Statement of Reve	nue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b d	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions, gifts, grains similar amounts not included about	nts, and	28,608.				313, 07 314
dati	g	Noncash contributions included in line		20,000.				
<u> </u>		Total. Add lines 1a-1f		<b>&gt;</b>	628,608.			
Program Service Revenue	2 a			Business Code				
50	в							
₫	f	All other program service rev	I					
$\rightarrow$	g			<b></b>		\		
	3	Investment income (including other similar amounts) Income from investment of ta		•	150,836.			150,836.
1	5	Royalties	(A) Doort	60 Damanal	-			
,	6 a		(i) Real	(ii) Personal				
	C	Rental income or (loss)						
	d	Net rental income or (loss)						
	7 a	Gross amount from sales of	(i) Securities 1643385.	(ii) Other				
	b	assets other than inventory  Less cost or other basis  and sales expenses	1637860.					
	c	Gain or (loss)	5,525.					
	d	Net gain or (loss)	-	<b>&gt;</b>	5,525.			5,525.
Other Revenue	8 a	Gross income from fundraisir including \$contributions reported on line	of					
Œ		Part IV, line 18	a					
<b>≝</b>	b	Less direct expenses	ь[		İ			
٦,	С	Net income or (loss) from fun	draising events	<b></b>				
	9 a	Gross income from gaming a	ctivities See					
		Part IV, line 19	а					
		Less direct expenses	ьL					
ĺ		Net income or (loss) from gar		▶	·			
ľ	10 a	Gross sales of inventory, less and allowances	a returns					
	b	Less cost of goods sold	ьl					
		Net income or (loss) from sale	_	<b></b>				
Ī		Miscellaneous Reveni		Business Code				
	11 a							
	b		· · · · · · · · · · · · · · · · · · ·					
	C							
	d	All other revenue	Ĺ					
	θ	Total. Add lines 11a-11d		<b>&gt;</b>				
22222	12	Total Revenue. Add lines 1h, 2g, 3,	4, 5, 6d, 7d, 8c, 9c, 10c	, and 11e	784,969.	0.	0.	156,361.

### Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must comp				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	270,745.	270,745.		
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	500.	500.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	İ			
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
a	Management				
b	Legal	110.		110.	
C	Accounting				
ď	Lobbying				
0	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	23,121.		23,121.	
g	Other	29,844.		29,844.	
12	Advertising and promotion				···
13	Office expenses	<u>32,921.</u>	82.	32,839.	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	5,973.	1,543.	4,430.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				<del></del>
20	Interest		· · · · · · · · · · · · · · · · · · ·		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	384.		384.	
23	Insurance		-		
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total				
а	expenses shown on line 25 below.)  SHARED SERVICE ALLOC.	168,163.	55,906.	112,257.	
a b	MISCELLANEOUS	7,420.	1,722.	5,698.	
C	SYMPOSIUM	360.	360.	3,030.	
d	PROPERTY TAXES	199.		199.	
u 8	THE PARTY OF THE P				
f	All other expenses				
25 25	Total functional expenses Add lines 1 through 24f	539,740.	330,858.	208,882.	0.
<u>20</u> 26	Joint Costs. Check here		230,030.	200,002	
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined	ļ			
	educational campaign and fundraising solicitation				
_					

Ра	πx	Balance Sneet							
					(A) Beginning of year			B) of year	
-	1	Cash - non-interest-bearing			209,412.	1	1	23,7	712
	2	Savings and temporary cash investments				2	<del></del>		
	3	Pledges and grants receivable, net			41,420.	3		2.5	566.
	4	Accounts receivable, net				4			
	5	Receivables from current and former officers, d	irectors	s, trustees, key					
		employees, or other related parties Complete F		· -		5			
	6	Receivables from other disqualified persons (as							
		4958(f)(1)) and persons described in section 49							
		Part II of Schedule L		i		6			
ξţ	7	Notes and loans receivable, net				7			
Assets	8	Inventories for sale or use				8			
Ä	9	Prepaid expenses and deferred charges				9			
	10a	Land, buildings, and equipment cost basis	10a	25,034.					
	ь	Less accumulated depreciation Complete							
		Part VI of Schedule D	10b	22,560.	2,858.	10c		2,4	<u> 174.</u>
	11	Investments - publicly traded securities			18,344,544.	11	19,3	<u>55,3</u>	309.
	12	Investments - other securities See Part IV, line				12			
	13	Investments - program-related See Part IV, line	11			13			
	14	Intangible assets			00 000	14			
	15	Other assets. See Part IV, line 11			22,338.	15		82,9	
	16	Total assets. Add lines 1 through 15 (must equ	ual line	34)	18,620,572.	16	19,5		
	17	Accounts payable and accrued expenses		: 	203,095.	17		<u>31,9</u>	1/4.
	18	Grants payable		•		18			
	19	Deferred revenue				19			<del></del>
	20	Tax-exempt bond liabilities		20					
Liabilities	21	Escrow account liability Complete Part IV of Sc				21			
Ħ	22	Payables to current and former officers, director							
Ë		highest compensated employees, and disqualifi of Schedule L		22					
	23	Secured mortgages and notes payable to unrel		23					
	24	Unsecured notes and loans payable		24					
	25	Other liabilities Complete Part X of Schedule D	968,548.	25	-	79,5	563.		
	26	Total liabilities. Add lines 17 through 25			1,171,643.	26			37.
		Organizations that follow SFAS 117, check h	ere D	X and complete			<del></del>		
S		lines 27 through 29, and lines 33 and 34.	,						
ي	27	Unrestricted net assets			3,604,299.	27	3,5	84,1	L88.
ala	28	Temporarily restricted net assets			301,233.			27,9	
Ā	29	Permanently restricted net assets			13,543,397.		13,54		
Net Assets or Fund Balances	1	Organizations that do not follow SFAS 117, o	heck t	nere 🕨 🔲 and					
9		complete lines 30 through 34.							
ets	30	Capital stock or trust principal, or current funds	;			30_	_		
Ass	31	Paid-in or capital surplus, or land, building, or e	quipme	ent fund		31			
<u>t</u>	32	Retained earnings, endowment, accumulated in	ncome,	or other funds		32			
z	33	Total net assets or fund balances			17,448,929.	33	19,4		
	34	Total liabilities and net assets/fund balances			18,620,572.	34	19,50	<u>67,0</u>	<u>)28.</u>
Pa	rt XI	Financial Statements and Reporting	3					TV	1 81-
					7		<del></del>	Yes	No
1		ounting method used to prepare the Form 990		ash X Accrual	_ Other				l
2a		the organization's financial statements compile			accountant?		<u>2a</u>	-	X
b		the organization's financial statements audited	-				<u>2</u> b	+	X
С		es" to lines 2a or 2b, does the organization have		·	· · · · · · · · · · · · · · · · · · ·	audıt,	1 _		1
_		w, or compilation of its financial statements and			2c	<del> </del>	+		
3 <b>a</b>		result of a federal award, was the organization re	equired	to undergo an audit or aud	dits as set forth in the Sing	jie Aud	_		
_		and OMB Circular A-133?					38	+-	X
D	II 'Y (	es," did the organization undergo the required au	iait or e	luaits7			3b		

