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Form 990-EZ

Department of the Treasury
Internal Revenue ServiceShort 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 \$500,000 and total assets less than \$1,250,000 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

2009

Open to Public
Inspection

A For the 2009 calendar year, or tax year beginning _____, and ending _____

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.

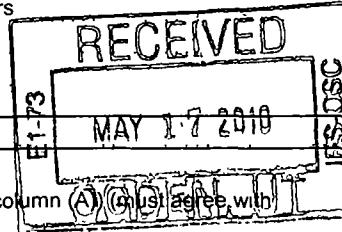
C Name of organization
**MERIDIAN LODGE #125
MERIDIAN LODGE #125**Number and street (or P O box, if mail is not delivered to street address)
29 SQUARE RDCity or town, state or country, and ZIP + 4
PALMYRA ME 04965D Employer identification number
23-7530935E Telephone number
207-487-5674F Group Exemption Number
►

- 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 Accrual
Other (specify) ►I Website: ► **N/A**J Tax-exempt status (check only one) — 501(c) (3) (insert no.) 4947(a)(1) or 527H Check ► if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)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 Form 990-EZ or Form 990 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 \$500,000 or more, file Form 990 instead of Form 990-EZ ► \$ **112,512**

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	620
	2 Program service revenue including government fees and contracts	2	
	3 Membership dues and assessments	3	1,993
	4 Investment income	4	12,846
	5a Gross amount from sale of assets other than inventory	5a	91,725
	b Less cost or other basis and sales expenses	5b	93,814
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)		
	6 Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here ► <input type="checkbox"/>		SEE STMT 2
	a Gross revenue (not including \$ _____ of contributions reported on line 1)	6a	
Expenses	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 4)	8	5,328
	9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	18,698
	10 Grants and similar amounts paid (attach schedule)	10	
	11 Benefits paid to or for members	11	
Net Assets	12 Salaries, other compensation, and employee benefits	12	500
	13 Professional fees and other payments to independent contractors	13	9,040
	14 Occupancy, rent, utilities, and maintenance	14	3,300
	15 Printing, publications, postage, and shipping	15	
	16 Other expenses (describe ► SEE STATEMENT 5)	16	21,691
	17 Total expenses. Add lines 10 through 16	17	34,531
	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-15,833
	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	577,359
	20 Other changes in net assets or fund balances (attach explanation)	20	78,528
	21 Net assets or fund balances at end of year. Combine lines 18 through 20	21	640,054



SEE STATEMENT 6

Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 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	11,274	22 13,188
23 Land and buildings		23
24 Other assets (describe ► SEE STATEMENT 7)	566,085	24 626,866
25 Total assets	577,359	25 640,054
26 Total liabilities (describe ► SEE STATEMENT 8)	0	26 0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	577,359	27 640,054

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

Part V Other Information (Note the statement requirements in the instructions for Part 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	X
34 Were any changes made to the organizing or governing documents? 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 why the organization did not report the income on Form 990-T		
a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to 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	
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36	X
37a Enter amount of political expenditures, direct or indirect, as described in the instr	37a	
b Did the organization file Form 1120-POL for this year?	37b	X
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 outstanding at the end of the period covered by this return?	38a	X
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	
39 Section 501(c)(7) organizations Enter:	39a	
a Initiation fees and capital contributions included on line 9	39b	
b Gross receipts, included on line 9, for public use of club facilities		
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 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	X
c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		
d Section 501(c)(3) and 501(c)(4) organizations 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		
41 List the states with which a copy of this return is filed. ► NONE	40e	X
42a The organization's books are in care of ► WILLIAM BERRY	Telephone no	207-487-6624
29 SQUARE RD		
Located at ► PALMYRA, ME	ZIP + 4	04965
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	X
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	
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

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

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 Yes No 46 X

47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II 47 X

48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 48 X

49a Did the organization make any transfers to an exempt non-charitable related organization? 49a X

b If "Yes," was the related organization a section 527 organization? 49b X

50 Complete this table for the organization's 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" None

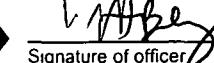
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				

f Total number of other employees paid over \$100,000 ► _____

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None" None

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		

d 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  WILLIAM BERRY Type or print name and title		
	Date 1 5-13-10	Preparer's Identifying Number (See instr) P00120474	
Paid Preparer's Use Only	Preparer's signature LOUISE ALLEN	Date 05/10/10	Check if self-employed <input type="checkbox"/>
	Firm's name (or yours if self-employed), address, and ZIP + 4 TAX-PRO INC 438 SOMERSET AVE PITTSFIELD, ME 04967-1314	EIN 01-0450701	Phone no 207-487-5006

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

► Yes No

Form 990-EZ (2009)

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2009

Open to Public
InspectionDepartment of the Treasury
Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

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

Name of the organization **MERIDIAN LODGE #125**
MERIDIAN LODGE #125Employer identification number
23-7530935**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box)

