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## **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 **2009** 

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► The organization may have to use a copy of this return to satisfy state reporting requirements

	For th	ne 2009 calen	dar year, o	or tax y	year begin	ning		, 2009	, and end	ing			,		
В	Check	if applicable	<u> </u>		me of organiz	ation					D Er	nployer Id	lentification N	lumber	
	Ac	dress change	Please use IRS label		T ARABIC C	RDER OF THE N	OBLES OF THE M	YSTIC SHR	INE-ACCA T	EMPLE GROU	JP 5	1-015	54748		
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	∐] Ap	pplication pending			ess of principa					H(a) is th H(b) Are				X Yes	₩ No
		·				ox 9217	Richmond		A 23227				: instructions)	Yes	X No
<u>L</u>	Tax	-exempt statu	ıs X 501	(c) (	<u>10</u> )◀	(insert no )	4947(a	)(1) or	527	Se	е Н(с	c) St	mt		
J	Wel	bsite: ► AC	CASHRI	NERS	COM_					H(c) Grou	p exempt	on numbe	r ► 02	29	
<u>K</u>		of organization	X Corpora	ation	Trust	Association	Other ►	L	Year of Form	nation 18	36	M State	of legal domi	cile VA	
Pa	ırt I	Summ	ary												
	1	Briefly descri	be the org	janızatı	ion's missi	on or most si	gnificant activi	ties P	hilant	hropic	Frat	terni	ty		
Φ														<b>_</b>	
JE C	Ì														
Activities & Governance															
ŏ	2	Check this bo	ox ► 🗍	if the c	organizatio	n discontinue	d its operation	s or dispo	osed of mo	ore than 2	5% of it	ls asset	S.		
<u>ن</u>	3	Number of vo	oting mem	bers of	the gover	ning body (Pa	art VI, line 1a)					3	1 7		
9	4	Number of in	dependen	t votinç	g members	of the govern	ning body (Par	t VI, line	1b)			4	0		
ję.	5	Total number	of employ	yees (F	Part V, line	e 2a)						5			
ਂ	6	Total number	of volunte	eers (e	stimate if	necessary)						6	<del>  - / :</del>	)	
⋖	7 a	Total gross u	nrelated b	usines	s revenue	from Part VII	I, Icolumn (C),	ıne 12				7	'a		
	b	Net unrelated	t business	taxabl	e income	from Form 99	0-T, line 34			<del></del>		7	'Ь		
											Prior Y	ear	Cu	rrent Ye	ar
_	8	Contributions	and gran	ts (Par	t VIII, line	1h)					13	6,712		119,	760.
ž		Program serv													
Revenue		Investment in		-			and 7d)					838			
æ								1e)				·	*****		
	12	Total revenue	e – add Iir	nes 8 tl	hrough 1	must equal f	ર્જૂન, Doc, and 1 Part VIII, 160 પાત	n (A), lır	ne 12)		13	7,550		119,	760.
	13	Grants and s	ımılar amo	ounts p	aid (Part I	X. column (A	), lines 1 35								
	14	Benefits paid	to or for a	membe	rs (Bart I)	didlum &	2010								
	15	Salaries other	er comper	reation	employee	honofits (Pa	rt IX, column (	'Δ\ linac	5-10)			0	<del>-  </del>		0.
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Expenses	b	Total fundrais	sing exper	ises (P	artux, col	umn-(D); line	25)			_					
ш	17	Other expens	ses (Part I	X, colu	ımn (A), lır	nes 11a-11d,	11f-24f)				13	5,644		109,	960.
	18	Total expense	es Add lir	nes 13.	17 (must e	equal Part IX,	column (A), li	ne 25)			13	5,644		109,	960.
	19	Revenue less	expenses	s Subt	ract line 1	8 from line 12	?					1,906			800.
8 8										Bor		of Year		nd of Yea	
	ı	Total assets	(Part Y lu	na 16)						Dei		6,297			097.
<b>8</b> 8	1	Total liabilitie			5)							0,291	-	00,	097.
Net Assets Fund Balanc					•										
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TEEA0101 07/20/09

