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## Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

2009

Open to Public  
Inspection

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

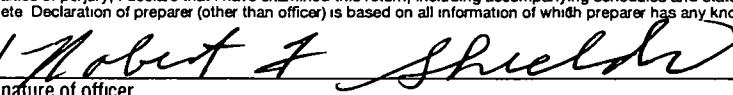
A For the 2009 calendar year, or tax year beginning OCT 1, 2009 and ending SEP 30, 2010

<b>B</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 <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>INDEPENDENT ORDER OF ODD FELLOWS</b> <b>BETHESDA LODGE #30</b> <b>Doing Business As</b> Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>C/O ROBERT SHIELDS 441 EAST 5TH ST</b> City or town, state or country, and ZIP + 4 <b>SOUTH BOSTON, MA 02127</b>			<b>D</b> Employer identification number  <b>04-1086363</b>  <b>E</b> Telephone number <b>617-268-6492</b>  <b>G</b> Gross receipts \$ <b>3,944,034.</b>  <b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)  <b>H(c)</b> Group exemption number ►
	See Specific Instructions			
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c) (8) ► (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527				
<b>J</b> Website: ► <b>N/A</b>				
<b>K</b> Form of organization: <input type="checkbox"/> Corporation <input type="checkbox"/> Trust <input checked="" type="checkbox"/> Association <input type="checkbox"/> Other ►				<b>L</b> Year of formation: <b>1843</b> <b>M</b> State of legal domicile: <b>MA</b>

## Part I Summary

<b>Activities &amp; Governance</b>	1 Briefly describe the organization's mission or most significant activities <b>FRATERNAL ORGANIZATION</b> <b>BENEFITTING CHARITIES AND DECEASED SPOUSES OF MEMBERS UNDER IRS</b>		
	2 Check this box ► <input type="checkbox"/> 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)	3	0
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	0
	5 Total number of employees (Part V, line 2a)	5	0
	6 Total number of volunteers (estimate if necessary)	6	0
7a Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0.	
b Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
<b>Revenue</b>	8 Contributions and grants (Part VIII, line 1h)	676.	70,308.
	9 Program service revenue (Part VIII, line 2g)	72,418.	281,562.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	73,094.	351,870.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	45,406.	48,100.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,600.	3,600.
		117,053.	102,539.
<b>Expenses</b>	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	166,059.	154,239.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	-92,965.	197,631.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	Beginning of Current Year	End of Year
	16a Professional fundraising fees (Part IX, column (A), line 11e)	7,145,881.	7,745,148.
	b Total fundraising expenses (Part IX, column (D), line 25)	17,500.	12,500.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	7,128,381.	7,732,648.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)			
19 Revenue less expenses. Subtract line 18 from line 12			
20 Total assets (Part X, line 16)			
21 Total liabilities (Part X, line 26)			
22 Net assets or fund balances Subtract line 21 from line 20			

## Part II Signature Block

<b>Sign Here</b>	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 <b>ROBERT SHIELDS, TREASURER</b> Type or print name and title		
	Date <b>10-19-10</b>		

<b>Paid Preparer's Use Only</b>	Preparer's signature ►  <b>GERALD P. EIDELMAN</b> <b>43 DWIGHT STREET</b> <b>BROOKLINE, MA 02446</b>	Date <b>10/14/10</b>	Check if self-employed ► <input checked="" type="checkbox"/>	Preparer's identifying number (see instructions)
				EIN ►

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

 Yes  No

INDEPENDENT ORDER OF ODD FELLOWS  
BETHESDA LODGE #30

**Form 990 (2009)**

04-1086363 Page 2

### **Part III Statement of Program Service Accomplishments**

**1 Briefly describe the organization's mission:**

**FRATERNAL ORGANIZATION BENEFITTING CHARITIES AND DECEASED SPOUSES OF  
MEMBERS UNDER IRS SECTION 501(c) 8**

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 reported.