1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E)
 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:
 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
 9 An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h
 a Type I b Type II c Type III—Functionally integrated d Type III—Other
 e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**
 f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
 g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 (ii) A family member of a person described in (i) above?
 (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(i)	X	
11g(ii)	X	
11g(iii)	X	

h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
				X		X		X	
				X		X		X	
				X		X		X	
				X		X		X	
				X		X		X	
Total									

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

Schedule A (Form 990 or 990-EZ) 2009 **MERIDIAN LODGE #125****23-7530935**

Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I.)**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►

	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►

	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc (see instructions)						12
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						► <input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	%
16a 33 1/3 % support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization	►	<input type="checkbox"/>
b 33 1/3 % support test—2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization	►	<input type="checkbox"/>
17a 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization	►	<input type="checkbox"/>
b 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization	►	<input type="checkbox"/>
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	►	<input type="checkbox"/>

Part III Support Schedule for Organizations Described in Section 509(a)(2)
 (Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►

1 Gifts, grants, contributions, and membership fees received (Do not include 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 business under section 513

4 Tax revenues levied for the organization'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 through 5

7a 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 \$5,000 or 1% of the amount on line 13 for the year

c Add lines 7a and 7b

8 **Public support** (Subtract line 7c from line 6)

	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1						
2						
3						
4						
5						
6						
7a						
b						
c						
8						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►

9 Amounts from line 6

10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources

b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975

c Add lines 10a and 10b

11 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 for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ►

	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9						
10a						
b						
c						
11						
12						
13						
14						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))

16 Public support percentage from 2008 Schedule A, Part III, line 15

15	%
16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))

18 Investment income percentage from 2008 Schedule A, Part III, line 17

17	%
18	%

19a **33 1/3 % support tests—2009.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization ►

b **33 1/3 % support tests—2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization ►

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ►

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

PART I, LINE 11H - LIST OF SUPPORTED ORGANIZATIONS CONTINUED

NAME AND EIN	TYPE	IN GOV DOC	ORG NOTIFIED	ORG IN U.S.	AMOUNT
--------------	------	------------	--------------	-------------	--------

				\$	0
--	--	--	--	----	---

				\$	0
--	--	--	--	----	---

				\$	0
--	--	--	--	----	---

5773 MERIDIAN LODGE #125
23-7530935
FYE: 12/31/2009

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Federal Statements

Statement 1 - Form 990-EZ, Part I, Line 3 - Membership Dues and Assessments

Description	Amount
DUES	\$ 1,993
TOTAL	\$ 1,993

5773 MERIDIAN LODGE #125
23-7530935
FYE: 12/31/2009

Federal Statements

5/10/2010 1:20 PM

Statement 2 - Form 990-EZ, Part I, Line 5c - Sale of Assets Other than Inventory - Securities

How Received	Description	Whom Sold	Date Acquired	Date Sold	Sale Price	Cost & Expense	Depreciation	Gain / Loss
157	SH 1YR FIXED INCOME PORT FD DONATION		11/15/05	1/23/10	\$ 1,618	\$ 1,593		\$ 25
187	SH 1 YR FIXED INCOME PORT FD DONATION		11/15/05	8/07/09	1,929	1,897		32
2284	SH 1 YR FIXED INCOME PORT FUND DONATION		11/15/05	12/18/09	23,578	23,121		457
158	SH 2 YR GLOBAL FIXED INCOME PORT DONATION		11/15/05	1/23/09	1,619	1,565		54
188	SH 2 YR GLOBAL FIXED INCOME PORT DONATION		11/15/05	8/07/09	1,929	1,860		69
1166	SH 2 YR GLOBAL FIXED INCOME POR DONATION		11/15/05	12/18/09	11,860	11,499		361
147	SH 5 YR GLOBAL FIXED INCOME FD DONATION		11/15/05	1/23/09	1,614	1,539		75
175	SH 5 YEAR GLOBAL FIXED INCOME FU DONATION		11/15/05	8/07/09	1,942	1,835		107
1242	SH 5 YR GLOBAL FIXED INCOME FUN DONATION		11/15/05	12/18/09	13,852	12,982		870
154	SH 5 YR GOVT PORT FUND DONATION		11/15/05	1/23/09	1,676	1,599		77
183	SH 5 YR GOVT PORT FUND DONATION		11/15/05	8/07/09	1,976	1,906		70
1360	SH 5 YR GOVT PORT FUND DONATION		11/15/05	12/18/09	14,704	14,106		598
4	SH EMERGING MKTS PORT FUND DONATION		11/15/05	1/23/09	125	162		-37
9	SH EMERGING MKTS PORT FUND DONATION		11/15/05	8/07/09	239	191		48
16	SH EMERGING MKTS SMALL CAP PORT F DONATION		11/15/05	1/23/09	154	218		-64
19	SH EMERGING MKTS SMALL CAP PORT DONATION		11/15/05	8/07/09	326	257		69
7	SH EMERGING MKTS VALUE FUND DONATION		11/15/05	1/23/09	113	163		-50

