

## See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



		,						·			
Forr Depa	m 990. artment of the Treas	sury e	Under section 501( ► The organization m	nay have to use a copy of	he Internal Revenue rivate foundation) this return to satisfy st	Code (except blace ate reporting require	_	Op	MB No 1545-0047 2009 Den to Public Inspection		
Α	For the 2009 caler	ndar yea	, or tax year beginning	05/01/09 , an <u>d e</u>	nding 04/30/	<u>'10</u>					
	Address change	Please use IRS label or	•	les Town Lodge   l Order of Moos			D Employer identification numbe				
	Name change	print or	Doing Business As		- <del></del>		55-	-0332	759		
$\equiv$	Initial return    type.   Number and street (or P O box if mail is not delivered to street address)   Room/suite   E Telephone number   304-725-5114										
	i emination	Specific   Instruc- tions.	City or town, state or country, a Charles Town		414		G Gross reco	eipts \$	636,161		
	Amended return  Application pending  F Name and address of principal officer  Donald E Ainsworth  PO Box 516  Charles Town  WV 25414  H(a) Is this a group return for affiliates?  H(b) Are all affiliates included?  If 'No,' attach a list (see instructions)										
	Tax-exempt status	<del>,</del>	501(c) ( <b>8</b> ) <b>◄</b> (insert i	no ) 4947(a)(1) or	527		4				
	Website: ► N/ Type of organization		ration Trust Association	n Other ►		L Year of formation 1	H(c) Group 944		umber ► 0002 legal domicile WV		
<u>,                                    </u>	art. Sur	mmary									
Activities & Governance	The I benev year-	odge volen roun	organization's mission or mounites its members and charity.	ers in the bonds This is accompl sial & recreation	ished through	na es.			·		
Ğ	2 Check this			ntinued its operations or dis	sposed of more than 2	!5% of its net asset		10			
•ජ ර		_	nembers of the governing boo				3	12 12			
ties			dent voting members of the	governing body (Part VI, III	ne 1b)		4	20			
Ę			ployees (Part V, line 2a)	- \			5	12			
ĕ			unteers (estimate if necessa	• •			6	12	<del></del>		
	•		ed business revenue from Pa				7a	<del></del>	0		
	D Net unrelat	tea busi	ess taxable income from For	rm 990-1, line 34		Prior Yea	7b	C	urrent Year		
_	8 Contributio	ns and	rants (Part VIII, line 1h)				5,336		arrent rear		
nue			venue (Part VIII, line 2g)				5,386		632,289		
Revenue	_		(Part VIII, column (A), lines 3	3. 4. and 7d)			4,476		3,872		
ž			t VIII, column (A), lines 5, 6d	•							
	ł		lines 8 through 11 (must eq	·	ine 12)	85	5,198		636,161		
	l		amounts paid (Part IX, colum	n (A) lines 1 2			9,722		81,505		
			or members (Part IX, column		$D_{\alpha}$						
v	15 Salaries, of	ther con	pensation, employee benefit	s,(Part IX, column (A), line	s 5–10))	14	5,413	·	136,050		
penses	16a Profession	al fundra	ising fees (Part IX, column (	A) Nine 1/16/\R 2 2 20							
bei			penses (Part IX, column (D)		ျှ		3	ALL STATES	<b>企业工程的</b>		

<sup>2</sup> 교 22도 Net	assets or fund balances Subtract line 21 from line 20	<u> </u>	283,857	265,676
Part	Signature Block			
ED APR 0 1	Under penalties of penjury, I declare that I have examined this return, in and belief, it is true correct, and complete. Declaration of preparer (other signature of officer)  Signature of officer  Type or print name and title	ncluding accompanying schedules and ler than officer) is based on all informations.	ation of which preparer has any	my knowledge knowledge /S///
Paid Preparer's	Preparer's signature Z	PLLC Date	Check if self-employed	Preparer's identifying number (see instructions) P00123395 55-0727904
100 kQ 1	Firm's name (or vours ) 11001104 & VICKEIS,	E TITO	i Ein ▶	JJ-012130.