Form	990 (20	009)	ANCIENT	ARABIC ORI	DER OF T	HE NOBLE	S OF THE	MYSTIC	SHRINE-	ACCA TEM	PLE GR			5	1-0	1547	48		Page 2
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51-0154748 ANCIENT ARABIC ORDER OF THE NOBLES OF THE MYSTIC SHRINE-ACCA TEMPLE Page 3 **Checklist of Required Schedules** Part IV No Yes Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A 2 Is the organization required to complete Schedule B, Schedule of Contributors? 2 X 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 3 3 Х Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II 4 5 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 similar funds or 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 Х 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 Χ 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 9 Schedule D. Part IV Х Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes.' complete Schedule D. Part V 10 X Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D. Parts VI. VII. VIII. IX. or X as applicable 11 Х Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D. Part VI Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII • Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII • Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If 'Yes,' complete Schedule D. Part X Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII 12 Х 12AWas the organization included in consolidated, independent audited financial statement for the tax Yes No year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional Х 12 A 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E 13 Х 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a X b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Part I 14b X 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 Х 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 Х Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I 17 Х Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G. Part II 18 Х

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,'

Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H

complete Schedule G, Part III

Х

X

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Form 990 (2009) ANCIENT ARABIC ORDER OF THE NOBLES OF THE MYSTIC SHRINE-ACCA TEMPLE

Part IV Checklist of Required Schedules (continued)

			162	NO
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		х_
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23		X
24 a	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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K If 'No, 'go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	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		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		
b	Is the organization 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	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		_X
28	Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		х
C	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? 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? <i>If 'Yes,' complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
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		х
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	х	
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		
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_
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?  Note. All Form 990 filers are required to complete Schedule O	38		х_
ЗАА		Form	990 C	2009)

Form 990 (2009) ANCIENT ARABIC ORDER OF THE NOBLES OF THE MYSTIC SHRINE-ACCA TEMPLE

Part V | Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1 a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U S Information Returns Enter -0- if not applicable	0		
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 reportable gam (gambling) winnings to prize winners?	iing 1 c		х
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	0		
2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	_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 by this return?	3a		х
<b>b</b> If 'Yes' has it filed a Form 990-T for this year? <i>If 'No,' provide an explanation in Schedule O</i>	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over financial account in a foreign country (such as a bank account, securities account, or other financial account)?	er, a <b>4a</b>		Х
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?	5a		_X
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibi Tax Shelter Transaction?	ited 5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	on <b>6a</b>		X
<b>b</b> If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts we deductible?	ere not6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se provided to the payor?	ervices 7a		х
<b>b</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 was required to Form 8282?	file 7c		х
d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d			
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		L	X
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		L	
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required	<sup>7</sup> 7h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	the 8	:	
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9a	-	
<b>b</b> Did the organization make any distribution to a donor, donor advisor, or related person?	9b		
10 Section 501(c)(7) organizations. Enter	<u></u>		
a Initiation fees and capital contributions included on Part VIII, line 12			
<b>b</b> Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b			
11 Section 501(c)(12) organizations. Enter			
a Gross income from other members or shareholders			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b		'	

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Form 990 (2009)

Form 990 (2009) ANCIENT ARABIC ORDER OF THE NOBLES OF THE MYSTIC SHRINE-ACCA Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body **b** Enter the number of voting members that are independent **1b**|0 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 officer, director, trustee or key employee? Х 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 Х Did the organization make any significant changes to its organizational documents 4 X since the prior Form 990 was filed? Did the organization become aware during the year of a material diversion of the organization's assets? 5 6 Does the organization have members or stockholders? 6 Х 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7 a X b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8a Х b Each committee with authority to act on behalf of the governing body? 8ь Х Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the 9 organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O X Policies (This Section B requests information about policies not required by the Internal Revenue Code ) Yes No 10a Does the organization have local chapters, branches, or affiliates? 10a b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b Х 11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? X 11 11 A Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13 12 a **b** Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Х c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 12c Х 13 Does the organization have a written whistleblower policy? 13 X 14 Does the organization have a written document retention and destruction policy? 14 X 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? a The organization's CEO, Executive Director, or top management official 15a 15 b Х b Other officers of key employees of the organization If 'Yes' to line 15a or 15b, 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? 16 a Х **b** 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 16b status with respect to such arrangements? Section C. Disclosures 17 List the states with which a copy of this Form 990 is required to be filed > Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website Another's website X Upon request

Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public

State the name, physical address, and telephone number of the person who possesses the books and records of the organization:

Robert C. Puffenbarger, Recorder 1712 Bellevue Ave., Richmond, VA 23227 (804) 264-0509

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Form 990 (2009)

# 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. Report compensation for the calendar year ending with or within the organizations's tax year. 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 Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees. See instructions for definition of 'key employees.'
- 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.

