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Short Form
Return of Organization Exempt From Income TaxUnder section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

2009

► 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

Open to Public
Inspection

A For the 2009 calendar year, or tax year beginning		, 2009, and ending	
B Check if applicable		C	
Address change		FRIENDSHIP MASONIC LODGE NO. 160 AF & AM	
Name change		5626 NE ALAMEDA ST.	
Initial return		PORTLAND, OR 97213-3422	
Termination			
Amended return			
Application pending			
D Employer identification number 93-0508041			
E Telephone number 503-281-5517			
F 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	H Check ► <input checked="" type="checkbox"/> if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).
J Tax-exempt status (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 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. ► \$ 86,190.	

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)	
1 Contributions, gifts, grants, and similar amounts received 150.	
2 Program service revenue including government fees and contracts	
3 Membership dues and assessments	
4 Investment income	
5a Gross amount from sale of assets other than inventory 18,006.	
b Less cost or other basis and sales expenses 21,694.	
c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 55,054.	
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) 5c -3,688.	
b Less direct expenses other than fundraising expenses	
c Net income or (loss) from special events and activities (Subtract line 6b from line 6a) 6a	
7a Gross sales of inventory, less returns and allowances 6b	
b Less: cost of goods sold 6c	
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 7a	
8 Other revenue (describe ► See Statement 2) 7b	
9 Total revenue Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 7c	
10 Grants and similar amounts paid (attach schedule) 8 12,980.	
11 Benefits paid to or for members 9 64,496.	
12 Salaries, other compensation, and employee benefits	
13 Professional fees and other payments to independent contractors	
14 Occupancy, rent, utilities, and maintenance	
15 Printing, publications, postage, and shipping	
16 Other expenses (describe ► See Statement 3) 10 47,808.	
17 Total expenses Add lines 10 through 16 11 1,850.	
18 Excess or (deficit) for the year (Subtract line 17 from line 9) 12 44,716.	
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) 13 47,808.	
20 Other changes in net assets or fund balances (attach explanation) See Statement 4 14 44,716.	
21 Net assets or fund balances at end of year Combine lines 18 through 20 15 140,672.	
18 -76,176.	
19 922,823.	
20 63,405.	
21 910,052.	

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 352,913. 22 340,251.	
23 Land and buildings 567,516. 23 567,516.	
24 Other assets (describe ► See Statement 5) 2,394. 24 2,285.	
25 Total assets 922,823. 25 910,052.	
26 Total liabilities (describe ►) 0. 26 0.	
27 Net assets or fund balances (line 27 of column (B) must agree with line 21) 922,823. 27 910,052.	

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

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

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

28

— (Grants \$

If this amount includes foreign grants, check here

1

29

— (Grants \$

If this amount includes foreign grants, check here.

2

30

— (Grants \$

If this amount includes foreign grants, check here

2

31 Other program services (attach schedule)

(Grants \$

If this amount includes foreign grants, check here

▶

32 Total program service expenses (add lines 28a through 31a)

1

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

Part V | Other Information (Note the statement requirements in the instrs for Part V.)

See Statement 7

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.
35a X
35b

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?
36 X

b If 'Yes,' has it filed a tax return on **Form 990-T** for this year?
37a 0
37b X

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 instructions ► **37a** 0.
b Did the organization file **Form 1120-POL** for this year?
38a 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?
b If 'Yes,' complete Schedule L, Part II and enter the total amount involved
38b N/A

39 Section 501(c)(7) organizations. Enter

a Initiation fees and capital contributions included on line 9
b Gross receipts, included on line 9, for public use of club facilities
39a N/A
39b N/A

40a 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**

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

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. ► **0.**

d Section 501(c)(3) and 501(c)(4) organizations. 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
40e X

41 List the states with which a copy of this return is filed ► **None**

42a The organization's books are in care of ► **KEVIN GIFFORD** Telephone no. ► **503-281-5517**
 Located at ► **5626 NE ALAMEDA PORTLAND OR** ZIP + 4 ► **97213**

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: ► **42b** X

See the instructions for exceptions and filing requirements for **Form TD F 90-22.1, Report of a Foreign Bank and Financial Accounts.**

c At any time during the calendar year, did the organization maintain an office outside of the U.S.? If 'Yes,' enter the name of the foreign country ► **42c** X

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041** – Check here and enter the amount of tax-exempt interest received or accrued during the tax year ► **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

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	
47	
48	
49a	
49b	

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

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

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

b If 'Yes,' was the related organization a section 527 organization?

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'

(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 and deferred compensation	(e) Expense account and other allowances

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'

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation

d Total number of other independent contractors each receiving over \$100,000 ► _____

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.

Sign Here

► Paul A Blackmer Date 10/13/2010
 Signature of officer
 ► Paul A Blackmer, Secretary Type or print name and title

Paid Preparer's Use Only

Preparer's signature	► <u>Tom Daniels</u>	Date	7-28-10	Check if self-employed	<input checked="" type="checkbox"/> N/A	Preparer's Identifying Number (See instructions)
Firm's name (or yours if self-employed), address, and ZIP + 4	► Tom Daniels, CPA 4838 N.E. Sandy Blvd., Ste. 102 Portland, OR 97213	EIN	► N/A	Phone no	► (503) 249-7000	

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

BAA

► Yes No

Form 990-EZ (2009)

Statement 1
Form 990-EZ, Part I, Line 5c
Net Gain (Loss) from Noninventory Sales

Publicly Traded Securities

Gross Sales Price: 18,006.
Cost or Other Basis: 21,694.

Total Gain (Loss) Publicly Traded Securities \$ -3,688.

Total Net Gain (Loss) From Noninventory Sales \$ -3,688.

Statement 2
Form 990-EZ, Part I, Line 8
Other Revenue

MISCELLANEOUS RECEIPTS	\$	6,355.
GRAND LODGE DIVIDEND		5,025.
WEITZEL RECEIPTS		1,600.
Total	\$	12,980.

Statement 3
Form 990-EZ, Part I, Line 16
Other Expenses

ADMIN - OTHER	\$	4,006.
BANK CHARGES		195.
CHARITABLE DONATION		1,473.
GRAND LODGE ASSESSMENT		3,202.
LIFE MEMBERSHIPS		380.
Office Expenses		3,487.
STATED DINNER EXPENSE		5,146.
TRESTLEBOARD EXPENSE		2,380.
UNCATEGORIZED		24,447.
Total	\$	44,716.

Statement 4
Form 990-EZ, Part I, Line 20
Other Changes In Net Assets Or Fund Balances

UNREALIZED GAIN ON SECURITIES	\$	63,405.
Total	\$	63,405.

Statement 5
Form 990-EZ, Part II, Line 24
Other Assets

	<u>Beginning</u>	<u>Ending</u>
Total	<u>\$ 2,394.</u>	<u>\$ 2,285.</u>
	<u>\$ 2,394.</u>	<u>\$ 2,285.</u>

Statement 6
Form 990-EZ, Part III
Organization's Primary Exempt Purpose

OPERATION OF ESSENTIAL FUNCTIONS OF A MASONIC FRATERNAL LODGE, INCLUDING DEGREE WORK, STATED COMMUNICATIONS, STATED DINNERS, AND HOSTING OF SEVERAL YOUTH FUNCTIONS.

Statement 7
Form 990-EZ, Part V
Regarding Transfers Associated with Personal Benefit Contracts

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? No