### SCHEDULE.A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

### **Public Charity Status and Public Support**

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

OMB No 1545-0047

2008

Open to Public Inspection

Employer identification number

	<del> </del>		<u>NIA MASONIC</u>						<u> </u>	<u>3-7013074</u>	4
Part I	Reason	for Public Char	ity Status (All organiz	zations mu	st comple	te this par	t ) (see ins	tructions)			
The organ	ization is not a	a private foundation	because it is (Please ch	eck only <b>a</b>	ne organi	zation)					
1 🗀	A church, co	nvention of churches	s, or association of chur	ches desc	rıbed ın <b>se</b>	ction 170	(b)(1)(A)(i)	).			
2	A school des	scribed in section 17	<b>0(b)(1)(A)(ii).</b> (Attach Sc	hedule E)							
з 🗀	A hospital or	a cooperative hospi	tal service organization (	described	ın section	170(b)(1)	( <b>A)</b> (iii). (At	tach Sche	dule H)		
4 🔲	A medical res	search organization (	operated in conjunction	with a hos	pital desc	rıbed ın <b>se</b>	ction 170	(b)(1)(A)(ii	ii). Enter t	he hospital's nai	me,
	city, and stat	te									_
5 🗀	An organizati	ion operated for the	benefit of a college or ui	niversity ov	wned or op	perated by	a govern	mental uni	t describ	əd ın	
	section 170	(b)(1)(A)(iv). (Comple	ete Part II )								
6 🗀	A federal, sta	ate, or local governm	ent or governmental uni	t described	d in sectio	n 170(b)(	I)(A)(v).				
7 X	An organizat	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	general	public described	ın
	section 170	( <b>b)(1)(A)(vi)</b> . (Comple	te Part II )								
8 🔲	A community	trust described in <b>s</b>	ection 170(b)(1)(A)(vi).	(Complete	Part II)						
9 🗀	An organizat	ion that normally rec	eives (1) more than 33 <sup>-</sup>	1/3% of its	support f	rom contri	butions, n	nembershi	p fees, ar	nd gross receipts	s from
	activities rela	ited to its exempt fur	nctions - subject to certa	ın exceptı	ons, and (	2) no more	than 33 1	1/3% of its	support	from gross inves	stment
	income and	unrelated business t	axable income (less sec	tion 511 ta	x) from bu	isinesses a	acquired b	y the orga	ınızatıon a	after June 30, 19	175
	See section	509(a)(2). (Complete	the Part III )								
10	An organizat	ion organized and op	perated exclusively to te	st for publ	ıc safety 🤄	See <b>sectic</b>	n 509(a)(4	<b>1).</b> (see ins	tructions	)	
11 📖	An organizat	ion organized and op	perated exclusively for the	ne benefit (	of, to perfo	orm the fu	nctions of	or to carr	y out the	purposes of one	or
	more publicly	y supported organiza	itions described in secti	on 509(a)( <sup>.</sup>	1) or section	on 509(a)(2	2) See <b>se</b> e	ction 509(	<b>a)(3).</b> Che	ck the box that	
		··	organization and compl		•					1	
	а Туре		**		e III - Fund	-	_		d L	Type III - Other	
⊕ 📖		· ·	t the organization is not		-	•	•		•	•	
		-	han one or more publicly		•				9(a)(1) or	section 509(a)(2)	ſ
f			ten determination from t	the IRS tha	atıtıs a Ty	ре I, Туре	II, or Type	e III			
		rganization, check th							_		
g	_		rganization accepted ar			-					T
			rectly controls, either al	lone or tog	ether with	persons o	lescribed	ın (ii) and (	iii) below,	1	No
	-		upported organization?							11g(i)	<del> </del>
		•	described in (i) above?		_					11g(ii)	
		•	person described in (i)	• •						[11g(iii)	
h	Provide the f	ollowing information	about the organizations	the organ	ization su	oports					
			(iii) Type of	(iv) to the a		(s) Did you		4,53 10	the I		
	of supported	(ii) EIN	organization		organization sted in your		ion in col.	(vi) Is   organizatio	on in col.	(vii) Amount	of
orga	anızatıon		(described on lines 1-9		document?		support?	(i) organız U.S	ed in the	support	
			above or IRC section (see instructions))	Yes	No	Yes	No	Yes	No		
						_					
					<u> </u>						
Total		ĺ							1		

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

	edule A (Form 990 or 990-EZ) 2008 irt III   Support Schedule for C	Organizations	Described in	Section 509(a	(Complete only	r if you checked the bo	Page 3
Sec	ction A. Public Support					,	
	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	Gifts, grants, contributions, and				<b>.</b>		
	membership fees received (Do not						
	ınclude any "unusual grants ")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513	<u></u>					
4	Tax revenues levied for the organ-			,			
	ızatıon's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 - 5					-	
7ε	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						
Sec	ction B. Total Support						
Cal	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
t	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is fo	r the organization's	s first, second, thi	rd, fourth, or fifth t	ax year as a secti	on 501(c)(3) organiz	ation,
	check this box and stop here						
Sec	ction C. Computation of Publ	<u>ic Support Pe</u>	rcentage				
15	Public support percentage for 2008 (	line 8, column (f) d	ıvıded by line 13,	column (f))		15	%
16	Public support percentage from 2007			<del> </del>		16	%
Sec	ction D. Computation of Inve					<del></del>	<del></del>
17	•					17	%
18	Investment income percentage from					18	
19ε	33 1/3% support tests - 2008. If the	organization did r	ot check the box	on line 14, and line	e 15 is more than	33 1/3% , and line 1	7 is not
	more than 33 1/3%, check this box a	nd <b>stop here.</b> The	organization qua	lifies as a publicly	supported organi	zation	
b	33 1/3% support tests - 2007. If the	-					and
	line 18 is not more than 33 1/3%, che						
	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check to	his box and see in	nstructions	▶∟

Schedule A (Form 990 or 990-EZ) 2008 CALIFORNIA MASONIC FOUNDATION 23-7013074 Page 4
Part IV Supplemental Information. Complete this part to provide the explanation required by Part II, line 10, Part II, line 17a or 17b, or Part III, line 12 Provide any other additional information (see instructions)
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:
SYMPOSIUM REVENUE
UNDER IRC REG. SECTION 1.170A-9(F)(3), IF AN ORGANIZATION FAILS TO MEET
THE 33 1/3 PERCENT-OF-SUPPORT TEST UNDER SUBPARAGRAPH (2), IT CAN STILL
QUALIFY AS A PUBLICLY SUPPORTED ORGANIZATION UNDER IRC SECTION
170(B)(1)(A)(VI) IF IT MEETS THE "FACTS AND CIRCUMSTANCES" TEST UNDER
SUBPARAGRAPH (3).
REQUIREMENT 1: SUBSTANTIAL PUBLIC SUPPORT:
THE ORGANIZATION DERIVES LESS THAN 33 1/3% FROM DIRECT CONTRIBUTION FROM
THE GENERAL PUBLIC, BUT MORE THAN 10%.
REQUIREMENT 2: ATTRACTION OF PUBLIC SUPPORT:
THE CALIFORNIA MASONIC FOUNDATION HAS AN ANNUAL FUND CAMPAIGN WHERE IT
SOLICITS 60,000 PLUS POTENTIAL DONORS EACH YEAR. PARTICIPATION IS IN THE
10-13% RANGE. TOTAL GIVING EACH YEAR RANGES BETWEEN \$600,000 AND \$800,000,
DEPENDING ON THE NATURE OF THE PROGRAM. THE ORGANIZATION ALSO SOLICIT AND
RECEIVE PLANNED GIFTS, SUCH AS CHARITABLE TRUSTS, AND CHARITABLE GIFT
ANNUITIES.
THIS IS A FULLTIME AND CONTINUOUS PART OF OUR FUNDRAISING STRATEGY. THE
ORGANIZATION DOES NOT TYPICALLY SEEK FUNDS FROM GOVERNMENT UNITS OR OTHER
PUBLIC CHARITIES
ADDITIONAL FACTS:
PERCENTAGE OF SUPPORT DERIVED BY THE ORGANIZATION FROM THE PUBLIC OR FROM
GOVERNMENTAL UNITS: Ø2.70%

