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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)

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

A For the 2009 calendar year, or tax year beginning

03/01/09, and ending

02/28/10

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
GRAND CHAPTER OF FLORIDA, ORDER OF
THE EASTERN STAR CHARITABLE FD. INC

Doing Business As

Number and street (or P O box if mail is not delivered to street address)

P.O. BOX 97

D Employer identification number

59-3394998

City or town, state or country, and ZIP + 4

BONIFAY

FL 32425-0097

E Telephone number

850-547-9199

G Gross receipts \$ 4,431,562

F Name and address of principal officer

LINDA J. DUDLEY

SAME AS ITEM C ABOVE

H(a) Is this a group return for

 Yes No

H(b) Are all affiliates included?

 Yes No

If "No," attach a list (see instructions)

I Tax-exempt status 501(c) (3) ► (insert no) 4947(a)(1) or 527J Website: ► www.floridaoes.orgK Type of organization Corporation Trust Association Other ►

L Year of formation 1995

M State of legal domicile FL

Part I Summary

1 Briefly describe the organization's mission or most significant activities
See Schedule O

2 Check this box ► if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a)

4 Number of independent voting members of the governing body (Part VI, line 1b)

5 Total number of employees (Part V, line 2a)

6 Total number of volunteers (estimate if necessary)

7a Total gross unrelated business revenue from Part VIII, column (C), line 12

b Net unrelated business taxable income from Form 990-T, line 34

3	7
4	0
5	0
6	0
7a	
7b	0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	178,593	127,764
9 Program service revenue (Part VIII, line 2g)		
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-236,814	494,823
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-58,221	622,587

	Prior Year	Current Year
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	291,547	358,490
14 Benefits paid to or for members (Part IX, column (A), line 4)		
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		
16a Professional fundraising fees (Part IX, column (A), line 11e)		
b Total fundraising expenses (Part IX, column (D), line 25) ►		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	62,112	76,232
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	353,659	434,722
19 Revenue less expenses Subtract line 18 from line 12	-411,880	187,865

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	4,041,546	4,981,576
21 Total liabilities (Part X, line 26)	10,348	4,257

22 Net assets or fund balances Subtract line 21 from line 20 4,031,198 4,977,319

Part II Signature Block

2010
Net Assets or
Fund Balances

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

MARGARET R. NATHURST, GRAND TREASURER

Type or print name and title

10/14/2010

Date

Paid
Preparer's
Use OnlyPreparer's signature ►  Date 09/08/10 Check if self-employed ► Preparer's identifying number (see instructions) P00410788Firm's name (or yours if self-employed), address, and ZIP + 4 ► GORDON H. ZINK, CPA PA EIN ► 65-0165341
6361 Presidential Ct Ste B Phone no ► 239-936-1120
Fort Myers, FL 33919-3585

May the IRS discuss this return with the preparer shown above? (see instructions)

 Yes No

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

DAA

Form 990 (2009)

P. 25

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission

See Schedule O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

 Yes No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

 Yes No

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses
Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported4a (Code) (Expenses \$ 193,646 including grants of \$ 193,646) (Revenue \$)
PROVIDED FOR MONTLY LIVING EXPENSES OF 3 NEEDY RESIDENTS OF THE MASONIC HOME.4b (Code) (Expenses \$ 82,687 including grants of \$ 75,553) (Revenue \$)
PROVIDED FUNDS TO THE FLORIDA HEART RESEARCH INSTITUTE FOR HEART RESEARCH.4c (Code) (Expenses \$ 32,207 including grants of \$ 29,331) (Revenue \$)
DONATED FUNDS TO MOFFITT CANCER CENTER AND RESEARCH INSTITUTE FOUNDATION FOR CANCER RESEARCH.

4d Other program services (Describe in Schedule O)

(Expenses \$ 126,182 including grants of \$ 59,960) (Revenue \$)

4e Total program service expenses ► 434,722

Part IV Checklist of Required Schedules

- 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 1 2 3 4 5 6 7 8 9 10 11
- 2 Is the organization required to complete Schedule B, Schedule of Contributors? 12A
- 3 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 13 14a 14b 15 16 17 18 19 20
- 4 **Section 501(c)(3) organizations.** Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II 14
- 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 15
- 6 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 16
- 7 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 17
- 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 18
- 9 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 Schedule D, Part IV 19
- 10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 20
- 11 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
 - Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 12
 - 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 13
 - 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 14a
 - Did the organization report an amount for other assets related 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 14b
 - Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 15
 - 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 16
- 12 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII 17
- 12A Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 18
- 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 19
- 14a Did the organization maintain an office, employees, or agents outside of the United States?
 - 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 20
- 15 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 12A
- 16 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 13
- 17 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 14a
- 18 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 14b
- 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 15
- 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 16

Part IV Checklist of Required Schedules (continued)

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

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

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

24a 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, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?