X Check this box if the organization did not	compens	ate an	у сі	ırrer	nt of	ficer,	dıred	ctor, or trustee		
(A)	(B)			-	<b>c)</b>		. –	(D)	(E)	(F)
Name and Title	Average hours per week	advid a trustee	ostant tercolulism	$\overline{}$	a key employee	And employee	y) रेजसास	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
		Nee	laustee		Y.	rensoled				
Paul W. Lanier Potentate	5.00			Х				0.	0.	0.
Ben D. Holder Chief Rabban	5.00			х				0.	0.	0.
C. L. Chaney Asst Rabban	5.00			Х				0.	0.	0.
W. L. Jellie Oriental Guide	5.00			х				0.	0.	0.
Floyd W. Maxey, Jr. Treasurer	5.00			Х				0.	0.	0.
Robert C. Puffenbarger Recorder	5.00			X				0.	0.	0.
T. W. Jenkins, Sr. High Priest & Prophet	5.00			Х				0.	0.	0.
								,		
										<del></del>

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(A)	(B)				c)			(D)	(E)	(	F)
Name and Title		ge Po s eek 9		(chec Officer				Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	comp	mated t of othe ensation
	per w	director	Institutional trustee	icer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from organ and	n the nization related izations
		+	-			_		<u>.                                    </u>			
									-		
								· · · · · · · · · · · · · · · · · · ·		_	
											<u> </u>
			<u> </u>				}				
1 b Total							<b>•</b>	0.	0.	<u> </u>	
<ul><li>Total number of individuals (including but no from the organization</li></ul>	t limited to the	ose li	sted	abov	ve) v	who	rece	ived more than \$	100,000 in reportabl	e comper	satio
3 Did the organization list any former officer, of	tirector or trus	tee l	kev e	emnl	ove	e or	hiat	nest compensated	l employee		res
on line 1a? If 'Yes,' complete Schedule J for	such ındıvıdu	al	-	•	-		-	·	, ,	3	
4 For any individual listed on line 1a, is the su the organization and related organizations gi individual	m of reportab reater than \$1	e cor 50,00	nper )0? <i>I</i>	isati If 'Ye	on a	ana d omp	iner lete	compensation tro Schedule J for su	om ch	4	
5 Did any person listed on line 1a receive or a rendered to the organization? If 'Yes,' compl	ccrue comper lete Schedule	satio <i>J for</i>	n fro such	m aı per	ny u son	nrel	ated	organization for s	ervices	5	ŀ
Complete this table for your five highest com- compensation from the organization	pensated inde	epend	lent	cont	racte	ors t	hat r	eceived more tha	n \$100,000 of	<del></del>	
(A) Name and business	address							(B Description (	) of Services	(C) Compen	satioi
											-
						_					
2 Total number of independent contractors (ind \$100,000 in compensation from the organiza		t limit	ed to	o tho	se I	iste	d abo	ove) who received	more than		
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		.,				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
9.0	1 a	Federated campaigns	1	1 a					
AN		Membership dues	Ī	1 b	1,890.				
A S		Fundraising events	Ī	1 c	116,762.				
FIS		Related organizations		1 d	•				
2		Government grants (contributio	ns)	1 e					
SIS			Ī						
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS		All other contributions, gifts, gi similar amounts not included a	bove	1f	1,108.				
S S	-	Noncash contribus included in	Ins 1a-1f	\$_					
	h	Total. Add lines 1a-1f			<u> </u>	119,760.			
N	_			}	Business Code			-	
Š	2a	<del></del>	<b></b>						· <del>-</del> · -
SE R	b						·		
Ž	C								
A SE	đ				<del></del>				
RA	e								
PROGRAM SERVICE REVENUE		All other program service	e revenue	· L	<b>_</b>				
		Total. Add lines 2a-2f				·			
	3	Investment income (incli- other similar amounts)	uding divi	dends,	, interest and				
	4	Income from investment	of tax ax	omnt l	nond proceeds	<del>-</del>	<del>-</del>		
	5	Royalties .	UI tax-ex	empti	oonu proceeus	<del>-</del>	<del>-</del>		
	,	Royalties .	(ı) Re	al	(ii) Personal	_			<del>-</del>
	6.2	Gross Rents			( y · circuit	,			
		Less rental expenses							
		Rental income or (loss)							
		Net rental income or (los	:<)		<u> </u>				
		`г	(ı) Secu	rities	(ii) Other				
	/ a	Gross amount from sales of assets other than inventory							
		· [							
	D	Less: cost or other basis and sales expenses							
	С	Gain or (loss)							
		Net gain or (loss)			<u></u>			-	
		Gross income from fundi	raicina ev	ontc					
IUE	0 a	(not including \$	116,7	62.					
YE.		of contributions reported							
R		See Part IV, line 18		á	a				
OTHER REVENUE	b	Less direct expenses		ŀ	<b>D</b>				
0	c	Net income or (loss) from	m fundrais	sing ev	v <u>ents</u> ►				
	9a	Gross income from game See Part IV, line 19	ıng actıvıt	ies	a				
		Less direct expenses			- D				
		Net income or (loss) from	n gaming	activi	ties ►			-	-
						-			
	iva	Gross sales of inventory and allowances	, 1635 1610	#1115 6	a				
		Less cost of goods sold			b				
	c	Net income or (loss) from	m sales of	finver	ntory				
		Miscellaneous Revenu			Business Code			_	
	11 a		<b>. –</b> – –	[					
	b			1					
	С			[					
	d	All other revenue		Ł					
	e	Total. Add lines 11a-11d	i		•				
	12	Total revenue See instr	uctions		•	119 760	l	I	