Schedule A (Form 990 or 990-EZ) 2008 CALIFORNIA MASONIC FOUNDATION 23-7013074 Page 4
Part IV Supplemental Information. Complete this part to provide the explanation required by Part II, line 10, Part II, line 17a or 17b;
or Part III, line 12 Provide any other additional information. (see instructions)
THE ORGANIZATION'S SUPPORT IS SOURCED FROM THE GENERAL PUBLIC AND FEW
LARGE DONORS.
CALIFORNIA MASONIC FOUNDATION SOLICITS DONATION THROUGH DIRECT MAIL,
MASONIC FOUNDATION WEBSITE AND FACE-TO-FACE COMMUNICATION WITH PROSPECTIVE
DONORS.
OVER THE PAST SEVERAL YEARS, THE CALIFORNIA MASONIC FOUNDATION HAS
SOLICITED AND RAISED FUNDS FROM MORE THAN 10,000 DIFFERENT DONORS. THE
AVERAGE GIFT IS APPROXIMATELY \$150. THIS BROAD LEVEL OF GIVING CONTRASTS
THE MAJOR GIFT PORTION OF THE PROGRAM, WHERE A SMALL GROUP OF DONORS HAS
MADE GIFTS OR PLEDGES IN THE \$25,000 TO \$100,000 RANGE.
MIDE OIL ID ON LEGISON IN THE PERFORMANCE.
THE ORGANIZATION HAS A GOVERNING BODY THAT IS DIVERSE AND IS MADE UP OF
INDIVIDUALS ELECTED PURSUANT TO THE ORGANIZATION'S GOVERNING BYLAWS BY A
BROAD MEMBERSHIP BASE. PLEASE SEE FORM 990, PART VII FOR A FULL LIST OF
BOARD MEMBERS.
BOARD MEMBERS.
IN CARRYING OUT ITS EXEMPT PURPOSES, THE ORGANIZATION PROVIDES THE
FOLLOWING SERVICES AND/OR FUNCTIONS:
SINCE 1994, THE FOUNDATION HAS INVESTED MORE THAN \$3.7 MILLION IN A
TEACHER TRAINING PROGRAM CALL THE MASONIC STUDENT ASSISTANCE PROGRAM
(MSAP). THE VERY SPECIFIC CORE TEAM TRAINING WAS RECEIVED BY MORE THAN
5,000 TEACHERS IN CALIFORNIA, WHO HAVE, TO DATE, REFERRED MORE THAN 55,000
CHILDREN FOR FURTHER CARE AND ATTENTION.
THE FOUNDATION ALSO RUNS A BROAD-BASED SCHOLARSHIP PROGRAM, WHICH PROVIDES

COLLEGE SCHOLARSHIPS TO MORE THAN 250 STUDENTS EACH YEAR. THE DOLLARS

Schedule A (Form 990 or 990-EZ) 2008 CALIFORNIA MASONIC FOUNDATION 23-7013074 Page 4
Part IV Supplemental Information. Complete this part to provide the explanation required by Part II, line 10, Part II, line 17a or 17b, or Part III, line 12 Provide any other additional information (see instructions)
COMMITTED TOTALED MORE THAN \$900,000. THE APPLICATION IS WEIGHED MOST
HEAVILY ON ACADEMIC PERFORMANCE AND FINANCIAL NEED. THE PROCESS ATTRACTED
MORE THAN 1,200 COMPLETED APPLICATIONS THIS PAST YEAR.
THE FOUNDATION HAS PROVIDED SUPPORT FOR PUBLIC EDUCATION THROUGH
DEVELOPING PARTNERSHIP WITH DISTRICTS, SCHOOLS AND PROMOTING LODGE LEVEL
SUPPORT IN LOCAL COMMUNITIES ALL OVER CALIFORNIA. IT HAS PROVIDED MORE
THAN \$50,000 IN DIRECT SUPPORT OF SCHOOL BASED PROGRAMS IN THE LAST THREE
YEARS.
THE FOUNDATION SUPPORTS A CHILD ID PROGRAM, WHERE MEMBERS SET UP BOOTHS AT
PUBLIC GATHERINGS TO CREATE IDENTIFICATION CARDS FOR YOUNG CHILDREN,
INCLUDING PHOTOS AND FINGER PRINTS.
THE FOUNDATION IS AVAILABLE TO MANAGE SCHOLARSHIPS FOR OTHER ORGANIZATIONS
AND CHARITIES, INCLUDING FUND MANAGEMENT, APPLICATION PROCESSING, AND
CHECK DISTRIBUTION.
THE FOUNDATION PROVIDES OVERSIGHT AND ENCOURAGEMENT TO THE 350 LOCAL
MASONIC LODGES TO ENGAGE THEIR COMMUNITIES IN COMMUNITY SERVICE, SCHOOL
SUPPORT AND PUBLIC SERVICE.

### Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Financial Statements**

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

2008
Open to Public Inspection

Name of the organization

Employer identification number

Ham	CALIFORNIA MASONIC	FOUNDATION	23-7013074
Pai			
	organization answered "Yes" to Form 990, Part IV, lin		o or recommend complete it the
	organization anotto to to to the coopy and the	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	•	writing that the access hold in donor advis	and funds
3	Did the organization inform all donors and donor advisors in	_	
	are the organization's property, subject to the organization's	•	Yes No
6	Did the organization inform all grantees, donors, and donor a		· — —
Pai	for charitable purposes and not for the benefit of the donor of the Conservation Easements. Complete if the or		
			Part IV, IIII9 /
1	Purpose(s) of conservation easements held by the organizat		atomosti, manatomi la uni anno
	Preservation of land for public use (e.g., recreation or public use)	· —	storically important land area
	Protection of natural habitat	Preservation of certif	fied historic structure
_	Preservation of open space		
2	Complete lines 2a-2d if the organization held a qualified cons	servation contribution in the form of a cor	nservation easement on the last day
	of the tax year		
	Tabel accept on a factor of a constant of the		Held at the End of the Year
a	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic str	* *	2c
d	Number of conservation easements included in (c) acquired		_2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by tr	e organization during the taxable
	year >		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the pe	priodic monitoring, inspection, violations, a	
_	enforcement of the conservation easements it holds?		. L Yes L No
6	Staff or volunteer hours devoted to monitoring, inspecting, a		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) about	ve satisfy the requirements of section 170	
_	and section 170(h)(4)(B)(ii)?		Yes L_ No
9	In Part XIV, describe how the organization reports conservat	·	•
	include, if applicable, the text of the footnote to the organiza	ition's financial statements that describes	s the organization's accounting for
Pai	conservation easements  † III   Organizations Maintaining Collections o	of Art Historical Treasures or (	Ther Similar Accets
- 41	Complete if the organization answered "Yes" to Form		omei Omiiai Assets.
	Complete ii die organization anomolea 100 to 1011	1 000,1 41.14, 1110 0	
10	If the organization elected, as permitted under SFAS 116, no	at to report in its revenue statement and h	asianas abast warks of art. historical
10	treasures, or other similar assets held for public exhibition, e	·	· ·
		•	dolic service, provide, in Part XIV, the text of
L	the footnote to its financial statements that describes these		
D	If the organization elected, as permitted under SFAS 116, to	•	•
	or other similar assets held for public exhibition, education, o	or research in furtherance of public service	e, provide the following amounts relating to
	these items		<b>.</b> .
	(i) Revenues included in Form 990, Part VIII, line 1		<b>\$</b>
_	(ii) Assets included in Form 990, Part X		<b>&gt;</b> \$
2	If the organization received or held works of art, historical tre		al gain, provide
	the following amounts required to be reported under SFAS 1	I16 relating to these items:	
a	Revenues included in Form 990, Part VIII, line 1	•	<b>\$</b>
b	Assets included in Form 990, Part X		<b>▶</b> \$

