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Short Form Return of Organization Exempt From Income Tax

OMB No 1545-1150

Department of the Treasury
Internal Revenue Service

2008

Open to Public
InspectionUnder 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 requirementsA For the 2008 calendar year, or tax year beginning **DEC 1, 2008** and ending **NOV 30, 2009**

<input type="checkbox"/> Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termin- ation <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization Ancient Free & Accepted Masons of Colo 1 Golden City	D Employer identification number 84-0005938		
	Number and street (or P.O. box, if mail is not delivered to street address) 127 Burgess Ave	Room/Suite	E Telephone number (303)278-7362	
	City or town, state or country, and ZIP + 4 Golden, CO 80401-4816	F Group Exemption Number ► 0341		
	• 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: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual Other (specify) ►
	I Website: ► N/A			H Check ► <input checked="" type="checkbox"/> if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)
	J Organization type (check only one) — <input checked="" type="checkbox"/> 501(c)(8) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			K Check ► <input type="checkbox"/> 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 ► **\$ 220,727.****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	2,744.	
	2 Program service revenue including government fees and contracts	2		
3 Membership dues and assessments	3	10,579.		
4 Investment income	4	2,741.		
5a Gross amount from sale of assets other than inventory	Stmt 3	5a	193,267.	
b Less: cost or other basis and sales expenses		5b	261,491.	
c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach schedule)		5c	<68,224. >	
6 Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here ► <input type="checkbox"/>				
a Gross revenue (not including \$ _____ of contributions reported on line 1)		6a		
b Less: direct expenses other than fundraising expenses		6b		
c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)		6c		
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 ► See Statement 2.)		8	11,396.	
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8		9	<40,764. >	
Expenses	10 Grants and similar amounts paid (attach schedule)	Stmt 4	10	2,030.
	11 Benefits paid to or for members		11	13,524.
	12 Salaries, other compensation, and employee benefits		12	2,250.
	13 Professional fees and other payments to independent contractors		13	500.
	14 Occupancy, rent, utilities, and maintenance		14	6,850.
	15 Printing, publications, postage, and shipping		15	1,688.
16 Other expenses (describe ► See Statement 1.)		16	9,287.	
17 Total expenses Add lines 10 through 16		17	36,129.	
Net Assets	18 Excess or (deficit) for the year (Subtract line 17 from line 9)		18	<76,893. >
	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	300,413.
	20 Other changes in net assets or fund balances (attach explanation)		20	
	21 Net assets or fund balances at end of year. Combine lines 18 through 20		21	223,520.
	MAR 31 2010			

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	776.22	15,201.
23 Land and buildings		23
24 Other assets (describe ► Equity Investments (at cost))	299,637.24	210,319.
25 Total assets	300,413.25	225,520.
26 Total liabilities (describe ► Payable - Officer)	0.26	2,000.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	300,413.27	223,520.

Ancient Free & Accepted Masons of Colo
1 Golden City

Form 990-EZ (2008)

1 Golden City

84-0005938

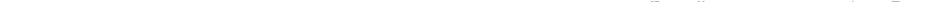
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Part III Statement of Program Service Accomplishments (See the instructions for Part III.)

What is the organization's primary exempt purpose? See Statement 6

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
quired for 501(c)(3)
(4) organizations and
7(a)(1) trusts; optional
others.)

28 

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(Grants \$) If this amount includes foreign grants, check here

29

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(Grants \$) If this amount includes foreign grants, check here

30

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(Grants \$) If this amount includes foreign grants, check here

