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Form **990-EZ**

Short Form

OMB No 1545-1150

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)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form
990 All other organizations with gross receipts less than \$1,000,000 and total assets
less than \$2,500,000 at the end of the year may use this form

A For the 2008 calendar year, or tax year beginning Dec 1 , 2008, and ending Nov 30 , 20.09 B Check appealshall make the properties of th		Depa Inter	ortment of the Treasury nal Revenue Service	990 All other org anizations with gross receipts less than \$1,000,000 and total as less than \$2,500,000 at the end of the year may use this form The organization may have to use a copy of this return to satisfy state reporting requirements.			Open to Public Inspection
Check despectation Chapter C		A	For the 2008 calend	ar year, or tax year beginning Dec 1 .2008, and ending 1	Nov 30		. 2009
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Termination printing Performance Perfo			Name change label	or Number and street (or B.O. how if mail is not delivered to street address). Beamfaulte	E		
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**Section 501(c)(\$) organizations and 4897(a)(1) noncement charitable trusts must affact a completed Schedule A (Form 990 or 990		\vdash	tions		F		xemption
Website: N/A Website: N/A Check If the organization is not required to attach Schedule 6 (Form 990, 90-EZ) Organization type (cleck only one) X Still (2) (10) (insert on) 4947(y(1) or 327 27 27 27 27 27 28 28		Щ	Application pending				<u> </u>
Website: NA MA Gross and State March			• Section 501(i must	attach a completed Schedule A (Form 990 or 990-EZ). Oth	ner (specify)	<u> </u>	
J. Organization type (cleak only one) X 0/(c) (10) - ((neset no.) 44/(x/(1) or 327 990-EZ, or 990-PF)							
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Add Interes 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$1,000,000 or more, file Form 990				(only one) = [15] sor(c) (±0) = (mser(no) [4347(a)(1) or [327]			
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BAA For Privacy Act and Paperwork Reduction Act Notice, see the instructions for Form 990.

Form 990-EZ (2008) UNITY LODGE 148 Part III Statement of Program Se		(See the instruction		<u>-000</u>	04457 Page
What is the organization's primary exempt purpose? N/		S (See the instruction	J113.)	/D	Expenses
Describe what was achieved in carrying out the describe the services provided, the number of program title		oses In a clear and con- elevant information for e	cise manner, ach	and 4947	uired for 501(c)(3) (4) organizations and (a)(1) trusts, optional thers)
28 N/A		·		10.0	
(Grants \$) If th					
	nis amount includes foreign gra			28 a	
29					
(Grants \$) If the	nis amount includes foreign gr	ants, check here	▶ _	29 a	
30					
				i	
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31 Other program services (attach schedule	*)				
(Grants \$) If the	us amount includes foreign gra	ants, check here	▶ 🗍	31 a	
32 Total program service expenses (add lin			•	32	
Part IV List of Officers, Directors	, Trustees, and Key Em	ployees. (List each o	ne even if not com	pens	ated See the instrs)
	(b) Title and average hours	(c) Compensation (If	(d) Contributions	to	(e) Expense account
(a) Name and address	per week devoted	not paid, enter -0)	employee benefit plar		and other allowances
CARL EV	to position		deferred compensa	tion	
CARL EK					
386 COE AVENUE	MASTER				
EAST HAVEN CT 06512	10.00	0.		<u>0.</u>	0.
PHILIP_OCONNOR_					
31 WOODLAND ST APT 12L	TRUSTEE				
HARTFORD CT 06105	5.00	0.		0.	0.
DAVID O STERN					
46 ELIZABETH RD	SECRETARY				
HAMDEN CT 06514	10.00	0.	•	0.	0.
WILLIAM BONNEY	10.00	••			
23 BROOKSIDE DR	TREASURER				
SOUTHINGTON CT 06489	5.00	0		_	
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DAA	<u> </u>				