Part III   Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)			NIA MASONI							01307		
a   Public oxhibition   d   Loan or exchange programs   b   Scholarly research   e   Other   c   Preservation for future generations  4 Provide a description of the organization solicit or receive diorations of art, historical freesures, or other similar seases to be seld for base funds either than to be marrated as part of the organization accelerator?   Yee   No   Part IV   Trust, Escrow and Custodial Arrangements. Complete if organization answered "yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21  1b If "yes, "explain the airangement in Part XIV and complete the following table   1 If yes, "explain the airangement in Part XIV and complete the following table   2 Biginning of year balance   16	Pa	rt III   Organizations Maintaining (	Collections of A	t, His	torical Tre	easures, c	or Oth	er Sim	ilar Ass	ets (cont	inued)	
a Public exhibition d	3	Using the organization's accession and other	r records, check any	of the	following that	t are a signif	icant us	e of its c	ollection if	tems (che	ck all	
b Scholarly research e				_								
c	а		d									
4. Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV 5. During the year, did the organization's collection?	b	Scholarly research	е		Other							
During the year, did the organization solicit or receive donations of art, historical treasures, or other similar asserts to be self to raise funds rather than to be maintained as part of the organization's collection?    Part IV   Trust, Escrow and Custodial Arrangements. Complete if organization answored "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X in e21    Is the organization an agent, frustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?   Ves	C											
The solid to raise funds rather than to be maintained as part of the organization's collection?    Part IV   Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21    Trust   Part IV   Trust   Part IV   Part	4					-			•	art XIV		
Part V   Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21	5						er sımıla	ır assets	_	<del></del>		,
Teleported an amount on Form 930, Part X, line 21   Yes   No	D											No
1s is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?	Pai			. Comp	lete if organi	zation answe	ered "Ye	s" to Fo	rm 990, Pa	art IV, line	9, or	
On Form 990, Part X?						<del></del>			<del>_</del>		-	
Describence   Francisco   F	18		ian or other intermed	liary for	contribution	s or other as	sets no	t include	d r	<b>-</b>	_	٦
Amount   Italian   Amount   Italian   Amount   Italian   Amount   Italian   Amount   Italian   Amount   Italian   Amount   Italian		·		0	4-61-	•			<u>_</u>	Yes	L	J No
C   Beginning balance   1 to   1 t	D	ir "Yes," explain the arrangement in Part XIV	and complete the to	llowing	Table				1			
d Additums during the year    1d	_	Reginning helence						-	1	Amoun	<u>t                                     </u>	
But   Dut	6											
f	u	J ,								<del></del>		
2a   Did the organization include an amount on Form 990, Part X, line 21?	f									<del></del>		
Description of lives   explain the arrangement in Part XIV   Endowment Funds. Complete or organization answered "Yes" to Form 990, Part IV, line 10	) 20	•	orm 990 Part Y line	212					<del>'</del>	Voc		] No
Part V				21:						105		] NO
(a) Current year   (b) Pnor year   (c) Two years back   (d) Three years back   (e) Four years   (e) Fou				red "Ye	es" to Form 9	90. Part IV. I	ine 10		<del></del>			
1a Beginning of year balance         13882677.           b Contributions         559,259.           c Investment earnings or losses         1,577,246.           d Grants or scholarships         267,621.           e Other expenditures for facilities and programs         15,375.           and programs         15603132.           g End of year balance         15603132.           2 Provide the estimated percentage of the year end balance held as           a Board designated or quasi-endowment ▶ 86.00 %         7.00 %           b Permanent endowment ▶ 7.00 %         9           10 Investment endowment Invides not in the possession of the organization that are held and administered for the organization by         Yes No           3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by         Yes No           3ii In related organizations         3a(i) X           b If "Yes" to 3a(i), are the related organizations listed as required on Schedule R?         3b X           4 Describe in Part XIV the intended uses of the organization's endowment funds         (b) Cost or other basis (other)         (c) Depreciation (d) Book value basis (other)           1a Land         (a) Cost or other basis (investment)         (b) Cost or other basis (other)         (c) Depreciation (d) Book value basis (other)           1a Lead         (a) Equipment								(d) Three	e vears had	k (e) Four	r vears	hack
b Contributions c Investment earnings or losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 1 15,375.  f Administrative expenses g End of year balance 1 15603132.  Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment ▶ 7.00 % b Permainent endowment ▶ 86.00 % c Term endowment ▶ 86.00 % c Term endowment ▶ 7.00 %  by (i) unrelated organizations (iii) related organizations (iii) related organizations by If *Yes* to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIV the intended uses of the organization's endowment funds  Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10  Description of investment  (a) Cost or other basis (investment)  B Buildings C Leas+hold improvements d Equipment F 7, 015. 5, 307. 1,708. d Equipment F 7, 015. 5,307. 1,708. e Other F 18,019. 17,253. 766.	1a	Beginning of year balance		1-7:	1.07 704.	(O) ( No you	o Duon	(d)	o youro buo	, ( <b>0</b> ) 1 0 0 1	youro	buok
Color   Investment earnings or losses   1,577,246.		• • •								1		
d Grants or scholarships e Other expenditures for facilities and programs 15,375.  f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment ▶ 7.00 % b Permanent endowment ▶ 7.00 % c Term endowment ▶ 7.00 %  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations (iii) related organizations b if *Yes* to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIV the intended uses of the organization's endowment funds  Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, Inio 10  Description of investment (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Depreciation (d) Book value  b Buildings c Leasehold improvements d Equipment 7, 015 5, 307 1, 708. e Other Other 18,019 17,253 766.	С	Investment earnings or losses						-				
## Administrative expenses ## Administrative expenses ## End of year balance ## 15,375. ## 133,054. ## 15603132.  ## 2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment ▶ 7.00 % ## 2 Permanent endowment ▶ 86.00 % ## 2 C Term endowment ▶ 86.00 % ## 2 C Term endowment ▶ 7.00 %  ## 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations ## 3a(i) X 3a(i) X 3a(i) X 3a(ii)  X 3a(ii) X 3a(ii) X 3a(ii) X 3a(ii) X 3a(iii) X 3a(ii) X 3a(ii) X 3a(ii) X	d											
## Administrative expenses ## Administrative expenses ## End of year balance ## 15,375. ## 133,054. ## 15603132.  ## 2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment ▶ 7.00 % ## 2 Permanent endowment ▶ 86.00 % ## 2 C Term endowment ▶ 86.00 % ## 2 C Term endowment ▶ 7.00 %  ## 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations ## 3a(i) X 3a(i) X 3a(i) X 3a(ii)  X 3a(ii) X 3a(ii) X 3a(ii) X 3a(ii) X 3a(iii) X 3a(ii) X 3a(ii) X 3a(ii) X	0	Other expenditures for facilities	•						-			
provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment ▶ 7.00 %  b Permanent endowment ▶ 86.00 %  c Term endowment ▶ 7.00 %  Are there endowment funds not in the possession of the organization that are held and administered for the organization by  (i) unrelated organizations (ii) related organizations  b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10  Description of investment  (a) Cost or other basis (investment)  B Buildings  c Leasehold improvements  d Equipment  F 7,015. 5,307. 1,708.  e Other  Other  18,019. 17,253. 7666.			15,375.									
Provide the estimated percentage of the year end balance held as  Board designated or quasi-endowment ▶ 7.00 %  Permanent endowment ▶ 86.00 %  Term endowment ▶ 7.00 %  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by  (i) unrelated organizations (ii) related organizations  b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  Describe in Part XIV the intended uses of the organization's endowment funds  Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10  Description of investment  (a) Cost or other basis (investment)  b Buildings  c Leasehold improvements  d Equipment  e Other  7,015, 5,307, 1,708.	f	Administrative expenses	133,054.									
a Board designated or quasi-endowment ▶ 7.00 % b Permanent endowment ▶ 86.00 % c Term endowment ▶ 7.00 %  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by  (i) unrelated organizations (ii) related organizations  b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIV the intended uses of the organization's endowment funds  Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10  Description of investment  (a) Cost or other basis (investment)  b Buildings c Leasehold improvements d Equipment e Other  7,015 5,307 1,708. e Other	g	End of year balance	15603132.									
b Permanent endowment	2	Provide the estimated percentage of the year	r end balance held a	S			•					
Term endowment ▶	а	Board designated or quasi-endowment	7.00	_%								
Are there endowment funds not in the possession of the organization that are held and administered for the organization by  (i) unrelated organizations (ii) related organizations  b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  Describe in Part XIV the intended uses of the organization's endowment funds  Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10  Description of investment  (a) Cost or other basis (investment)  basis (investment)  basis (other)  1a Land  b Buildings  c Leasehold improvements  d Equipment  e Other  17,015. 5,307. 1,708.  17,08.	b		<u></u> %									
Yes   No	C	Term endowment ► 7.00	%									
(ii) related organizations (iii) related organizations  b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIV the intended uses of the organization's endowment funds  Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10  Description of investment  (a) Cost or other basis (investment)  (b) Cost or other basis (other)  (c) Depreciation  (d) Book value  Buildings  Land  Buildings  Leasehold improvements  Genupment  The sea of the control of investment (a) Cost or other basis (other)  1a Land  Buildings  C Leasehold improvements  Genupment  The sea of the control of investment (a) Cost or other basis (other)  1a Land  Buildings  C Leasehold improvements  Genupment  The sea of the control of investment (b) Cost or other basis (other)  The sea of the control of investment (c) Depreciation (d) Book value  The sea of the control of investment	3a	Are there endowment funds not in the posse	ssion of the organize	ation th	at are held ar	nd administe	red for t	the orgai	nızatıon			
(ii) related organizations  b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIV the intended uses of the organization's endowment funds  Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10  Description of investment  (a) Cost or other basis (investment)  (b) Cost or other basis (other)  (c) Depreciation  (d) Book value  (d) Book value  b Buildings  c Leasehold improvements  d Equipment  o Other  18,019. 17,253. 766.		by									Yes	No_
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIV the intended uses of the organization's endowment funds  Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10  Description of investment  (a) Cost or other basis (investment)  (b) Cost or other basis (other)  (c) Depreciation  (d) Book value  Buildings  Leasehold improvements  Leasehold improvements  Equipment  Other  18,019. 17,253. 766.		(i) unrelated organizations								3a(i)	X	
Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10  Description of investment (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Depreciation (d) Book value  Buildings Leasehold improvements Leaseh		(ii) related organizations								3a(ii)		
Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10  Description of investment (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Depreciation (d) Book value  1a Land b Buildings c Leasehold improvements d Equipment e Other 18,019. 17,253. 766.	b		•							3b	X	
Description of investment  (a) Cost or other basis (investment)  (b) Cost or other basis (other)  (c) Depreciation  (d) Book value  (d) Book value  (e) Depreciation  (f) Depreciation  (I) Book value  (II) Depreciation  (III) Book value												
basis (investment) basis (other)  1a Land b Buildings c Leasehold improvements d Equipment e Other  basis (investment) basis (other)  7,015. 5,307. 1,708. 18,019. 17,253. 766.	Pai	rt VI   Investments - Land, Building	s, and Equipme	ent. se	e Form 990,	Part X, line	10					
b Buildings c Leasehold improvements d Equipment e Other  D T T T T T T T T T T T T T T T T T T		Description of investment	1 ' '		, , ,	I	(c) D	Depreciat	tion	( <b>d</b> ) Boo	k value	•
c Leasehold improvements       7,015.       5,307.       1,708.         e Other       18,019.       17,253.       766.	1a	Land										
c Leasehold improvements       7,015.       5,307.       1,708.         e Other       18,019.       17,253.       766.	b	Buildings										
e Other 18,019. 17,253. 766.		_										
e Other 18,019. 17,253. 766.	d	Equipment				7,015.		5,	307.		1,7	08.
		Other										
	Total	I. Add lines 1a-1e (Column (d) should equal Fo	orm 990, Part X, colu	mn (B),	lıne 10(c) )				<b>•</b>		2,4	74.