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do 1 6b, .	not include amounts reported on lines 7b, 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				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	0.	0.	<del></del>	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and 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				
Ł	Legal				
c	Accounting				
c	l Lobbying [				
€	Prof fundraising svcs See Part IV, In 17				
f	Investment management fees				
ç	Other				
12	Advertising and promotion				
13	Office expenses	1,799.	1,799.		
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	10,017.	10,017.		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
	Insurance				
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below )				
a	Fundraising costs	61,834.	61,834.		
ŀ	Taxes, licenses and dues	463.	463.		
c	Other costs of clubs	8,653.	8,653.		
c	 				
6	`				
f	All other expenses	27,194.	27,194.		
	Total functional expenses. Add lines 1 through 24f	109,960.	109,960.		
26	Joint costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
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Pa	art X	Balance Sheet				, 10 Tage I
				(A) Beginning of year		( <b>B</b> ) End of year
	1	Cash - non-interest-bearing		17,255.	1	26,416.
	2	Savings and temporary cash investments		15,331.	2	15,611.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Receivables from current and former officers, directors and highest compensated employees. Complete Part I	s, trustees, key employees, I of Schedule L		5	
	6	Receivables from other disqualified persons (as define	d under section 4958(f)(1))			
		and persons described in section 4958(c)(3)(B) Comp	lete Part II of Schedule L		6	
Š	7	Notes and loans receivable, net			7	
ASSETS	8	Inventories for sale or use		23,711.	8	24,070.
Ś	9	Prepaid expenses and deferred charges			9	
	10 a	Land, buildings, and equipment cost or other basis	10a			
		Complete Part VI of Schedule D				
	b	Less accumulated depreciation	10Ь		10 c	
	11	Investments — publicly-traded securities			11	
	12	Investments – other securities. See Part IV, line 11			12	
	13	Investments – program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11			15	
	16	Total assets Add lines 1 through 15 (must equal line	34) .	56,297.	16	66,097.
	17	Accounts payable and accrued expenses			17	
	18	Grants payable			18	
	19	Deferred revenue			19	
Ļ	20	Tax-exempt bond liabilities			20	
A B I	21	Escrow or custodial account liability Complete Part IV	/ of Schedule D		21	
LLIT	22	Payables to current and former officers, directors, trus highest compensated employees, and disqualified personal disqualified perso	tees, key employees, sons Complete Part II	_		
		of Schedule L			22	
E S	23	Secured mortgages and notes payable to unrelated this	rd parties		23	
	24	Unsecured notes and loans payable to unrelated third	parties		24	
	25	Other liabilities. Complete Part X of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		0.	26	0.
N E T		Organizations that follow SFAS 117, check here ▶	X and complete lines			
		27 through 29 and lines 33 and 34.				
Ş	27	Unrestricted net assets		56,297.	27	66,097.
Ē	28	Temporarily restricted net assets			28	
	29	Permanently restricted net assets			29	
R		Organizations that do not follow SFAS 117, check her	re ►			
FUZD		lines 30 through 34.				
Ď	30	Capital stock or trust principal, or current funds			30	
B	31	Paid-in or capital surplus, or land, building, and equip	ment fund		31	
Ĺ	32	Retained earnings, endowment, accumulated income,	or other funds		32	
BALAZCES	33	Total net assets or fund balances		56,297.	33	66,097.
รี	34	Total liabilities and net assets/fund balances		56,297.	34	66,097.