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?

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?

25a **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

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

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

27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III

28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV

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

29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M

30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M

31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II

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

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

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

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

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

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

	Yes	No
21	X	
22	X	
23		X
24a		X
24b		
24c		X
24d		X
25a		X
25b		X
26		X
27		X
28a		X
28b		X
28c		X
29		X
30		X
31		X
32		X
33		X
34	X	
35		X
36		X
37		X
38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U S Information Returns Enter -0- if not applicable

1a	0
----	---

1b 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 gaming (gambling) winnings to prize winners?

1c

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

2a	0
----	---

b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)

2b

3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?

3a

b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O

3b

4a 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)?

4a

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

b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?

5b

c If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?

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?

6a

b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?

6b

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 services provided to the payor?

7a

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 file Form 8282?

7c

d If "Yes," indicate the number of Forms 8282 filed during the year

7d	1
----	---

e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

7e

f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

7f

g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?

7g

h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?

7h

8 **Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?

8

9 **Sponsoring organizations maintaining donor advised funds.**

a Did the organization make any taxable distributions under section 4966?

9a

b Did the organization make a distribution to a donor, donor advisor, or related person?

9b

10 **Section 501(c)(7) organizations.** Enter

a Initiation fees and capital contributions included on Part VIII, line 12

10a	N/A
-----	-----

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

10b	N/A
-----	-----

11 **Section 501(c)(12) organizations.** Enter

a Gross income from members or shareholders

11a	N/A
-----	-----

b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)

11b	N/A
-----	-----

12a **Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?

12a	N/A
-----	-----

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

12b	N/A
-----	-----

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 organization'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 employee"
 - 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

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.

Check this box if the organization did not compensate any current officer, director, or trustee.

Check this box if the organization did not compensate any current officer, director, or trustee.

(A) Name and Title (B) Average (C) Position (check all that apply) (D) Report

Name and Title _____ Position (check all that apply) _____

Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)**

1b Total

0

49,000

8

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ► 0

	Yes	No
3		X
4		X
5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

Part VII Statement of Revenue

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a Federated campaigns 1b Membership dues 1c Fundraising events 1d Related organizations 1e Government grants (contributions) 1f All other contributions, gifts, grants, and similar amounts not included above 1g Noncash contributions included in lines 1a-1f 1h Total. Add lines 1a-1f	1a 1b 1c 1d 1e 1f 127,764 1g 1h ► 127,764			
Program Service Revenue	2a b c d e f All other program service revenue g Total. Add lines 2a-2f	2a b c d e f g ►	Busn. Code		
	3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties	3 4 5 ►		131,179	131,179
Other Revenue	6a Gross Rents b Less rental exps c Rental inc or (loss) d Net rental income or (loss) 7a Gross amount from sales of assets other than inventory (i) Securities 4,172,619 b Less cost or other basis & sales exps 3,808,975 c Gain or (loss) 363,644 d Net gain or (loss) 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 a b Less direct expenses c Net income or (loss) from fundraising events ► 9a Gross income from gaming activities See Part IV, line 19 a b Less direct expenses c Net income or (loss) from gaming activities ► 10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold c Net income or (loss) from sales of inventory ► Miscellaneous Revenue	6a b c d 7a (i) Securities 4,172,619 b c d 8a a b c 9a a b c 10a a b c Miscellaneous Revenue	Busn. Code	363,644 0	363,644
	11a b c d All other revenue e Total. Add lines 11a-11d 12 Total Revenue. See instructions	11a b c d e ► 12 ►		622,587 0 0	494,823

