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Short Form
Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-1150

2009

Open to Public
Inspection

► Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form
► The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2009 calendar year, or tax year beginning OCT 1, 2009 and ending SEP 30, 2010

B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization Custos Morum Lodge #42 I.O.O.F. Number and street (or P.O. box, if mail is not delivered to street address) A. Karnis 686 Mason Road City or town, state or country, and ZIP + 4 Milford, NH 03055	D Employer identification number 02-6006798
	Room/suite	E Telephone number 603-673-3090
		F Group Exemption Number ►

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)

G Accounting method: Cash Accrual
Other (specify) ►

I Website: ► n/a

H Check ► if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)J Tax-exempt status (check only one) — 501(c) (8) (insert no.) 4947(a)(1) or 527
K Check ► if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$500,000 or more, file Form 990 instead of Form 990-EZ ► \$ **60724.**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

Revenue	1 Contributions, gifts, grants, and similar amounts received	1
	2 Program service revenue including government fees and contracts	2
	3 Membership dues and assessments	3
	4 Investment income	4
	5a Gross amount from sale of assets other than inventory Stmt 3	5a 11659.
	b Less: cost or other basis and sales expenses	5b 16736.
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c -5077.
	6 Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here ► <input type="checkbox"/>	
	a Gross revenue (not including \$ REVENUE) of contributions reported on line 1)	6a 997.
b Less: direct expenses other than fundraising expenses	6b 	
c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c 997.	
7a Gross sales of inventory, less returns and allowances	7a 	
b Less: cost of goods sold	7b 	
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c 	
8 Other revenue (describe ► Other Inc)	8 306.	
9 Total revenue Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9 43988.	
Expenses	10 Grants and similar amounts paid (attach schedule)	10
	11 Benefits paid to or for members	11
	12 Salaries, other compensation, and employee benefits	12
	13 Professional fees and other payments to independent contractors	13 675.
	14 Occupancy, rent, utilities, and maintenance	14 4361.
	15 Printing, publications, postage, and shipping	15 136.
	16 Other expenses (describe ► See Statement 1)	16 33162.
	17 Total expenses. Add lines 10 through 16	17 38334.
	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18 5654.
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19 689005.
20 Other changes in net assets or fund balances (attach explanation)	20 25713.	
21 Net assets or fund balances at end of year. Combine lines 18 through 20	21 720372.	

Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)	(A) Beginning of year	(B) End of year	
	22 Cash, savings, and investments	140797.22	136272.
	23 Land and buildings	130627.23	129591.
	24 Other assets (describe ► See Statement 2)	417581.24	454509.
	25 Total assets	689005.25	720372.
	26 Total liabilities (describe ►)	0.26	0.
	27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	689005.27	720372.

932171
02-08-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2009)

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

33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity
 34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes
 35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.

a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?

b If "Yes," has it filed a tax return on **Form 990-T** for this year?

36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Sch. N

37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ► 37a 0.

b Did the organization file **Form 1120-POL** for this year?

38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?

b If "Yes," complete Schedule L, Part II and enter the total amount involved

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

a Initiation fees and capital contributions included on line 9

b Gross receipts, included on line 9, for public use of club facilities

40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:

section 4911 ► N/A ; section 4912 ► N/A ; section 4955 ► N/A

b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I

c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958

d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization

e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T

41 List the states with which a copy of this return is filed. ► NH

42a The organization's books are in care of ► Al Karnis Telephone no. ► 603-673-4467
 Located at ► 686 Mason Road, Milford, NH ZIP + 4 ► 03055

b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?

If "Yes," enter the name of the foreign country: ► _____
 See the instructions for exceptions and filing requirements for **Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts**

c At any time during the calendar year, did the organization maintain an office outside of the U.S.?

If "Yes," enter the name of the foreign country: ► _____

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

44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ

45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ

	Yes	No
33	X	
34	X	
35a	X	
35b	N/A	
36	X	
37b	X	
38a	X	
38b	N/A	
39a	N/A	
39b	N/A	
40b	N/A	
40e		X

	Yes	No
42b	X	
42c	X	

	Yes	No
44	X	
45	X	

Form 990-EZ (2009)

Part VI

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

		Yes	No
46	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	46	
47	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	47	
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a	
b	If "Yes," was the related organization a section 527 organization?	49b	
50	Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."		