Schedule D (Form 990) 2008 CALIFORNIA Part VII Investments - Other Securities.	MASONIC FOUNDA	ATION	23-7013074 Page 3
<u> </u>		(a) Mot	hod of valuation:
<ul> <li>(a) Description of security or category</li> <li>(including name of security)</li> </ul>	(b) Book value		l-of-year market value
	<del>                                     </del>		
Financial derivatives and other financial products			
Closely-held equity interests			
Other			
	<del> </del>		
	<del>                                     </del>		
		· · · · · · · · · · · · · · · · · · ·	
Total. (Col (b) should equal Form 990, Part X, col (B) line 12.)			
Part VIII Investments - Program Related.			
<u> </u>	(b) Book value		hod of valuation
(a) Description of investment type	(b) Book value	Cost or end	-of-year market value
	<u> </u>		
	<del>                                     </del>		
	<del></del>		<del></del>
		· · · · · · · · · · · · · · · · · · ·	
Total. (Col (b) should equal Form 990, Part X, col (B) line 13.)	<b>&gt;</b>		
Part IX Other Assets. See Form 990, Part X, III	ne 15		
(0	a) Description		(b) Book value
		<del> </del>	
	· · · · · · · · · · · · · · · · · · ·		
Total. (Column (b) should equal Form 990, Part X, col (B)			<u> </u>
Part X Other Liabilities. See Form 990, Part X		27.	
(a) Description of liability		(b) Amount	
Federal income taxes			
DUE TO OTHER MASONIC ENTITIE	s	70,914.	
DUE TO GRAND LODGE		8,649.	
		1	
		79,563.	