25414

Preparer's Use Only

17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f),

19 Revenue less expenses Subtract line 18 from line 12

18 Total expenses Add lines 13-17 (must equal Part-IX-column (A), time 2:

Firm's name (or yours if self-employed), address, and ZIP + 4

20 Total assets (Part X, line 16)

21 Total liabilities (Part X, line 26)

Mumaw & Vickers, PLLC 102 West Liberty St

Charles Town, WV

EIN >

533,997

749,132

106,066

285,220

1,363

Beginning of Current Year

▶ 304-725-7451

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

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

X Yes Form 999 (2009)

436,787

654,342

-18,181

267,250

1,574

End of Year

Form 990 (2009) (	Charles Town	Lodge Number 948	55-0332759		Page 2
Part III Sta	atement of Program	Service Accomplishments			
	be the organization's miss				
The Lodg	re unites its	members in the bond	s of Fraternity		
benevole	ence and char	ity. This is accomp	lished through a		
year-rou	nd schedule	of social & recreati	onal activities.		
_					
2 Did the organi	ization undertake any sigi	nificant program services during the year v	which were not listed on		
the prior Form	n 990 or 990-EZ?				Yes X No
•	ribe these new services o	n Schedule O			
		or make significant changes in how it con-	ducts, any program		
services?	nzation ocuso conducting,	or make digitimed in direction is con-	audic, any program		Yes X No
• • • • • • • • • • • • • • • • • • • •	ribe these changes on Sc	hadula O			
	•	nents for each of the organization's three la	oranet program convices by expenses		
		zations and section 4947(a)(1) trusts are n		and	
•			•	ii id	
allocations to	others, the total expenses	s, and revenue, if any, for each program se	егисе геропео		
	· · · · · · · · · · · · · · · · · · ·	6F4 242	01 FOF \ 10		
4a (Code	) (Expenses \$	654,342 including grants of		enue \$	)
		members in the bond			•
		ity. This is accomp			
		of social & recreati	onal activities		
for the	member and t	heir families.			
				•	
			•		
Ab (Codo	) (Expenses \$	uncluding grants of	F # 1 / (Pay	onuo f	
4b (Code	) (Expenses \$	including grants of	) (Rev	enue \$	•
	•				
,					
	•				
4c (Code	) (Expenses \$	including grants of	\$ ) (Rev	enue \$	
•	, , ,		, ,	•	•
				•	
					•
				•	
4d Other program	n services (Describe in S	chedule O)	-		
(Expenses \$			\		`
	<u> </u>	including grants of \$	) (Revenue \$		<u> </u>
	m service expenses ▶	654,342	) (Revenue \$		

						Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"						
	complete Schedule A			<u> </u>	1		<u>X</u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?			-	2	<del> </del>	X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			ŀ			
	candidates for public office? If "Yes," complete Schedule C, Part I			-	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete					İ	
_	Schedule C, Part II  Section 504(a)(4) 504(a)(5) and 504(a)(5) argenizations to the experience of the			F	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				_		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			┝	5		
U	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"				1	- 1	
	complete Schedule D, Part I				6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			-	Ť		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II				7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"						
	complete Schedule D, Part III				8		X
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			Ĺ	9		_X_
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			<u> </u>	10		X
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			3	11	anderon	<b>X</b>
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			200			
	Schedule D, Part VI			13.0			
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			32			
	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			7			
•	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.						學
	Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets			8	3.6kg		
•	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			207		<b>*</b>	
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			1252			
•	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			200		200	
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			53 s K	(2)		
	Schedule D, Parts XI, XII, and XIII				12		X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?		Yes	NO S			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	12A		_X_			经营
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E			.  -	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?			Ľ	4a		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			Ľ	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any						37
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II			-	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance				46		v
17	to individuals located outside the United States? If "Yes," complete Schedule F, Part III  Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			-	<u>16</u>		<u> </u>
11	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I				17	- 1	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			F	<del>''</del> -		
. •	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II				18	- 1	x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		-				<del></del> _
	If "Yes," complete Schedule G, Part III				19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H			<u> </u>	20		X
					Form	990	(2009)

			Yes	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	X	
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		X
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
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			3.7
	24b through 24d and complete Schedule K. If "No," go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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 250	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	(-), -, -, -, -, -, -, -, -, -, -, -, -, -,			
<b>L</b>	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	254		
26	990-EZ? If "Yes," complete Schedule L, Part I	25b		
20	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			x
27	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II  Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	26		
41	substantial contributor, or a grant selection committee 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 transaction with one of the following parties (see Schedule L,	12 1 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2		3637
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):	Service Control		
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	J. 7 - 4	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
_	Schedule L, Part IV	28b		X
С	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		х
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? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
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		X
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		X
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		1	
	19? Note. All Form 990 filers are required to complete Schedule O	38		X
		Form	990	(2009)