(a) Name and address of each employee paid more than \$100,000 N/A	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances

f Total number of other employees paid over \$100,000	►				
51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."					
N/A					
(a) Name and address of each independent contractor paid more than \$100,000					

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

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge		
	5/12/11		
Signature of Officer		Date	
► Alfred A. Bernis, Treasurer		Type or print name and title	
Paid Preparer's Use Only	Preparer's signature ►	5/11/11	Check if self-employed ► <input checked="" type="checkbox"/>
	Janet L. Spalding, CPA		Preparer's identifying number (See instr.)
Firm's name (or yours if self-employed), address, and ZIP + 4 ► 454 Route 13 S. Milford, NH 03055		EIN ►	
		Phone no. ►	603-249-9164

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

► Yes No

Form 990-EZ (2009)

Form 990-EZ	Other Expenses	Statement 1
Description		Amount
Program Exp		5176.
Scholarships		1500.
Grand Lodge Assessment		969.
Donations		5975.
Death Benefits and Relief		1500.
Fees Other		22.
Annual Filing Fee		75.
Supplies		23.
Telephone		758.
Maintenance & Repairs		3095.
Water/Sewer/Utilities		4387.
RE Taxes		9257.
Inspections/permits		425.
Total to Form 990-EZ, line 16		33162.

Form 990-EZ	Other Assets	Statement 2
Description	Beg. of Year	End of Year
Mutual Funds	382992.	422981.
Securities	11633.	8978.
Cash Account	22956.	22550.
Total to Form 990-EZ, line 24	417581.	454509.

Form 990-EZ	Gain (Loss) From Publicly Traded Securities		Statement 3	
Description	Gross Sales Price	Cost or Other Basis	Expense of Sale	Net Gain or (Loss)
	11659.	16736.	0.	-5077.
To Form 990-EZ, line 5	11659.	16736.	0.	-5077.

Form 990-EZ	Other Changes in Net Assets or Fund Balances	Statement	4
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Description	Amount
Net Unrealized Gains	25713.
Total to Form 990-EZ, line 20	25713.

Form 990-EZ	Occupancy, Rent, Utilities and Maintenance	Statement	5
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Description	Amount
Depreciation	1036.
Other Expenses	3325.
Total to Form 990-EZ, line 14	4361.

Form 990-EZ	Rental Income	Statement	6
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Kind and Location of Property	Activity Number	Gross Rental Income
Building, Milford NH	1	29388.
Total included on Form 990-EZ, Part I, line 4		29388.

FORM 990-EZ

Information Regarding Transfers
Associated with Personal Benefit Contracts

Statement 7

A) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? [] Yes [X] No

B) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . [] Yes [X] No

Application for Extension of Time To File an
Exempt Organization Return

► File a separate application for each return.

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box
- If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form)



Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for *Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only



All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Type or print	Name of exempt organization Custos Morum Lodge #42 I.O.O.F.	Employer identification number 02-6006798
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P O box, see instructions. Janet Spalding, CPA 454 Rt 13S	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions Milford, NH 03055	

Enter the Return code for the return that this application is for (file a separate application for each return)

0 3

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

Al Karnis

- The books are in the care of ► 686 Mason Road - Milford, NH 03055

Telephone No ► 603-673-4467 FAX No ► 

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ► If it is for part of the group, check this box ► and attach a list with the names and EINs of all members the extension is for

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until

May 15, 2011, to file the exempt organization return for the organization named above. The extension

is for the organization's return for:

► calendar year or► tax year beginning OCT 1, 2009, and ending SEP 30, 2010.2 If the tax year entered in line 1 is for less than 12 months, check reason. Initial return Final return Change in accounting period

3a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$ <u>0.</u>
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$ <u>0.</u>
c	Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3c	\$ <u>0.</u>

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

LHA For Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 1-2011)