Form **990-EZ**

Department of the Treasury
Internal Revenue Service

Short Form
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

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

OMB No 1545-1150

2008

Open to Public Inspection

A For the 2008 calendar year, or tax year beginning December 1 **, 2008, and ending** November 30 **, 20** 09

B Check if applicable
- [ ] Address change
- [ ] Name change
- [ ] Initial return
- [ ] Termination
- [ ] Amended return
- [ ] Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization
Ancient Free & Accepted Masons of Maine, Triangle #1

Number and street (or P O. box, if mail is not delivered to street address) | Room/suite
415 Congress Street

City or town, state or country, and ZIP + 4
Portland, Maine 04101

D Employer identification number 23 7530978

E Telephone number ( )

F Group Exemption Number ▶ 0275

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

G Accounting method: [ ] Cash [x] Accrual Other (specify) ▶

H Check ▶ [ ] if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

I Website: ▶ www.bluelodges.com/lodges/me/triangle

J Organization type (check only one)— [x] 501(c) (10) ◀(insert no) [ ] 4947(a)(1) or [ ] 527

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

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if $1,000,000 or more, file Form 990 instead of Form 990-EZ ▶ $ **$106,963**

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

Revenue	1	Contributions, gifts, grants, and similar amounts received		1	$7,394
	2	Program service revenue including government fees and contracts		2	
	3	Membership dues and assessments		3	$2,978
	4	Investment income		4	$19,812
	5a	Gross amount from sale of assets other than inventory	5a $75,612		
	b	Less: cost or other basis and sales expenses	5b $58,557		
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach schedule)		5c	$17,055
	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here ▶ [ ]			
	a	Gross revenue (not including $ 7,394 of contributions reported on line 1)	6a $870		
	b	Less: direct expenses other than fundraising expenses	6b $2,617		
	c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)		6c	($1,747)
	7a	Gross sales of inventory, less returns and allowances	7a		
	b	Less: cost of goods sold	7b		
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)		7c	
	8	Other revenue (describe ▶ Miscellaneous. Please see attached.)		8	$297
	9	**Total revenue.** Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 ▶		9	$45,789
Expenses	10	Grants and similar amounts paid (attach schedule)		10	$10,871
	11	Benefits paid to or for members		11	
	12	Salaries, other compensation, and employee benefits		12	$2,835
	13	Professional fees and other payments to independent contractors		13	$3,200
	14	Occupancy, rent, utilities, and maintenance		14	$11,111
	15	Printing, publications, postage, and shipping		15	$843
	16	Other expenses (describe ▶ Fed/State Taxes, Supplies, etc. Please see attached.)		16	$5,366
	17	**Total expenses.** Add lines 10 through 16 ▶		17	$34,226
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)		18	$11,563
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)		19	$511,548
	20	Other changes in net assets or fund balances (attach explanation)		20	$38,983
	21	Net assets or fund balances at end of year. Combine lines 18 through 20 ▶		21	$562,094

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Part II Balance Sheets. If Total assets on line 25, column (B) are $2,500,000 or more, file Form 990 instead of Form 990-EZ.

	(See the instructions for Part II.)	(A) Beginning of year		(B) End of year
22	Cash, savings, and investments	$511,548	22	$562,094
23	Land and buildings		23	
24	Other assets (describe ▶)		24	
25	**Total assets**	$511,548	25	$562,094
26	**Total liabilities** (describe ▶)		26	
27	**Net assets or fund balances** (line 27 of column (B) **must** agree with line 21)	$511,548	27	$562,094

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

What is the organization's primary exempt purpose? Fraternal charitable organization.

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.

Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, optional for others.)

28	Grants and allocations for the benefit of local community and society as a whole.		
	(Grants $) If this amount includes foreign grants, check here ▶ ☐	28a	
29			
	(Grants $) If this amount includes foreign grants, check here ▶ ☐	29a	
30			
	(Grants $) If this amount includes foreign grants, check here ▶ ☐	30a	
31	Other program services (attach schedule) (Grants $) If this amount includes foreign grants, check here ▶ ☐	31a	
32	**Total program service expenses** (add lines 28a through 31a) ▶	32	

Part IV **List of Officers, Directors, Trustees, and Key Employees.** List each one even if not compensated (See the instructions for Part IV.)

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-.)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Robert D. Lind 88 Read Street, Portland, ME 04103	Master	-0-		
Harold A. Clough 5 Ottawa Woods Rd., Scarborough, ME 04074	Senior Warden	-0-		
Shawn F. Losier 75 Tide Mill Rd. Portland, ME 04102	Junior Warden	-0-		
Michael C. Whyte 7 Deerfield Circle, Standish, ME 04084	Secretary	$1,200/yr		
Marlon E. Welch 248 Intervale Rd., New Gloucester, ME 04260	Treasurer	$1,200/yr		
Christopher M. Fraser 341 Goose Rocks Rd, Kennebunkport, ME 04046	Senior Deacon	-0-		
Kenneth E. Myrick 10 Harborview Ave., South Portland, ME 04106	Junior Deacon	-0-		
Justin Liudvinaitis 19 East Ave., Lisbon Falls, ME 04252	Senior Steward	-0-		
William A. Noone 146 Highland Ave., South Portland, ME 04106	Junior Steward	-0-		
Luis O. Garcia 1 Walker St., Portland, ME 04102	Chaplain	-0-		
Ryan T. Coleman 10 Goodale Ave., Saco, ME 04072	Marshal	-0-		
John E. Watson 20 Liza Harmon Dr., Westbrook, ME 04092	Tyler	$435/yr		

Part V **Other Information** (Note the statement requirements in the instructions for Part VI.)