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66,097. Form **990** (2009)

	•		
Form 990 (2009) ANCIENT ARABIC ORDER OF THE NOBLES OF THE MYSTIC SHRINE-ACCA TEMPLE	51-0154748	Р	age 1
Part XI   Financial Statements and Reporting			
		Yes	No
<b>1</b> Accounting method used to prepare the Form 990 $X$ Cash $\Box$ Accrual $\Box$ Other			
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.			
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2	а	X
b Were the organization's financial statements audited by an independent accountant?	2	b	Х
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight review, or compilation of its financial statements and selection of an independent accountant?	of the audit,	С	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is consolidated basis, separate basis, or both	ssued on a		
Separate basis Consolidated basis Both consolidated and separate basis			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in a Audit Act and OMB Circular A-133?	the Single 3	a	x
<b>b</b> If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the ror audits, explain why in Schedule O and describe any steps taken to undergo such audits	required audit	Ь	

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Form 990 (2009)

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#### SCHEDULE O (Form 990)

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

OMB No 1545-0047

2009

Open to Public Inspection

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Department of the Treasury Internal Revenue Service ► Attach to Form 990.

Employer identification number ANCIENT ARABIC ORDER OF THE NOBLES OF THE MYSTIC SHRINE-ACCA TEMPLE GROUP RETURN 51-0154748 Pt VI-A, Line 7a Organization has members, who elect their officers. Pt VI-A, Line 7b All decisions are subjet to By-Laws and Int'l Shrine By-laws. Pt VI-A, Line 8a Minutes are properly recorded. Pt\_VI-A, Line 8b Only Potentate, Recorder or specifically designated officers may act on behalf of the organization. Pt VI-B, Line 11A Copy of Form 990 is provided to Board of Directors for review prior to filing. Pt\_VI-B, Line 12c Monitoring is in accordance with By-laws and Int'l Shrine By-laws. Pt\_VI-C, Line 19 Documents are available at Shrine office in Richmond, VA. Pt VI-A, Line 3 Form 990-T not required. Pt VI-A, Line 6 Organization has members.

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Related Organizations and Unrelated Partnerships

2009

OMB No 1545-0047

Open to Public Inspection

Employer identification number 51-0154748

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 33, 34, 35, 36, or 37.
 Attach to Form 990.

OF THE MYSTIC SHRINE-ACCA TEMPLE GROUP RETURN

ANCIENT ARABIC ORDER OF THE NOBLES

(F)
Direct controlling
entity (F)
Direct controlling entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) (E)
Public charity status
(if section 501(c)(3)) (E) End-of-year assets Part I Identification of Disregarded Entities (Complete of the organization answered 'Yes' to Form 990, Part IV, line 33.) (D) Exempt Code section (**D)** Total income (C)
Legal domicile (state or foreign country) (C)
Legal domicile (state or foreign country) (B) Primary activity (B)
Primary activity FRATERNAL (A) (A) Name, address, and EIN of related organization (A) Name, address, and EIN of disregarded entity ACCA SHRINERS 54-0123355 Part II

Schedule R (Form 990) (2009) 501 (C)10 TEEA5001 02/05/10 Z Z BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. RICHMOND VT 23227 0 BOX 9217, Д