5773 MERIDIAN LODGE #125
23-7530935
FYE: 12/31/2009

Federal Statements

5/10/2010 1:20 PM

Statement 2 - Form 990-EZ, Part I, Line 5c - Sale of Assets Other than Inventory - Securities (continued)

How Received	Description	Whom Sold	Date Acquired	Date Sold	Sale Price	Cost & Expense	Depreciation	Gain / Loss	
								\$	\$
8 SH EMERGING MKTS VALUE FD DONATION			11/15/05	8/07/09	\$ 241	\$ 192			49
24 SH INTL SMALL CAP VALUE FD DONATION			11/15/05	1/23/09	241	417			-176
28 SH INTL SMALL CAP VALUE FD DONATION			11/15/05	8/07/09	401	491			-90
25 SH INTL SMALL COMPANY FD DONATION			11/15/05	1/23/09	239	405			166
30 SH INTL SMALL COMPANY FD DONATION			11/15/05	8/07/09	395	481			-86
42 SH INTL VALUE FUND DONATION			11/15/05	1/23/09	441	735			-294
49 SH INTL VALUE FUND DONATION			11/15/05	8/07/09	790	867			-77
37 SH REAL ESTATE SEC FUND DONATION			11/15/05	1/23/09	445	932			-487
43 SH REAL ESTATE SEC FUND DONATION			11/15/05	8/07/09	680	1,091			-411
80 SH US LARGE CAP VALUE FUND DONATION			11/15/05	1/23/09	955	1,724			-769
94 SH US LARGE CAP VALUE FD DONATION			11/15/05	8/07/09	1,486	2,040			-554
44 SH US LARGE COMPANY FUND DONATION			11/15/05	1/23/09	1,079	1,592			-513
52 SH US LARGE COMPANY FUND DONATION			11/15/05	8/07/09	1,555	1,883			-328
64 SH US MICROCAP FUND DONATION			11/15/05	1/23/09	472	996			-524
74 SH US MICROCAP FUND DONATION			11/15/05	8/07/09	721	1,143			-422
38 SH US SMALL CAP VALUE FD DONATION			11/15/05	1/23/09	497	1,085			-588
44 SH US SMALL CAP VALUE FD DONATION			11/15/05	8/07/09	797	1,247			-450

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Statement 2 - Form 990-EZ, Part I, Line 5c - Sale of Assets Other than Inventory - Securities (continued)

How Received	Whom Sold	Date Acquired	Date Sold	Sale Price	Cost & Expense	Depreciation	Gain / Loss
TOTAL				\$ 90,689	\$ 93,814	\$ 0	\$ -3,125

Statement 3 - Form 990-EZ, Part I, Line 5c - Sale of Assets Other than Inventory - Other

How Received	Whom Sold	Date Acquired	Date Sold	Sale Price	Cost & Expense	Depreciation	Gain / Loss
SYMETRY				\$ 1,036	\$ 1,036	\$ 0	\$ 1,036
TOTAL				\$ 1,036	\$ 1,036	\$ 0	\$ 1,036

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Statement 4 - Form 990-EZ, Part I, Line 8 - Other Revenue

Description	Amount
PROGRAM INC-SQUARE DANCE	\$ 2,749
MISC INC-REBATES, RETURNS ETC	2,579
TOTAL	\$ 5,328

Statement 5 - Form 990-EZ, Part I, Line 16 - Other Expenses

Description	Amount
EXPENSES	
POSTAGE	144
MEETINGS EXPENSE	444
BANK FEES	30
MISC	3,226
SCHOLARSHIPS/DONATIONS	17,823
SUPPLIES	24
TOTAL	\$ 21,691

Statement 6 - Form 990-EZ, Part I, Line 20 - Other Changes in Net Assets or Fund Balances

Description	Amount
UNREALIZED CAPITAL GAINS	\$ 78,528
UNREALIZED CAP LOSSES	
TOTAL	\$ 78,528

Statement 7 - Form 990-EZ, Part II, Line 24 - Other Assets

Description	Beginning of Year	End of Year
SYMETRY ROUNDING	\$ 566,083 2 566,085	\$ 626,866 626,866

Statement 8 - Form 990-EZ, Part II, Line 26 - Total Liabilities

Description	Beginning of Year	End of Year
ROUNDING	\$ _____	\$ _____

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Statement 9 - Form 990-EZ, Part III - Organization's Primary Exempt Purpose

Description

HOLDS COMMUNITY EVENTS FOR LOCAL TOWNS; PRODIVDES
SCHOLARSHIPS AND FUNDIMG FOR COMMUNITY ORGANIZATIONS.

Statement 10 - Form 990-EZ, Part III, Line 31 - Statement of Program Service Accomplishments

Description

HOLDS COMMUNITY EVENTS FOR LOCAL TOWNS:PRIVEDES
SCHIOLARSHIPS AND FUNDING FOR CONNNUNITY ORGANIZATIONS