31 Other program services (attach schedule)

(Grants \$) If this amount includes foreign grants, check here

Part IV. List of Officers, Directors, Trustees, and Key Employees

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

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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	X
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.		
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	X
b If "Yes," has it filed a tax return on Form 990-T for this year?	35b	N/A
36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Sch. N	36	X
37 a Enter amount of political expenditures, direct or indirect, as described in the instructions. ► 37a 0.	37b	X
b Did the organization file Form 1120-POL for this year?	38a	X
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?	38b	2,000.
b If "Yes," complete Schedule L, Part II and enter the total amount involved	39a	N/A
39 Section 501(c)(7) organizations. Enter:	39b	N/A
a Initiation fees and capital contributions included on line 9		
b Gross receipts, included on line 9, for public use of club facilities		
40 a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:		
section 4911 ► N/A ; section 4912 ► N/A ; section 4955 ► N/A	40b	N/A
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		
c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	► 0.	
d Enter amount of tax on line 40c reimbursed by the organization	► 0.	
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		
41 List the states with which a copy of this return is filed. ► None		
42 a The books are in care of ► The Organization Located at ► 127 Burgess Ave, Golden, CO	Telephone no. ► (303) 278-7362	
	ZIP + 4 ► 80401-4816	
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)?		
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	X
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	N/A
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44	X
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	X

Form 990-EZ (2008)

Name of the organization Ancient Free & Accepted Masons of Colo
1 Golden City

Employer identification number
84-0005938

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only)

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958

▶ \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

▶ \$

Part II Loans to and/or From Interested Persons.

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

Total

Part III Grants or Assistance Benefiting Interested Persons.

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 27

Part IV | Business Transactions Involving Interested Persons.

To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 28a, 28b, or 28c

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No

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84-0005938

Form 990-EZ	Other Expenses	Statement 1
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Description	Amount
Meetings	950.
Supplies & equipment	5,288.
Miscellaneous	347.
Public relations	1,650.
Brokerage fees	1,052.
Total to Form 990-EZ, line 16	9,287.

Form 990-EZ	Other Revenue	Statement 2
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Description	Amount
Settlement	11,075.
Refunds	81.
Miscellaneous	240.
Total to Form 990-EZ, line 8	11,396.

Form 990-EZ	Gain (Loss) From Publicly Traded Securities			Statement	3
Description	Gross Sales Price	Cost or Other Basis	Expense of Sale	Net Gain or (Loss)	
AIM Equity	15,581.	24,432.	0.	<8,851. >	
Amcap	10,096.	14,822.	0.	<4,726. >	
Investment Co of America	20,619.	31,160.	0.	<10,541. >	
Thornburg Inv - Int'l	42,235.	58,215.	0.	<15,980. >	
Thornburg Inv - Core	32,534.	46,034.	0.	<13,500. >	
Columbia Marsico	1,978.	2,882.	0.	<904. >	
Fidelity Advisor	2,227.	3,455.	0.	<1,228. >	
Pioneer Cullen	2,865.	3,940.	0.	<1,075. >	
Quantitative Emerging	2,161.	2,671.	0.	<510. >	
Janus Overseas	6,736.	9,211.	0.	<2,475. >	
Aberdeen Small Cap	1,968.	3,723.	0.	<1,755. >	
Kinetics Paradigm	2,593.	4,062.	0.	<1,469. >	
DWS Japan Equity	1,497.	3,139.	0.	<1,642. >	
Old Mutual Clay	2,819.	3,599.	0.	<780. >	
Old Mutual Analytic	1,974.	3,285.	0.	<1,311. >	
Loomis Sayles	14,671.	16,144.	0.	<1,473. >	
AmFunds MMF	29,902.	30,717.	0.	<815. >	
Capital gain dividends	811.	0.	0.	811.	
To Form 990-EZ, line 5	193,267.	261,491.	0.	<68,224. >	

Form 990-EZ

Noncash Grants and Allocations

Statement 4

Class of Activity

Benevolence

Donee's Name

Donee's Address

Various entities

Relationship of Donee

Description of Property

Date of Gift

None

Cash

Method Used to Determine Book Value

Method Used to Determine Fair Market Value

Book Value

Amount Given

2,030.

2,030.

Total included on Form 990-EZ, line 10

2,030.

FORM 990-EZ

Information Regarding Transfers
Associated with Personal Benefit Contracts

Statement 5

A) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? [] Yes [X] No

B) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . [] Yes [X] No

The Organization is a fraternal lodge, devoted to relief, education, benevolent and charitable purposes.