			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		✓
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		✓
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.			
a	Did the organization have unrelated business gross income of $1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?	35a		✓
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	35b		
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N	36		✓
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a -0-			
b	Did the organization file **Form 1120-POL** for this year?	37b		
38a	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?	38a		✓
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b			
39	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on line 9 39a			
b	Gross receipts, included on line 9, for public use of club facilities 39b			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶			
b	Section 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	40b		
c	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶			
d	Enter amount of tax on line 40c reimbursed by the organization ▶			
e	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.	40e		✓

41 List the states with which a copy of this return is filed. ▶

42a The books are in care of ▶ Marlon E. Welch Telephone no. ▶ (207) 926-5885
Located at ▶ 248 Intervale Rd., New Gloucester, Maine ZIP + 4 ▶ 04260

			Yes	No
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		✓
	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.**			
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c		✓
	If "Yes," enter the name of the foreign country: ▶			

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 ▶ 43

			Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44		✓
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45		✓

Part VI **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.

		Yes	No
46 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	46		
47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	47		
48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48		
49a Did the organization make any transfers to an exempt non-charitable related organization?	49a		
b If "Yes," was the related organization(s) a section 527 organization?	49b		

50 Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than $100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each employee paid more than $100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Total number of other employees paid over $100,000 ▶				

51 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 each receiving over $100,000 ▶		

Sign Here

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

▶ Signature of officer — Date 7/12/10

▶ Marlon E. Welch, Treasurer
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶	Date	Check if self-employed ▶ ☐	Preparer's Identifying Number (See instructions)
Firm's name (or yours if self-employed), address, and ZIP + 4 ▶		EIN ▶	
		Phone no ▶ ( )	

May the IRS discuss this return with the preparer shown above? See instructions ▶ ☐ Yes ☐ No

Part I, Lines 5a-c Gross amount from sales of assets other than inventory

Net gain from sale of securities.

	Proceeds	Tax Cost	Gain/Loss
12/19/08—Sold 200 Shares Exxon Mobil Corp	$16,182	($456)	$15,726
12/19/08—Sold 30 Shares Travelcenters of Am. LLC	$42	($970)	($928)
12/19/08—Sold 200 Shares Washington Mutual Inc.	$7	($8,887)	($8,880)
01/27/09—Sold 73 Shares Wells Fargo & Co.	$18	($193)	($175)
04/28/09—Sold 332 Shares Bank of America Corp.	$2,851	($299)	$2,552
04/28/09—Sold 449 Shares Citigroup Inc.	$1,424	($6,347)	($4,923)
06/10/09—Sold .5254 Shares Harris Stratex Networks Inc.	$3.38	($2 81)	$.57
06/10/09—Matured 20,000 Units Marsh & McLennan Co. DTD 7.125%	$20,000	($19,986)	$14
09/30/09—Matured 10,000 Units Coca Cola Enterprises Inc. DTD 7.125%	$10,000	($9,972)	$28
10/22/09—Sold 300 Shares Wyeth	$15,076	($1,422)	$13,654
10/28/09—Sold 5 Shares Pfizer. Inc.	$8 69	($8.76)	($0 07)
11/16/09—Redeemed 10,000 Units Caterpillar Fin Serv. Corp.	$10,000	($10,013)	($13)
		Net Gain/Loss	$17,055

5a.	Gross amount of sales	$75,612 (gross proceeds)
5b.	Less: cost or other basis and sales expenses	$58,557 (tax cost)
5c.	Gain or (Loss)	$17,055

Part I, Lines 6a-c Special Events and Activities

Proceeds of membership dinners held throughout year.

6a. Gross revenue	$870
6b. Less: direct expenses	$2,408 dinners for membership $209 widow's luncheon
6c. Net (loss)	($1,747)

Part I, Line 8 Other Revenue

Payment from co-sponsor of open house:	$270
Credit from US Postal Service	$27
Total:	$297

Part I, Line 10 Grants and allocations

Charitable grants and allocations made during tax period.

Ronald McDonald House, Portland, ME:	$500
Habitat for Humanity of Greater Portland, ME:	$500
Pine Tree Council, Boy Scouts of America:	$500
The Bruce Roberts Toy Fund:	$500
Opportunity Farm for Boys & Girls	$500
Scottish Rite, Valley of Portland Learning Center Operations Fund:	$5000
Maine DeMolay Association for Boys:	$75
Gosnell Memorial Hospice House	$50
Scottish Rite, Valley of Portland Golf Scramble to Benefit Learning Center:	$1000
Grand Assembly, Rainbow Girls of Maine:	$24
Breggy Oil Co. (for widow)	$968
Lampron Energy (for widow)	$754
R. Coleman (relief—sec deposit)	$500
Total:	$10,871

Part I, Line 16 Other Expenses

Grand Lodge of Maine, AF & AM (dues/assessments):	$2,326
Supplies (bibles, aprons, booklets, clothing, etc.)	$968
Federal & State Taxes	$707
Projector, A/V Equipment	$700
Open House Expenses (advertising, refreshments).	$665
Total:	$5,366

Part I, Line 20 Other Changes in Net Assets or Fund Balances

Unrealized losses/gains in investment portfolio carried at Fair Market Value, due to market conditions over tax period, not including gains/principal applied to investment management fees.

Net Loss/Gain of Value of Investment Assets $38,983