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Schedule R (Form 990) 2009 ANCIENT ARABIC ORDER OF THE NOBLES OF THE MYSTIC SHRINE-ACCA TEMPLE GROUP RETURN 51-0154748

Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the fax year.)

	i.	ı	, ,	 	ı .
	(J) General or managing partner?	ş			
	Gene mana parti	Yes			_
	Code V-UBI amount in box 20 of Schedule K-1				
	por- nte ons?	ş			
	(H) Disproportionate allocations?	Yes			
'ar.)	(F) (G) Share of total income Share of end-of-year assets				
- because it nad one or more related organizations treated as a partitership during the tax year.)	(F) Share of total income				
led as a partriersrii	(E) Predominant income (related, unrelated, excluded from tax under	sections 512-514)			
anizations nea	(C) (D) Legal Direct domicile controlling entity (state or foreign				
aated orga		country)			
one or more re	(B) Primary Activity				
DECAUSE IL IIAU	(A) Name, address, and EIN of related organization				

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete of the organization answering 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	Faxable as a Cored organizations	poration or Trus treated as a cor	st (Complete	if the organiz	is a Corporation or Trust (Complete of the organization answered 'Yes' to Form 990, Part IV, zations treated as a corporation or trust during the tax year.)	s' to Form 990, Pa	rt IV,
<b>(A)</b> Name, address, and EIN of related organization	(B) Primary Activity	(C) Legal domicile (state or foreign co	( <b>D)</b> Direct ontrolling entity	(E) Type of entity (C corp, S corp, or trust)	Activity Legal domicile Direct (C corp, S corp, country)  (C)  (C)  (C)  (D)  (C)  (D)  (C)  (D)  (C)  (C	( <b>G)</b> Share of end-of-year assets	(H) Percentage ownership
						:	

Schedule R (Form 990) (2009)

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Schedule R (Form 990) 2009 ANCIENT ARABIC ORDER OF THE NOBLES OF THE MYSTIC SHRINE-ACCA TEMPLE GROUP RETURN 51-0154748

Part V Transactions With Related Organizations (Complete If the organization answered 'Yes' to Form 990, Part IV, line 34, 35, or 36.)

(2009)	rm 990)	Schedule <b>R</b> (Form 990) (2009)	<b>BAA</b> TEEA5003 02/05/10
			(9)
			(5)
			(4)
			(3)
			(2)
			(1)
,ed	Amount involved	Transaction Ame type (a-r)	Name of other organization
		Í	1
×	_	_	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.
×	19		. <b>q</b> Other transfer of cash or property to other organization(s)
×	<u>1</u>		p Reimbursement paid by other organization for expenses
×	10		<ul> <li>Reimbursement paid to other organization for expenses</li> </ul>
×	1n		n Sharing of paid employees
	Jm X	1	<b>m</b> Sharing of facilities, equipment, mailing lists, or other assets
×	=		l Performance of services or membership or fundraising solicitations by other organization(s)
×	1 4		k Performance of services or membership or fundraising solicitations for other organization(s)
×			j Lease of facilities, equipment, or other assets from other organization(s)
×	1:		i Lease of facilities, equipment, or other assets to other organization(s)
×	1h		
×	19		g Purchase of assets from other organization(s)
×	1,		f Sale of assets to other organization(s)
×	1e		e Loans or loan guarantees by other organization(s)
×	10		<b>d</b> Loans or loan guarantees to or for other organization(s)
×	1c	· .	c Gift, grant, or capital contribution from other organization(s)
×	1 p	<u>                                     </u>	<b>b</b> Gift, grant, or capital contribution to other organization(s)
×			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 a Recent of (i) unterest (ii) annuties (iii) rovalities (iv) rent from a controlled entity
Ŷ	Yes	L	Note Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

Schedule R (Form 990) 2009 ANCIENT ARABIC ORDER OF THE NOBLES OF THE MYSTIC SHRINE-ACCA TEMPLE GROUP RETURN 51-0154748

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Part VI Unrelated Organizations Taxable as a Partnership (Complete of the organization answered 'Yes' to Form 990, Part IV, line 37.)