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

Page 5 Part V Statements Regarding Other IRS Filings and Tax Compliance Yes No Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns Enter -0- if not applicable b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax 20 Statements, filed for the calendar year ending with or within the year covered by this return 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) Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 3a If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b 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 Does the organization have annual gross receipts that are normally greater than \$100,000, and did the X 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 Organizations that may receive deductible contributions under section 170(c). 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 If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 3,6 If "Yes," indicate the number of Forms 8282 filed during the year Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 7e benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 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. Did the organization make any taxable distributions under section 4966? 9a 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 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b h Section 501(c)(12) organizations. Enter Gross income from members or shareholders 11a а Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ) 11b Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a

55-0332759 Form 990 (2009) 'Charles Town Lodge Number 948 Page 6 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 Enter the number of voting members of the governing body 12 1b ь Enter the number of voting members that are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2 3 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? Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a material diversion of the organization's assets? 5 X 6 Does the organization have members or stockholders? 6 Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7a X Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X The governing body? 8a X 8b Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No 10a X 10a Does the organization have local chapters, branches, or affiliates? 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 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the 11 X 11 1 2 2 Describe in Schedule O the process, if any, used by the organization to review this Form 990 Does the organization have a written conflict of interest policy? If "No," go to line 13 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b 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 13 Does the organization have a written whistleblower policy? 13 Does the organization have a written document retention and destruction policy? 14 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a b Other officers or key employees of the organization 15b 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? 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 status with respect to such arrangements? Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed ▶ None	
18	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 Upon request	
19	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	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	
	empiration & Mumay f Victors PLIC 102 West Liberty Stre	

Charles Town

WV 25414

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
- 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

(A) Name and Title	(B) Average	Pos	ition (		C) k all t	hat ap	(vlac	(D) Reportable	(E) Reportable	( <b>F</b> ) Estimated
	hours per week	or director	,	Officer				compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Faron K Fridley										
Jr Past Gov	5.00	X	<u> </u>			<u> </u>		0	0	0
Garland L Whetzel	5.00	x						o	o	0
Prelate Sidney A Spangler		<b>├</b> ^	├	├	<del> </del>			<u> </u>		<u>_</u>
	5.00	x						О	o	0
Trustee Jimmy Baugher	3.00	┢	-	┝					0	
Trustee	5.00	x			Ì			o	0	0
Ronald Aronhalt	3.00	_		<u> </u>		-		<u>_</u>		
Trustee	5.00	x						О	0	0
Marvin Tanner	<u> </u>	<del> </del>			<u> </u>					
Sgt at Arms	5.00	X						0	0	0
Gregory S Dillow										
Inner Guard	5.00	X	ŀ	}	}			0	0	0
James R Cain, Jr										
Outer Guard	5.00	X						0	0	0
Donald Ainsworth		1								
Governor	10.00	<u></u>		X				0	0	0
James Mangold										
Jr Governor	10.00	<u> </u>		X		$oxed{oxed}$		0	0	0
C Glenn Greenstre						1		_	_	
Treasurer	10.00	ļ		X				0	0	0
Charles D Longerb										
Administrator	10.00			X				0	0	0
		-								
ı										

Form **990** (2009)

		Lown road							55-033				P	age 8
<u>Pa</u>		T	stees	, Ke			yees	, an	d Highest Compensated E					
	Name and Title	(B) Average hours per week			(chec	_			(D) Reportable compensation	(E) Reportable compensation		(F) Estima amoun	ted t of	
		week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	or a	othempens from t ganizand rela ganiza	ation he ation ated	
											· · · · · · · · · · · · · · · · · · ·			
							_							
						-		-						
				_		_								
			<u> </u>	-			-	-						
				-			-							
				-			-	-						
				_										
				-	-									
							-						·	
1b	Total							▶						
2	Total number of individuals (in reportable compensation from	•		to th	ose	liste	abo	ve)	who received more than \$1	00,000 in			· ·	
3	Did the organization list any for employee on line 1a? If "Yes,"								ee, or highest compensated		æ	3	Yes	No X
4	For any individual listed on line the organization and related o	e 1a, is the sum o	f rep	ortab	ole co	mpe	ensat	ion a			1100			
5	individual  Did any person listed on line 1 services rendered to the organ										2	4 5 5	で表	X AAA X
Sec	tion B. Independent Contract	ors												
1	Complete this table for your fix compensation from the organi	zation	nsate	d inc	depe	nder	t cor	ntrac						
	Name and	(A) d business address							Descrip	(B) tion of services		Co	(C) mpensat	ion
	-				· · · <u>· · · · · · · · · · · · · · · · </u>			-			-			
													<del></del> -	
			·										<del></del>	
	<del></del>				<u>.</u>				· · · · · · · · · · · · · · · · · · ·					
2	Total number of independent of more than \$100,000 in competitions.						to th	ose	listed above) who received	<del></del>	416.00	0	医主态 行动流	