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 not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U S See Part IV, line 21	153,894	153,894		
2 Grants and other assistance to individuals in the U S See Part IV, line 22	204,596	204,596		
3 Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
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				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees	45,723	45,723		
g Other				
12 Advertising and promotion				
13 Office expenses	30		30	
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel	215	215		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 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 ADMINISTRATIVE FEES	21,677		21,677	
b TAXES AND LICENSES	187		187	
c ALLOCATION OF MGT. & GEN.		30,294	-30,294	
d				
e				
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	434,722	434,722		
26 Joint costs. Check here ► <input checked="" type="checkbox"/> 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				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest bearing		1	
	2 Savings and temporary cash investments	297,015	2	411,343
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a		
	b Less accumulated depreciation	10b		10c
	11 Investments—publicly traded securities	3,744,531	11	4,570,233
	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)	4,041,546	16	4,981,576
Liabilities	17 Accounts payable and accrued expenses		17	
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities Complete Part X of Schedule D	10,348	25	4,257
	26 Total liabilities. Add lines 17 through 25	10,348	26	4,257
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	-192,890	27	-14,197
	28 Temporarily restricted net assets	130,190	28	894,717
	29 Permanently restricted net assets	4,093,898	29	4,096,799
	Organizations that do not follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	4,031,198	33	4,977,319
	34 Total liabilities and net assets/fund balances	4,041,546	34	4,981,576

Form 990 (2009)

Part XI Financial Statements and Reporting

1 Accounting method used to prepare the Form 990 Cash Accrual 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?

b Were the organization's financial statements audited by an independent accountant?

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

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 issued on a consolidated basis, separate basis, or both

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 the Single Audit Act and OMB Circular A-133?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a	X	
2b	X	
2c		
3a		X
3b		

Form 990 (2009)

SCHEDULE A
(Form 990 or 990-EZ)
Department of the Treasury
Internal Revenue Service
Public Charity Status and Public Support

OMB No. 1545-0047

2009**Open to Public
Inspection**

Name of the organization

**GRAND CHAPTER OF FLORIDA, ORDER OF
THE EASTERN STAR CHARITABLE FD. INC**Employer identification number
59-3394998
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)		
11g(ii)		
11g(iii)		

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		
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 GRAND CHAPTER OF FLORIDA, ORDER OF 59-3394998

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")	127,395	144,161	114,118	178,593	127,764	692,031
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	127,395	144,161	114,118	178,593	127,764	692,031
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)						31,279
6 Public support. Subtract line 5 from line 4						660,752

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	127,395	144,161	114,118	178,593	127,764	692,031
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	158,641	171,108	175,511	157,603	131,179	794,042
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0
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						1,486,073
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	44.46 %
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	44.19 %
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 checked="" 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.)

N/A

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))	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 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))	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 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		

Schedule A (Form 990 or 990-EZ) 2009 **GRAND CHAPTER OF FLORIDA, ORDER OF** **59-3394998** **Page 4**

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.

SCHEDULE D
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2009Open to Public
Inspection

Name of the organization

**GRAND CHAPTER OF FLORIDA, ORDER OF
THE EASTERN STAR CHARITABLE FD. INC**

Employer identification number

59-3394998**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/>	Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/>	Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7

1 Purpose(s) of conservation easements held by the organization (check all that apply)

Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area
 Protection of natural habitat Preservation of certified historic structure
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Tax Year
2a	
2b	
2c	
2d	

a Total number of conservation easements
b Total acreage restricted by conservation easements
c Number of conservation easements on a certified historic structure included in (a)
d Number of conservation easements included in (c) acquired after 8/17/06

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ► — — — —

4 Number of states where property subject to conservation easement is located ► — — — —

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

 Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year

► — — — —

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year

► \$ — — — —

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

 Yes No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1
(ii) Assets included in Form 990, Part X

► \$ — — — —
► \$ — — — —

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1
b Assets included in Form 990, Part X

► \$ — — — —
► \$ — — — —

Schedule D (Form 990) 2009 GRAND CHAPTER OF FLORIDA, ORDER OF 59-3394998

Page 2

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a Public exhibition
 b Scholarly research
 c Preservation for future generations

d Loan or exchange programs
 e Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

Yes No

b If "Yes," explain the arrangement in Part XIV and complete the following table

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21?

Yes No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	3,908,943	5,283,740			
b Contributions	2,901	145			
c Net investment earnings, gains, and losses	1,207,250	-1,275,977			
d Grants or scholarships					
e Other expenditures for facilities and programs	263,920	89,228			
f Administrative expenses	14,157	9,737			
g End of year balance	4,841,017	3,908,943			

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ► — — — %

b Permanent endowment ► 100.00 %

c Term endowment ► — — — %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations
 (ii) related organizations

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds

	Yes	No
3a(i)		X
3a(ii)		X
3b		

N/A

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) ►

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

Part IX Other Assets. See Form 990, Part X, line 15

Total. (Column (b) must equal Form 990, Part X, col (B) line 15)