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 asset or gross revenue) that was not a related organization. See Instructions regarding exclusion for certain investment partnerships.

(A) Name, address, and EIN of entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Are all partners section 501(c)(3) organizations?	ners Sh	(E) Share of end-of-year assets	(F) Disproportionate allocations?	(G) Code V-UBI amount In box 20 of Schedule K-1 Form (1065)	(H) General or managing partner?	fral or sging
			Yes	No		Yes No		Yes	No
				-					
						_			
ВАА		TEEA5004 02/05/10					Schedule R (Form 990) (2009)	n 990)	(5002)

#### Form 990 Question H(c)

## List of Affiliates Included in Return

2009

Name	Employer Identification No
ANCIENT ARABIC ORDER OF THE NOBLES OF THE MYSTIC SHRINE-ACCA TEMPLE GROUP RETURN	51-0154748

Group Exemption Number (GEN)

<u>0229</u>

(A) Affiliate Name	(B) Affiliate Address	(C) Affiliate EIN
See list attached Foreign City/Country if applicable	See attached  SEE ATTACHED VA 23227	Attached
Foreign City/Country if applicable		
Foreign City/Country if applicable		
Foreign City/Country if applicable		
Foreign City/Country if applicable		-

teew3101 SCR 03/12/10

## ACCA TEMPLE A.A.O.N.M.S. GROUP RETURN 51-0154748 DECEMBER 31, 2009

Attachment Page 1, H

FORM 990 GROUP RETURN FOR ALL CLUBS' UNDER JURISDICTION OF ACCA TEMPLE CLUBS WITH GROSS RECEIPTS IN EXCESS OF \$25,000.

CLUB	FEIN	<u>R</u>	EVENUE	-	DIRECT (PENSES
CAVERNS SHRINE CLUB	23-7317336	\$	48,379	\$	45,941
MANCHESTER SHRINE CLUB	54-1175338	\$	33,492	\$	34,746
SOUTH HILL SHRINE CLUB	23-7317347	\$	37,889	\$	29,273
TOTALS		\$	119,760	\$	109,960

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#### ACCA TEMPLE A.A.O.N.M.S. GROUP RETURN 51-0154748 DECEMBER 31, 2009

Attachment Page 1, H

FORM 990 GROUP RETURN FOR ALL CLUBS UNDER JURISDICTION OF ACCA TEMPLE

ALL CLUBS' ADDRESSES ARE:

P. O. BOX 9217, RICHMOND, VA 23227-0217

LOCAL ORGANIZATIONS REPORTING ON GROUP RETURN ARE:

CLUB		EIN
ANTIQUE CLASSIC SPORTS CAR SHRIN BLUE RIDGE SHRINE CLUB	E CLUB	54-1164306 23-7317335
CARAVANNERS SHRINE CLUB		54-1398797
CAVERNS SHRINE CLUB COUNTRY WESTERN SHRINE CLUB		23-7317336 54-1116790
DANVILLE SHRINE CLUB		23-7317337
FREDERICKSBURG SHRINE CLUB GLEN ALLEN SHRINE CLUB		23-7317339 54-1374177
GOLF SHRINE CLUB		54-1111398
HERITAGE SHRINE CLUB HOPEWELL SHRINE CLUB		54-1164305 23-7317340
JAMES RIVER SHRINE CLUB		06-1833251
LIBERTY BELL SHRINE CLUB MANCHESTER SHRINE CLUB		54-1005930 54-1175338
NORTHERN NECK SHRINE CLUB	NEW NAME	54-1237616
PAST MASTERS SHRINE CLUB PETERSBURG SHRINE CLUB		23-7317342 23-7317343
PIEDMONT SHRINE CLUB		23-7317344
SOUTH BOSTON SHRINE CLUB SOUTH HILL SHRINE CLUB		23-7317346 23-7317347
SOUTHSIDE SHRINE CLUB		23-7317348
STEEL DRUM BAND SHRINE CLUB VALLEY SHRINE CLUB		20-2143900 23-7317351

THE CLUBS SHOWN BELOW WAS INCLUDED IN PRIOR YEARS' RETURNS BUT HAS CEASED OPERATIONS IN A PRIOR YEAR.

**EMPORIA SHRINE CLUB** 

23-7317338