under FIN 48

	dule D (Form 990) 2008 CALIFORNIA MASONIC FOUNDAT:				<u>23-</u>	<u>7013074                                    </u>	Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to	Finan	cial State	ment	s		
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1		<u> </u>	
2	Total expenses (Form 990, Part IX, column (A), line 25)			2			
3	Excess or (deficit) for the year Subtract line 2 from line 1			_3			
4	Net unrealized gains (losses) on investments		İ	4			
5	Donated services and use of facilities			5		-	
6	Investment expenses		ĺ	6			
7	Prior period adjustments			7			
8	Other (Describe in Part XIV)			8			
9	Total adjustments (net). Add lines 4-8			9			
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9			10			
	t XII Reconciliation of Revenue per Audited Financial Stateme	nts Wi	th Rever		r Return		<del></del>
1	Total revenue, gains, and other support per audited financial statements			uo po		<u> </u>	
					1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 - 1					
a	Net unrealized gains on investments	2a					
b	Donated services and use of facilities	2b					
С	Recoveries of prior year grants	2c					
d	Other (Describe in Part XIV)	2d			_		
0	Add lines 2a through 2d				2е		. <u></u> .
3	Subtract line 2e from line 1				3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1						
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a					
b	Other (Describe in Part XIV)	4b					
C	Add lines 4a and 4b				4c		
5_	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)				5		
Par	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents W	/ith Expe	nses p	er Retu	rn	·
1	Total expenses and losses per audited financial statements				1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25						
а	Donated services and use of facilities	2a					
ь	Prior year adjustments	2b					
С	Losses reported on Form 990, Part IX, line 25	2c					
ď	Other (Describe in Part XIV)	2d					
θ.	Add lines 2a through 2d				2ө		
3	Subtract line 2e from line 1				3		-
4	Amounts included on Form 990, Part IX, line 25, but not on line 1				-		
٠,	Investment expenses not included on Form 990, Part VIII, line 7b	40					
a L	·	4a					
b	Other (Describe in Part XIV)	4b			$\dashv$ . $\mid$		
	Add lines 4a and 4b				4c		
	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)  t XIV Supplemental Information				5		
		1 1		4 B ( Loss	. 46	25 D-+1/ b	4 0
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III	I, lines 1	a and 4, Pa	rt IV, IINe	s 10 and 2	2b, Part V, Ilne	4, Part
	rt XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b		TD 0877		D	T 0373 T	
PAI	RT V, LINE 4: PRIMARILY COLLEGE SCHOLARSHIP	PS Ar	ND OTH	ER E	DUCAT.	LONAL	
					~		
AC'	IVITIES. IN ADDITION, PORTIONS ARE USED I	FOR 1	THE MA	SONT	C LEA	DERSHIP	
TRA	AINING AND THE ONGOING MAINTENANCE OF CALIF	FORN:	LA MAS	ONIC	MEMO	RIAL	
TEI	IPLE.						
раг	RT X: IN JULY 2006, THE FASB ISSUED ASC 740		OME '	<b>ጉል</b> ሄቹ	s"		
	THE THE PARTY AND THE PARTY AN	<u>. 11</u>	, COLL		<del></del>		
<u>(</u> F(	RMERLY FASB INTERPRETATION NO. 48, ACCOUNT	TING	FOR U	NCER'	TAINT	Y IN INC	COME
TAX	KES ("FIN 48")). ASC 740 CLARIFIES THE ACC	OON.T. ]	LING PO.	ム エルィ	COMP .	THVED D	L

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Schedule D (Form 990) 2008

ASC 740 WAS ORIGINALLY EFFECTIVE FOR FISCAL YEARS BEGINNING AFTER DECEMBER 15, 2006. IN FEBRUARY 2008, THE FASB ISSUED STAFF POSITION ("FSP") FIN 48-2, "EFFECTIVE DATE OF FASB INTERPRETATION NO. 48 FOR CERTAIN NONPUBLIC ENTERPRISES," WHICH DELAYED BY ONE YEAR THE EFFECTIVE DATE OF ASC 740 FOR CERTAIN NONPUBLIC ENTERPRISES. IN DECEMBER 2008, THE FASB ISSUED FSP FIN 48-3, "EFFECTIVE DATE OF FASB INTERPRETATION NO. 48 FOR CERTAIN NONPUBLIC ENTERPRISES," WHICH AGAIN DELAYED BY ONE YEAR THE EFFECTIVE DATE OF ASC 740 FOR CERTAIN NONPUBLIC ENTERPRISES.

THE FOUNDATION HAS ELECTED TO DEFER THE APPLICATION OF ASC 740 TO YEARS

BEGINNING AFTER DECEMBER 15, 2008, IN ACCORDANCE WITH FSP FIN 48-3. THE

FOUNDATION IS CONTINUING TO EVALUATE THE IMPACT ASC 740 WILL HAVE ON ITS

FINANCIAL STATEMENTS.

SCHEDULE I (Form 990)		Grants and	Grants and Other Assistance to Organizations,	e to Organizations	ء.		OMB No 1545-0047
Department of the Treasury Internal Rawonia Service	▲ Com	GOVEITII Complete if the organizatic	Governments, and individuals in the U.S. lanization answered "Yes," on Form 990,	luais in the U.S. ," on Form 990, Pa	Governments, and individuals in the U.S. organization answered "Yes," on Form 990, Part IV, lines 21 or 22.		Open to Public
			► Attach to Form 990	m 990.			Inspection
f the organization	CALIFORNIA MASONIC	C FOUNDATION					Employer identification number 23-7013074
[ ]	and Assistance						
1 Does the organization maintain records to substantiate the amount	to substantiate th		or assistance, the	grantees' eligibility	for the grants or ass	of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	
	istance?						N N X Yes
힜	ocedures for mon	Itoring the use of grant	funds in the United	States			
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	Governments an	d Organizations in the	e United States. C	omplete if the orga	ınızatıon answered "Y	es* on Form 990, Part	IV, line 21, for any
recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	\$5,000 Check th	is box if no one recipier	nt received more th	an \$5,000 Use Pa	rt IV and Schedule I-1	(Form 990) if addition	al space is needed
(a) Name and address of organization     or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ij							
ASSOCIATION - 303 W. LINCOLN		_					
AVENUE SUITE 200 - ANAHEIM, CA			6	•			
	95-2645801	501(C)(3)	10,000	0			LEADERSHIP DEVELOPMENT
THE CAMPANILE FOUNDATION - SAN DIEGO STATE INTVERSITY - 5500							
ğ							
,	33-0868418	501(C)(3)	10,000	0			LEADERSHIP DEVELOPMENT
CALIFORNIA MASONIC MEMORIAL TEMPLE							
SAN FRANCISCO, CA 94108	94-1266937	501(C)(3)	91,880.	0.			GENERAL SUPPORT
5		•					ENRICHMENT OF EDUCATION
Ĕ							AND LEADERSHIP SKILLS
CALIFORNIA ST - SAN FRANCISCO, CA							AMONG MASTER MASONS
94108	94-0487790	501(C)(10)	63,118,	0.			THROUGH WORKSHOPS AND
							GRADUATE STUDIES SUPPORT
THE U.C.L.A. FOUNDATION				-			FOR PROGRAM IN MASONIC
Ħ						<u>~</u>	STUDIES (DEPARTMENT OF
LOS ANGELES, CA 90024	95-2250801	501(C)(3)	80,000.	0			HISTORY)
2 Enter total number of section 501(c)(3) and government organization	and government o	rganizations	,				4
3 Enter total number of other organizations	SI						1
LHA. For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 SEE PART IV FOR COLUMN (H) DESCRIPTI	uction Act Notice, see the IV FOR COLUMN	, see the Instructions () LUMN (H) DE	ions for Form 990. DESCRIPTIONS	ស			Schedule I (Form 990) 200

(f) Description of non-cash assistance 23-7013074 (book, FMV, appraisal, other) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Use Schedule I-1 (Form 990) if additional space is needed Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information J. THE ORGANIZATION. THE APPROPRIATE COMMITTEES SET GUIDELINES A) MASONIC FOUNDATION SCHOLARSHIP PROGRAM - THIS PROGRAM PROVIDES COLLEGE LINE 2: GRANT FUNDS ARE MONITORED BY THE APPROPRIATE GRANTING OF SCHOLARSHIP TO THE SCHOLAR STUDENTS. DURING THE SCHOLARSHIP WEIGHED MOST HEAVILY ON ACADEMIC PERFORMANCE AND FINANCIAL NEEDS PRIOR THE APPLICATION IS (d) Amount of non-cash assistance (c) Amount of cash grant SCHOLARSHIPS TO MORE THAN 250 STUDENTS EACH YEAR. CALIFORNIA MASONIC FOUNDATION (b) Number of recipients (a) Type of grant or assistance ON HOW FUNDS ARE USED. PART I, Schedule I (Form 990) 2008 COMMITTEES OF SCHEDULE I, Part IV Part III

; ;-,

THE

PERIOD, THERE IS A VERIFICATION PROCESS OF THEIR GRADE POINT AVERAGE.