Part X Other Liabilities. See Form 990, Part X, line 25

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

4,257

2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

- 1 Total revenue (Form 990, Part VIII, column (A), line 12) 1
- 2 Total expenses (Form 990, Part IX, column (A), line 25) 2
- 3 Excess or (deficit) for the year Subtract line 2 from line 1 3
- 4 Net unrealized gains (losses) on investments 4
- 5 Donated services and use of facilities 5
- 6 Investment expenses 6
- 7 Prior period adjustments 7
- 8 Other (Describe in Part XIV) 8
- 9 Total adjustments (net) Add lines 4 through 8 9
- 10 Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9 10

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

- 1 Total revenue, gains, and other support per audited financial statements 1
- 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12
 - a Net unrealized gains on investments 2a
 - b Donated services and use of facilities 2b
 - c Recoveries of prior year grants 2c
 - d Other (Describe in Part XIV) 2d
- 3 Subtract line 2e from line 1 2e
- 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:
 - a Investment expenses not included on Form 990, Part VIII, line 7b 4a
 - b Other (Describe in Part XIV) 4b
- 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

- 1 Total expenses and losses per audited financial statements 1
- 2 Amounts included on line 1 but not on Form 990, Part IX, line 25
 - a Donated services and use of facilities 2a
 - b Prior year adjustments 2b
 - c Other losses 2c
 - d Other (Describe in Part XIV) 2d
- 3 Subtract line 2e from line 1 2e
- 4 Amounts included on Form 990, Part IX, line 25, but not on line 1:
 - a Investment expenses not included on Form 990, Part VIII, line 7b 4a
 - b Other (Describe in Part XIV) 4b
- 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 5

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information

Part XIV - Supplemental Financial Information**PART V, LINE 4:**

THE INTENDED USE OF THE ENDOWMENT FUND IS TO FUND THE COST OF SUPPORTING THOSE MEMBERS OF THE ORDER OF THE EASTERN STAR WHO ARE RESIDENT GUESTS IN THE MASONIC HOME OF FLORIDA UNDER THE EASTERN STAR AFFILIATION.

Part XIV Supplemental Information (continued)

Schedule I (Form 990) 2009 GRAND CHAPTER OF FLORIDA, ORDER OF 59-3394998

Page 2

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Use Part IV and Schedule I-1 (Form 990) if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
PAID MONTHLY LIVING EXPENSES OF RESIDENTS OF MASONIC HOME	3	193,646		N/A	N/A
COLLEGE SCHOLARSHIPS	9	10,950		N/A	N/A

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Part I, Line 2 - Procedures for Monitoring the Use of Grant Funds

MONTHLY BILLINGS FROM THE MASONIC HOME ARE MONITORED FOR ACCURACY BY MANAGEMENT.

APPLICATIONS FOR COLLEGE SCHOLARSHIPS ARE SCREENED AND APPROVED ON THE BASIS OF ACADEMIC RECORD, CITIZENSHIP, CHARACTER AND FINANCIAL NEED BY A COMMITTEE OF MEMBERS OF THE GRAND CHAPTER. TOTAL GRANTS ARE LIMITED BY ANNUAL OPERATING BUDGETS APPROVED BY THE BOARD. DETAILED REPORTS OF PROGRAM ACTIVITIES ARE PRESENTED TO THE MEMBERS OF THE GRAND CHAPTER AT ANNUAL GRAND SESSIONS.

SCHEDULE O
(Form 990)Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization	GRAND CHAPTER OF FLORIDA, ORDER OF THE EASTERN STAR CHARITABLE FD. INC	Employer identification number 59-3394998
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Form 990 - Organization's Mission or Most Significant Activities

PART I, LINE 1 AND PART III, LINE 1

A FRATERNAL ORGANIZATION WHOSE MEMBERS ARE DEDICATED TO SUPPORTING VARIOUS CHARITABLE CAUSES SUCH AS DONATIONS FOR RESEARCH AIMED AT ELIMINATION OF HEART DISEASE AND CIRCULARTORY PROBLEMS, CANCER RESEAERCH, DIABETES RESEARCH AND SCHOLARSHIPS FOR YOUTH THROUGH A PROGRAM ENTITLED ESTARL (EASTERN STAR TRAINING AWARD FOR RELIGIOUS LEADERS) AVAILABLE TO DESERVING UNDERGRADUATE STUDENTS IN THEIR 3RD & 4TH YEARS OF COLLEGE.