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	990-EZ (2008) UNITY LODGE 148 AF & AM 10-000445* t V Other Information (Note the statement requirement in General Instruction V.)	<u>'</u>	<u>_</u>	age
	Total information (Note the statement requirement in deneral instruction v.)		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity	33		х
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conformed copy of the changes	34		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.			
ē	Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?	35 a		X
t	If 'Yes,' has it filed a tax return on Form 990-T for this year?	35 b		
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' complete applicable parts of Schedule N	36		х
37 a	Enter amount of political expenditures, direct or indirect, as described in the instructions			
Ł	Did the organization file Form 1120-POL for this year?	37 b	ļ	Х
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38 a		X
ŧ	If 'Yes,' complete Schedule L, Part II and enter the total amount involved 38b			
9	501(c)(7) organizations Enter.			
	Initiation fees and capital contributions included on line 9 39a			
	Gross receipts, included on line 9, for public use of club facilities 39b			
40 a	501(c)(3) organizations Enter amount of tax imposed on the organization during the year under			
	section 4911 ► ; section 4912 ► , section 4955 ►			-
	501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' complete Schedule L, Part I	40 b		
(Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
C	Enter amount of tax on line 40c reimbursed by the organization			
€	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T			
	shelter transaction? If 'Yes,' complete Form 8886-T List the states with which a copy of this return is filed Connecticut	40 e	<u> </u>	X
	The books are in care of ► BILL BONNEY Located at ► 10 MASON DR NEW BRITAIN CT ZIP + 4 ► 06052 At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If 'Yes,' enter the name of the foreign country. ►	930 42b	-70 Yes	No.
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of a Foreign Bank and Financial Accounts. At any time during the calendar year, did the organization maintain an office outside of the U S.?	42 c		X
c	If 'Yes,' enter the name of the foreign country			
	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year		► []	
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year		Yes	No
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	44		No X
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead			

Only

BAA

BRITAIN

May the IRS discuss this return with the preparer shown above? See instructions

(860)

Phone no

229-7479

Form 990-EZ (2008)

No

►X Yes

Section 501(c)(3) organizations only. All section 501(c)(3) organizations must answer questions 46-49 and complete the tables for lines 50 and 51. Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I Yes No 46 46 Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II 47 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E 48 49 a Did the organization make any transfers to an exempt non-charitable related organization? 49 a b If 'Yes,' was the related organization(s) a section 527 organization? 49Ь Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each 50 received more than \$100,000 of compensation from the organization. If there is none, enter 'None (b) Title and average hours per week devoted to position (d) Contributions to employee benefit plans and deferred compensation (e) Expense account and other allowances (a) Name and address of each employee paid more than \$100,000 \blacktriangleright Total number of other employees paid over \$100,000 Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization If there is none, enter 'None (a) Name and address of each independent contractor paid more than \$100,000 (b) Type of service (c) Compensation Total number of other independent contractors receiving over \$100,000 penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is drech and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Here Type or print name and title Preparer's Identifying Number (See instructions) Date Check if Preparer's signature Paid 02/01/10 P00106988 employed Pre-Firm's name (or yours if self-employed), FRANK D. MARROCCO, parer's 06 - 1261120 Use 142 WEST MAIN STREET

CT

06052

Form 990-EZ, Part I, Line 16 Other Expenses Statement	
Other expenses (describe)	
SUPPLIES	4,870.
DONATIONS	10,050.
DUES & ASSESSMENTS	8,145.
CONFERENCES & MEETINGS	6,651.
DONATIONS	
DUES & ASSESSMENTS	
Total	29,716.

Form 990-EZ, Page 1, Part I, Line 20

Other Changes in Net Assets or Fund Balances

Description	Amount
INCREASE IN MARKET VALUE OF SECURITIES TRANSFERS TO MASONIC TEMPLE CORPORATION	97,153. -35,000.
Total	62,153.

Supporting Statement of:

Form 990-EZ/Line 5a

Description	Amount
1290.047 SH FIDELITY NORDIC	23,040.
794.552 SH BARON PARTNERS FUND	7,000.
262.398 SH BARON ASSET FUND	10,000.
2457.283 SH AMANA MUTUAL FUND TRUST GROWTH	48,802.
Total	88,842.

Supporting Statement of:

Form 990-EZ/Line 5b

Description	Amount
1290.047 SH FIDELITY NORDIC	38,590.
794.552 SH BARON PARTNERS FUND	10,854.
262.398 SH BARON ASSET FUND	10,840.
2457.283 SH AMANA MUTUAL FUND TRUST GROWTH	41,373.
Total	101,657.