Page

Schedule I (Form 990) 2008 CALIFORNIA MASONIC FOUNDATION 23-7013074 Part IV Supplemental Information	age 2
SCHOLAR STUDENTS SUBMIT A TRANSCRIPT OF RECORDS THAT SHOWS THEIR SCHOOL	
ACADEMIC PERFORMANCE. THE SCHOLAR STUDENTS ALSO NEED TO COMPLETE AN	
APPLICATION FORM OR A RENEWAL FORM, ATTACHING SUPPORTING DOCUMENTATION	
(E.G., TRANSCRIPT OF RECORD). ONCE DOCUMENTATION IS COMPLETE, THE MASONI	<u>C</u>
FOUNDATION STAFF IN CHARGE OF THE SCHOLARSHIP PROGRAM WILL UPDATE THE	
SCHOLARSHIP DATABASE TO INCLUDE THEM IN THE SCHOLARSHIP REPORT FOR	
SCHOLARSHIP COMMITTEE APPROVAL.	
B) MASONIC EDUCATION LEADERSHIP PROGRAM - THE GRANT IS BASED ON ACTUAL	
EXPENSES MONITORED MONTHLY BY THE GRAND LODGE EXECUTIVE COMMITTEE. THE	
GRAND LODGE EXECUTIVE COMMITTEE DETERMINES AND APPROVES THE LEADERSHIP	
TRAININGS FOR THE PROGRAM AND APPROVES THE NECESSARY BUDGET.	
C) GRANT TO MASONIC TEMPLE FOR BUILDING RENOVATION, REPAIRS AND MAINTENA	NCE
- THE GRANT IS BASED ON ACTUAL EXPENSES MONITORED AND REVIEWED MONTHLY B	
	1
THE GRAND LODGE AND MASONIC FOUNDATION AND TEMPLE EXECUTIVE COMMITTEE.	
PART II, LINE 1, COLUMN (H):	
NAME OF ORGANIZATION OR GOVERNMENT:	
RAND LODGE OF FREE AND ACCEPTED MASONS OF CALIFORNIA	
H) PURPOSE OF GRANT OR ASSISTANCE: ENRICHMENT OF EDUCATION AND	
EADERSHIP SKILLS AMONG MASTER MASONS THROUGH WORKSHOPS AND FOCUS GROUPS	

### SCHEDULE J (Form 990)

### **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

2008

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

Open to Public Inspection

Name of the organization

CALIFORNIA MASONIC FOUNDATION

Employer identification number 23-7013074

Pa	art I Questions Regarding Compensation			
			Yes	No
<b>1</b> a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision			
	of all of the expenses described above? If "No," complete Part III to explain	1b	L	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's			
	CEO/Executive Director Check all that apply			
	Compensation committee X Written employment contract			
	Independent compensation consultant  X Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a			
a	Receive a severance payment or change of control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of			
а	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes," to line 5a or 5b, describe in Part III		•	
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of			i
а	The organization?	6a		_X
b	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7	L	X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regs. section 53.4958.4(a)(3)? If "Ves." describe in Part III	l a	l	x

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

Schedule J (Form 990) 2008

Page

Schedule J (Form 990) 2008 CALIFORNIA MASONIC FOUNDATION 23-7013074
Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J1 if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(0)	(0)	(E)	(F)
(A) Name	<u> </u>	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	Deferred	Nontaxable benefits	Total of columns (B)(i)-(D)	Compensation reported in prior Form 990 or
	1							Form 990-EZ
	Ξ	- 1			0	- 1		
ALLAN LESLEY CASALOU	(1)	177,974.	0	0	0.	10,268.	188,242.	188,242
	ε							
	⊞							
	(i)							
	(ii)							
	(i)							
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				(	37,310		Scheduk	Schedule J (Form 990) 200

### **SCHEDULE 0**

(Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Information to Form 990**

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization

CALIFORNIA MASONIC FOUNDATION

Employer identification number 23 - 7013074

Charles Indian Indian 25 7015074
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
OTHER PROGRAM SERVICES INCLUDE:
1. CHILD ID PROGRAM, WHERE MEMBERS SET UP BOOTHS AT PUBLIC GATHERINGS
TO CREATE IDENTIFICATION CARDS FOR YOUNG CHILDREN, INCLUDING PHOTOS AND
FINGER PRINTS
2. MANAGEMENT OF SCHOLARSHIPS FOR OTHER ORGANIZATIONS AND CHARITIES,
INCLUDING FUND MANAGEMENT, APPLICATION PROCESSING AND CHECK
DISTRIBUTION
3. OVERSIGHT AND ENCOURAGEMENT TO THE 350 LOCAL MASONIC LODGES TO
ENGAGE THEIR COMMUNITIES IN COMMUNITY SERVICE, SCHOOL SUPPORT AND
PUBLIC SERVICE
4. THE MASONIC STUDENT ASSISTANCE PROGRAM: TEACHERS' TRAINING PROGRAM
(MSAP) HELPS AT-RISK STUDENTS POSITIVELY REDIRECT THEIR LIVES BY
PREPARING EDUCATORS TO EFFECTIVELY DEAL WITH THEIR NEEDS OVER THE PAST
SEVERAL YEARS. FOUNDATION HAS INVESTED MORE THAN \$3 MILLION TO PROVIDE
MSAP WORKSHOPS FOR HUNDREDS OF EDUCATORS EACH YEAR, POSITIVELY
AFFECTING THOUSANDS OF CALIFORNIA CHILDREN EACH YEAR.
EXPENSES \$ 143851. INCLUDING GRANTS OF \$ 97627. REVENUE \$ 0.
FORM 990, PART VI, SECTION A, LINE 10: THE SENIOR ACCOUNTANT PREPARES THE
FORM 990 SUPPORTING SCHEDULES/DATA, THEN THE CONTROLLER REVIEWS THE
SCHEDULES/DATA AND SUBMITS TO CFO FOR FINAL APPROVAL. ONCE APPROVED, THE
SCHEDULES ARE SUBMITTED TO THE TAX CONSULTANT FOR THE PREPARATION OF THE
FORM 990. THE TAX CONSULTANT SUBMITS THE FILLED-UP 990 TO THE CFO FOR
FINAL REVIEW AND APPROVAL. CFO SIGNED THE FORM 990 AND FILED WITH THE IRS.

### SCHEDULE O (Form 990)

**Supplemental Information to Form 990** 

Department of the Treasury Internal Revenue Service ➤ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization

CALIFORNIA MASONIC FOUNDATION

Employer identification number 23-7013074

FORM 990, PART VI, SECTION B, LINE 12C: AS REQUIRED, ANNUALLY, EACH MEMBER
OF THE BOARD EXECUTES AND SIGNS A CONFLICT OF INTEREST DISCLOSURE
STATEMENT. IN THIS STATEMENT, THE BOARD AND THE BOARD LEVEL COMMITTEE
DISCLOSES KNOWN, EXISTING, POTENTIAL AND POSSIBLE CONFLICTS OF INTEREST. IF
NO SUCH INTERESTS OR ACTIVITIES EXIST, THE PARTY WRITES THE WORD "NONE" IN
THE SPACE PROVIDED. IN ADDITION, THESE STATEMENTS ARE UPDATED WHEN AN
INTERESTED PARTY SUBSEQUENTLY BECOMES A MATTER OF BOARD ACTION. THE
INTERESTED PARTY DISCLOSES THE CIRCUMSTANCES TO THE PRESIDENT OF THE BOARD
OF DIRECTORS. IN THE EVENT THE INTERESTED PARTY IN QUESTION IS THE
PRESIDENT OF THE BOARD, THE POTENTIAL CONFLICT IS DISCLOSED TO THE FULL
BOARD. THE CONFLICT OF INTEREST DISCLOSURE STATEMENT FOR BOARD AND
NON-BOARD COMMITTEE MEMBERS IS SUBMITTED TO THE PRESIDENT OF THE BOARD FOR
REVIEW. THE PLANS FOR MITIGATION OF ANY CONFLICT RELATING TO BOARD MEMBERS
OR NON-BOARD COMMITTEE MEMBERS ARE PRESENTED BY THE PRESIDENT TO THE BOARD
AND THE GRAND MASTER. FOLLOWING THEIR REVIEW, ALL CONFLICT OF INTEREST
DISCLOSURE STATEMENTS ARE KEPT ON FILE WITH THE GRAND SECRETARY.
FORM 990, PART VI, SECTION C, LINE 19: THE AUDITED FINANCIAL STATEMENTS,
GOVERNING/ORGANIZING DOCUMENTS, AND CONFLICT OF INTEREST POLICY ARE
AVAILABLE AT THE CORPORATE OFFICE.
FORM 990, PART XI, LINE 2 AND PART IV, LINE 12
AUDITED FINANCIAL STATEMENTS WERE NOT PREPARED FOR THE SHORT YEAR ENDED
OCTOBER 31, 2009. INSTEAD, THE ORGANIZATION WILL BE ISSUING
CONSOLIDATED AUDITED FINANCIAL STATEMENTS FOR THE 16 MONTHS ENDED
OCTOBER 31, 2009, TO CORRESPOND WITH A CHANGE IN YEAR END.  LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.  Schedule O (Form 990) 2008

### SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

### Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization **Employer identification number** CALIFORNIA MASONIC FOUNDATION 23-7013074 THE CONSOLIDATED FINANCIAL STATEMENTS FOR THE PERIOD ENDED OCTOBER 31 2009 WILL INCLUDE SEPARATE FINANCIAL INFORMATION FOR THIS ORGANIZATION, REPORTED IN THE SUPPLEMENTAL SCHEDULES. PER IRS INSTRUCTIONS, FORM 990, PART XI, LINE 2 AND PART IV, LINE 12 HAVE BEEN ANSWERED "NO".

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

2008 Open to Public Inspection

OMB No 1545-0047

Employer identification number 23-7013074 Direct controlling entity End-of-year assets ► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37. Œ Total income 0 Legal domicile (state or foreign country) ► See separate instructions. CALIFORNIA MASONIC FOUNDATION Primary activity <u>@</u> Identification of Related Tax-Exempt Organizations Identification of Disregarded Entities Name, address, and EIN of disregarded entity Name of the organization Department of the Treasury Internal Revenue Service Part

( <b>Y</b> )	(B)	<u>(</u> )	<u>Q</u>	Œ	<u>(i</u>
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling
of related organization		foreign country)	section	status (if section 501(c)(3))	entify
CALIFORNIA MASONIC MEMORIAL TEMPLE -	OPERATES EXCLUSIVELY AS A				
94-1266937, 1111 CALIFORNIA STREET, SAN	SUPPORTING ORGANIZATION FOR				
PRANCISCO, CA 94108	THE FOUNDATION	CALIFORNIA	501(C)(3)	11B	N/A
GRAND LODGE OF THE FREE & ACCEPTED MASONS OF					
CALIFORNIA - 94-0487790, 1111 CALIFORNIA					
STREET, SAN FRANCISCO, CA 94108	FRATERNAL ORGANIZATION	CALIFORNIA	501(C)(10)		N/A
MASONIC HOMES OF CALIFORNIA - 94-1156564					
1111 CALIFORNIA STREET	CONTINUING CARE AND				
SAN FRANCISCO CA 94108	RETIREMENT ACTIVITY	CALIFORNIA	501(C)(3)	7	N/A
	•				

Schedule R (Form 990) 200

23-7013074

Page

Schedule R (Form 990) 2008 CALIFORNIA MASONIC FOUNDATION

Part III Identification of Related Organizations Taxable as a Partnership

3	Genera managi parthe	 <del> </del>	<del></del>
8	Disproportion- ate allocations?  20 of Schedule  Yes   No    K-1 (Form 1065)		
Ξ	Disproportion- ate allocations?		
(5)	of ear s		
(F)	Share of total income		
(E)	Predominant income (related, investment, unrelated)		
(Q)	Direct controlling entity		
(0)	Legal domicile (state or foreign country)		
(8)	Primary activity		
(A)	Name, address, and EIN of related organization		

Part IV Identification of Related Organizations Taxable as a Corporation or Trust

(A)	(B)	(C)	<b>(</b> 0)	(E)	(F)	(5)	Œ
Name, address, and ElN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percental ownershi
NOB HILL MASONIC CENTER, INC 61-1511651	OPERATION OF MASONIC TEMPLE PARKING						
SAN FRANCISCO, CA 94108	FACILITY	CA	N/A	c corp	N/A	N/A	N/A
				•	•		
							•
							•

Pag

# Schedule R (Form 990) 2008 CALIFORNIA MASONIC FOUNDATION

# **Transactions With Related Organizations** Part V

Note. Complete line 1 if any entity is listed in Parts II, III, or IV			٨	Yes
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	11·1V?			
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity			18	×
<b>b</b> Gift, grant, or capital contribution to other organization(s)	;		Ð	×
c Gift, grant, or capital contribution from other organization(s)			5	×
d Loans or loan guarantees to or for other organization(s)			19	×
<ul> <li>Loans or loan guarantees by other organization(s)</li> </ul>		•	10	×
f Sale of assets to other organization(s)	;		=	×
g Purchase of assets from other organization(s)	:		19	×
h Exchange of assets			ŧ	×
i Lease of facilities, equipment, or other assets to other organization(s)		;	<b>;=</b>	×
i Lease of facilities, equipment, or other assets from other organization(s)			÷	×
k Performance of services or membership or fundraising solicitations for other organization(s)			¥	×
l Performance of services or membership or fundraising solicitations by other organization(s)			=	×
m Sharing of facilities, equipment, mailing lists, or other assets			1m	×
n Sharing of paid employees			t ~	×
<ul> <li>Reimbursement paid to other organization for expenses</li> </ul>			9	
p Reimbursement paid by other organization for expenses			<u> </u>	×
q Other transfer of cash or property to other organization(s)	:		19	×
r Other transfer of cash or property from other organization(s)			+	×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	hips and transaction three	splods		j
(A) Name of other organization(s)	(B) Transaction		(C) Amount involved	pevi

63,118

m

91,880

m

159,573

0

(2) GRAND LODGE OF FREE AND ACCEPTED MASONS OF CALIFORNIA

(1) CALIFORNIA MASONIC TEMPLE

(3) GRAND LODGE OF FREE AND ACCEPTED MASONS OF CALIFORNIA

(4) GRAND LODGE OF FREE AND ACCEPTED MASONS OF CALIFORNIA

9

9

68,219

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23-7013074

Schedule R (Form 990) 2008 CALIFORNIA MASONIC FOUNDATION

Part VI Unrelated Organizations Taxable as a Partnership

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

NA)	ğ	3	Ę	Ę	í	3	
₹	(g)	2	3		<u>`</u>	2	
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	Are all partners section 501(c)(3) organizations?	Share of end-of- year assets	Dispropor- tionate allocations?	amount in box 20	General or managing partner?
		country)	Yes No		Yes No	(Form 1065)	
						•	
					_		
			•				
							_
					-		
					-		
			_				
			_				$\dashv$

Schedule R (Form 990) 200