THIS ORGANIZATION ALSO MAINTAINS A FUND FOR SCHOLARSHIPS TO PURSUE RELIGIOUS TRAINING WITH A GOAL OF BECOMING AN ORDAINED CLERGYMAN (NO PARTICULAR RELIGION) AND A FUND TO ASSIST VICTIMS OF NATURAL DISASTERS. THE ORGANIZATION ALSO CONTRIBUTES TO THE EYE FOUNDATION, SHRINER HOSPITALS FOR BURNED AND CRIPPLED CHILDREN, HOSPICE AND PALLIATIVE CARE ORGANIZATIONS AND TO THE OPERATION OF THE MASONIC HOME OF FLORIDA TO ASSIST IN ITS CARE OF INDIGENT RESIDENTS.

PART III, LINE 4d:	EXPENSES	GRANTS
PROVIDED SCHOLARSHIPS OF \$770-1,740 FOR 9 UNDERGRADUATE STUDENTS IN THEIR 3RD & 4TH YEARS OF COLLEGE.	\$12,787	\$10,950
DONATED FUNDS TO YOUTH ORGANIZATIONS	22,884	21,000
DONATED FUNDS TO MASONIC HOME	2,850	2,827
DONATED FUNDS TO OTHER CHARITABLE ORGANIZATIONS	27,781	25,183
EXPENSES OF O.E.S. ENDOWMENT AND INVESTMENT FUND	59,880	0
TOTAL	\$126,182	\$59,960

Name of the organization

GRAND CHAPTER OF FLORIDA, ORDER OFEmployer identification number
59-3394998

Form 990, Part VI, Line 11A - Organization's Process to Review Form 990
OUR INDEPENDENT ACCOUNTANT PREPARES THE FORM 990, WHICH IS REVIEWED AND APPROVED BY THE GRAND TREASURER BEFORE IT IS FILED WITH THE IRS. ALSO, COPIES ARE PROVIDED TO ALL OTHER BOARD MEMBERS, WHO ARE GIVEN THE OPPORTUNITY TO ASK QUESTIONS BEFORE VOTING TO APPROVE FILING OF THE FORM WITH THE IRS.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation
NO DOCUMENTS OTHER THAN FORM 990 AVAILABLE TO THE PUBLIC.

SCHEDULE R
(Form 990)

OMB No 1545-0047

Related Organizations and Unrelated Partnerships
2009**Open to Public
Inspection**

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990.

► See separate instructions.

Department of the Treasury
Internal Revenue ServiceName of the organization
GRAND CHAPTER OF FLORIDA, ORDER OF
THE EASTERN STAR CHARITABLE FD. INCEmployer identification number
59-3394998
Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
N/A					

Part II 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)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
GRAND CHAPTER OF FL., ORDER OF THE					
EASTERN STAR, INC.	P.O. BOX 97	59-0246707	501(c) 3	N/A	
BONIFAY	FL 32425-0097				

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 tax year.)

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

Line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
	N/A							

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36.)**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

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?

	Yes.	No.
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a <input checked="" type="checkbox"/>	x
b Gift, grant, or capital contribution to other organization(s)	1b <input checked="" type="checkbox"/>	x
c Gift, grant, or capital contribution from other organization(s)	1c <input checked="" type="checkbox"/>	x
d Loans or loan guarantees to or for other organization(s)	1d <input checked="" type="checkbox"/>	x
e Loans or loan guarantees by other organization(s)	1e <input checked="" type="checkbox"/>	x
f Sale of assets to other organization(s)	1f <input checked="" type="checkbox"/>	x
g Purchase of assets from other organization(s)	1g <input checked="" type="checkbox"/>	x
h Exchange of assets	1h <input checked="" type="checkbox"/>	x
i Lease of facilities, equipment, or other assets to other organization(s)	1i <input checked="" type="checkbox"/>	x
j Lease of facilities, equipment, or other assets from other organization(s)	1j <input checked="" type="checkbox"/>	x
k Performance of services or membership or fundraising solicitations for other organization(s)	1k <input checked="" type="checkbox"/>	x
l Performance of services or membership or fundraising solicitations by other organization(s)	1l <input checked="" type="checkbox"/>	x
m Sharing of facilities, equipment, mailing lists, or other assets	1m <input checked="" type="checkbox"/>	x
n Sharing of paid employees	1n <input checked="" type="checkbox"/>	x
o Reimbursement paid to other organization for expenses	1o <input checked="" type="checkbox"/>	x
p Reimbursement paid by other organization for expenses	1p <input checked="" type="checkbox"/>	x
q Other transfer of cash or property to other organization(s)	1q <input checked="" type="checkbox"/>	x
r Other transfer of cash or property from other organization(s)	1r <input checked="" type="checkbox"/>	x

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

(1)	(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved
(2)			
(3)			
(4)			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership (Complete if 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 assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.