DAA

Pa	rt V	III Statement of Reve	nue					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
इ इ	1a	Federated campaigns	1a		を行うのできる。	THE STATE OF THE PARTY OF THE P	場合は異なる。	で記述では記り
Contributions, gifts, grants and other similar amounts	ь	Membership dues	1b					<b>温暖</b>
9,5	c	Fundraising events	1c					
ar a	Ч	Related organizations	1d			· · · · · · · · · · · · · · · · · · ·		
P, E	٥	Government grants (contributions)	1e			· 1000年。第2	The state of the s	
S.S		All other contributions, gifts, grants,	_ <del>.</del> `			The state of the s		
e Set	'	and similar amounts not included above	1f	1				
	_	Monopole contributions individed in lines 1 o 1		\$				
a S	g	Noncash contributions included in lines 1a-1	17	•	10 7 16 15 - 16 16 15 15 15 15 15 15 15 15 15 15 15 15 15			
	h	Total. Add lines 1a-1f		Busn. Cod	The Control of the Co	5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	0.42-0-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2	子子是是是一个人的是一个人的。
Ž	2-	B		Busn. Cou	594,123	594,123	A THE SECTION OF SEC.	L SERVERS OF EXPENSES
Š	2a	Program Service Reve	enue	ļ	38,166	<del></del>		<del></del>
9	b			<del></del>	38,166	38,100	<u> </u>	
`₹	, c			<del></del>		<del> </del>		
Š	a			}	<del> </del>			
檀	8			ļ	+			
Program Service Revenue	ì	All other program service reven	iue	L	622 200	<b>医生物性性心脏性的</b>	1 1945 TO 11 11 12 11 11 12 12 12 12 12 12 12 12	2745 - 1 27 B 2 2 2 2 2 2 2 1 2 2 2
	9	Total. Add lines 2a-2f		<u> </u>	632,289	<b>医型型性性的性性的</b>	1. 過度以及	A COLOR AD PORT TO CHEST
	3	Investment income (including d	ividend	ds, interest, and	2 070		1	3 072
	١.	other similar amounts)			3,872		<del> </del>	3,872
	4	Income from investment of tax-	exemp	ot bond proceeds		ļ	<del></del>	
	5	Royalties			nt state of the second of the second of the	147764 22 500 200	Justine March and April 18 18 18 18 18 18 18 18 18 18 18 18 18	AND THE PROPERTY CONTRACTOR
		(ı) Real		(II) Personal			<b>建筑等等的</b>	
	6a	Gross Rents						
	b	Less rental exps				是外面是		
	C	Rental inc or (loss)		L	一种的主要的	是"是我们是这个是是	<b>三等以及了可用的的对数</b>	記事が できまかかけられる
	d 72	Net rental income or (loss) Gross amount from (i) Securities		<u> </u>	a seed that the arts that the sales	Table To a track the second William	The second of th	E SIN HOUSE TO STORY OF THE CO
	'a	sales of assets (i) Securities	` 	(II) Other				
		other than inventory		<u> </u>				
	b	Less cost or other						
		basis & sales exps		ļ		<b>经验证证证</b>		
	С	Gain or (loss)		<u> </u>		。 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		
	d	Net gain or (loss)			75. 75. 75. 75. 75. 75. 75. 75. 75. 75.		- Ta 27512 - Ta 27612 - Ta 27612	4-151-51-15
a	8a	Gross income from fundraising even	nts					
2	}	(not including \$				是是是是		
ě		of contributions reported on line 1c)						
E .	1	See Part IV, line 18	а					
Other Reven		Less direct expenses	b		<b>一种,我们是这种的</b>			<b>基础性的</b>
Ų	ι	Net income or (loss) from fundr	- (	events	1111		160 60 000 000 000	
	9a	Gross income from gaming activities	3					
		See Part IV, line 19	а					是是是是
	b	Less direct expenses	b		一 一 一 一 一 一 一 一 一 一 一 一 一 一 一 一 一 一 一	<b>建设编制通知</b>		では、不可以 できる
	С	Net income or (loss) from gamin	ng acti	vities <b>&gt;</b>		<u> </u>		
	10a	Gross sales of inventory, less					1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
		returns and allowances	а					
	ь	Less cost of goods sold	b		了多数是一个			<b>《图图》的图像</b>
	С	Net income or (loss) from sales	of inve			<u> </u>		
		Miscellaneous Revenue		Busn. Cod	e)特別的基礎的	<b>注明第4款的</b>	Target State State	學的學學學
	11a							
	b							
	С							
	ď	All other revenue						
	е	Total. Add lines 11a-11d		<u> </u>		達型聲通傳語	是空间的问题	THE STATE OF
	12	Total Revenue. See instruction	ıs.		636,161	632,289	0	3,872

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,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
_7b,	, 8b, 9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to governments and	04 50-			
_	organizations in the U.S. See Part IV, line 21	81,505		Land the said of t	A CONTRACTOR OF THE PROPERTY O
2	Grants and other assistance to individuals in				
•	the U.S. See Part IV, line 22	<u> </u>		Carlo Antonomia and Antonomia	The same and the s
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
A	Benefits paid to or for members		<del></del>		The state of the s
5	Compensation of current officers, directors,			4. 17. 13. 14 st. 43 st. 43 1. 12. 12. 12. 12. 12. 12. 12. 12. 12.	Charles and the Market Control of the
J	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 salanes and wages	122,287			
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				<u> </u>
9	Other employee benefits				
10	Payroll taxes	13,763			
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting	12,945		<u> </u>	
d	, 5		n 1 - 5122 222 5 7 5 7 7 7 7 7 7 7 7 7 7 7 7 7 7	SANT IN MARKET MARKET THERE	
е	Professional fundraising services See Part IV, line 17		がいる。	<b>网络</b> 为此党还是是	
f	Investment management fees		<u> </u>		
9		1 510		<u> </u>	<del></del>
12	Advertising and promotion	1,518 1,126			
13	Office expenses	1,120			
14	Information technology				<del></del>
15 16	Royalties Occupancy	54,811	<del></del>		
17	Travel	15,542			
18	Payments of travel or entertainment expenses		<del></del>		
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	540			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	8,786		Manifest and	
		[李美] 表音響			
24	Other expenses Itemize expenses not		经数据的		
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below )	Control of the contro	を表現がれている。 は、 は、 は、 は、 は、 は、 は、 は、 は、 は、		以及第一分的等於在於黃色學者以
а	Purchases	156,568			
b	Band Expense	34,025	<del> </del>		
c C	Community Service Expense Dues & Subscriptions	34,009 32,381			
d	Gaming Expense	31,104			
e f	All other expenses	53,432			
25	Total functional expenses. Add lines 1 through 24f	654,342		<del></del>	<del></del>
26	Joint costs. Check here	334,342			
_,	SOP 98-2 Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and	İ			
	fundraising solicitation				
DAA					Form 990 (2009)

Par	t X	Balance Sheet				T
				(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing		5,000	1	5,000
	2	Savings and temporary cash investments		280,220	_	262,250
	3	Pledges and grants receivable, net			3	202,200
		Accounts receivable, net			4	
ſ		Receivables from current and former officers, directors, tru	istees kev	<b>医维尔尔斯拉氏系列的</b>	75°5'5	ENTE CONTROL OF SELVE
1	_	employees, and highest compensated employees Comple				
ľ		Schedule L		Se harden and the same	5	Constitution of the same to present it is the
	6	Receivables from other disqualified persons (as defined up	nder section	2000年1月1日		10000000000000000000000000000000000000
ľ		4958(f)(1)) and persons described in section 4958(c)(3)(B			The state of	
- 1		Part II of Schedule L	, ==	Colonia Tarana	6	Committee and the same of the same in
Assets	7	Notes and loans receivable, net			7	
SS		Inventones for sale or use		<u> </u>	8	
۱ ۲		Prepaid expenses and deferred charges			9	
- 1		Land, buildings, and equipment cost or	[ ]		T. 37.	<b>经验证证证</b>
		other basis Complete Part VI of Schedule D	10a			
1	b	Less accumulated depreciation	10b	Transfer of Shirms 6 and 8 5 500	10c	Miles of Section of Lands Section 1
1		Investments—publicly traded securities		<del></del>	11	
		Investments—other securities See Part IV, line 11			12	
1		Investments—program-related See Part IV, line 11			13	
1		Intangible assets			14	
1		Other assets See Part IV, line 11			15	
1		Total assets. Add lines 1 through 15 (must equal line 34)		285,220	16	267,250
1		Accounts payable and accrued expenses	<del></del>	1,363	17	1,574
1		Grants payable			18	
1	9	Deferred revenue			19	
2	0	Tax-exempt bond liabilities			20	
g 2	1	Escrow or custodial account liability Complete Part IV of S	Schedule D		21	
<u>.</u> ≝   ₂	2	Payables to current and former officers, directors, trustees	s, key		NO.	
<u>.</u>		employees, highest compensated employees, and disqual	ified			
Liabilities		persons Complete Part II of Schedule L			22	
2	3	Secured mortgages and notes payable to unrelated third p	parties		23	
2	4	Unsecured notes and loans payable to unrelated third part	ties		24	
2	5	Other liabilities Complete Part X of Schedule D			25	
2		Total liabilities. Add lines 17 through 25		1,363	26	1,574
S		Organizations that follow SFAS 117, check here ▶ X	and	是潜脉系统		
<u>ک</u>		complete lines 27 through 29, and lines 33 and 34.			200	
Balances	7	Unrestricted net assets		283,857	27	265,676
<u>ო</u>   2	8	Temporarily restricted net assets			28	
[2	9	Permanently restricted net assets			29	
교		Organizations that do not follow SFAS 117, check here		700		
5		and complete lines 30 through 34.			1	
<b>છ</b>   30	0	Capital stock or trust principal, or current funds			30	
S   3	1	Paid-in or capital surplus, or land, building, or equipment for	und		31	
<b>X</b> 3:	2	Retained earnings, endowment, accumulated income, or o	ther funds		32	
Net Assets or Fund	3	Total net assets or fund balances		283,857	33	265,676
<b>Z</b> 3	4	Total liabilities and net assets/fund balances		285,220	34	267,250

Form **990** (2009)

Form 990 (2009)

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

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, lines 21 or 22.

OMB No 1545-0047

▶ Attach to Form 990.

Open to Public 2009

ž Grants and Otner Assistance to Governments and Organizations in the Office Carbon Compression one recipient received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Research for Cure Medical Services (h) Purpose of grant or assistance X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to 50 Employer identification number non-cash assistance (g) Description of 55-0332759 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (d) Amount of cash grant (e) Amount of non-cash (book, FMV, appraisa, assistance other) 10,000 7,000 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part IV and Schedule I-1 (Form 990) if additional space is needed For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. DAA (c) IRC section if applicable m ന 948 55-0778553 13-1788491 General Information on Grants and Assistance Charles Town Lodge Number (b) EIN Enter total number of section 501(c)(3) and government organizations the selection criteria used to award the grants or assistance? Loval Order of Moose 25438 WV 26501 (a) Name and address of organization Eastern Panhandle Free Clinic Enter total number of other organizations 1212 North Mildred Street American Cancer Society or government 122 South High Street Name of the organization Morgantown Part L Part II:

Schedule I (Form 990) 2009

€	١
	α
	Ċ
	π
ĺ	1

Schedule I (Form 990) 2009 Charles Town Lodge Number 948 55-0332759

• 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.

	וו מתמווסוו	יון סוון ססס/ וו מחחוו	ulai space is ileeded.			•
	(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(e) Method of valuation (book, (f) Description of non-cash assistance
		recipients	cash grant	non-cash assistance	FMV, appraisal, other)	•
			-			
Partil	Supplemental Information. Complete this part to provide the information required in Part   line 2 and any other additional information	omplete this part to	provide the informati	on required in Part I	line 2 and any other addit	tional information

## SCHEDULE O (Form 990)

## 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 - Inspections

Department of the Treasury Internal Revenue Service Name of the organization

Charles Town Lodge Number 948 Loyal Order of Moose

Employer identification number 55-0332759

Form 990, Part I, Line 6

Serve as board members and oversee daily operations.

Form 990, Part VI, Line 6 - Classes of Members or Stockholders Members

Form 990, Part VI, Line 7a - Election of Members and Their Rights Yes

Form 990, Part VI, Line 7b - Decisions Subject to Approval of Members Yes, Members

Form 990, Part VI, Line 11a - Organization's Process to Review Form 990 The Board of Directors review the Form 990 before it is filed.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public