4a (Code ) (Expenses \$ 39,300. including grants of \$ ) (Revenue \$ )  
**CHARITABLE CONTRIBUTIONS**

4b (Code: ) (Expenses \$ 8,800. including grants of \$ ) (Revenue \$ )  
**SPECIFIC ASSISTANCE TO INDIVIDUALS**

4c (Code: ) (Expenses \$ 1,081. including grants of \$ ) (Revenue \$ )  
**DEATH BENEFITS**

**4d Other program services (Describe in Schedule O)**

(Expenses \$ **1,000** including grants of \$ **1,000**)

) (Revenue \$)

1

4e Total program service expenses ► \$ 49,181.

Form 990 (2009)

**INDEPENDENT ORDER OF ODD FELLOWS**  
**BETHESDA LODGE #30**

Form 990 (2009)

04-1086363 Page 3

**Part IV Checklist of Required Schedules**

	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	1	X
2 Is the organization required to complete Schedule B, Schedule of Contributors?	2	X
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	3	X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	
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	6	X
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	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	9	
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	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 <ul style="list-style-type: none"> <li>• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.</li> <li>• 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.</li> <li>• 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</li> <li>• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX</li> <li>• Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.</li> <li>• 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.</li> </ul>	11	X
12 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12	X
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	12A	X
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? <ul style="list-style-type: none"> <li>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</li> </ul>	14a	X
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	14b	X
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	15	X
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	16	X
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	17	X
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	18	X
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H	19	X
	20	X

Form 990 (2009)

**INDEPENDENT ORDER OF ODD FELLOWS**  
**BETHESDA LODGE #30**

Form 990 (2009)

04-1086363 Page 4

**Part IV Checklist of Required Schedules (continued)**

		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 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	
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b	
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	X
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	27	X
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	28a	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
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? 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	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	38	X

Form 990 (2009)

**INDEPENDENT ORDER OF ODD FELLOWS**  
**BETHESDA LODGE #30**

Form 990 (2009)

04-1086363 Page 5

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

	Yes	No
<b>1a</b> 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
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	
<b>2a</b> 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>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)</i>	2b	
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	X
<b>b</b> If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	
<b>4a</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)?	4a	X
<b>b</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.		
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
<b>c</b> 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	
<b>6a</b> 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	X
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b> 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	X
<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
<b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	X
<b>d</b> If "Yes," indicate the number of Forms 8282 filed during the year	7d	
<b>e</b> Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	
<b>g</b> For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	
<b>h</b> For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	
<b>8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
<b>9 Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b> Did the organization make any taxable distributions under section 4966?	9a	
<b>b</b> Did the organization make a distribution to a donor, donor advisor, or related person?	9b	
<b>10 Section 501(c)(7) organizations.</b> Enter:		
<b>a</b> Initiation fees and capital contributions included on Part VIII, line 12	10a	
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
<b>11 Section 501(c)(12) organizations.</b> Enter		
<b>a</b> Gross income from members or shareholders	11a	
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b	
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
<b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	

Form 990 (2009)

INDEPENDENT ORDER OF ODD FELLOWS  
BETHESDA LODGE #30

Form 990 (2009)

04-1086363 Page 6

**Part VI 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**

1a Enter the number of voting members of the governing body

1b Enter the number of voting members that are independent

2 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?

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?

4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?

5 Did the organization become aware during the year of a material diversion of the organization's assets?

6 Does the organization have members or stockholders?

7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?

b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following.

a The governing body?

b Each committee with authority to act on behalf of the governing body?

9 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

	Yes	No
1a	0	
1b	0	
2	X	
3	X	
4	X	
5	X	
6	X	
7a	X	
7b	X	
8a	X	
8b	X	
9	X	

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

10a Does the organization have local chapters, branches, or affiliates?

b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?

11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?

11A Describe in Schedule O the process, if any, used by the organization to review this Form 990.

12a Does the organization have a written conflict of interest policy? If "No," go to line 13

b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?

c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done

13 Does the organization have a written whistleblower policy?

14 Does the organization have a written document retention and destruction policy?

15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?

a The organization's CEO, Executive Director, or top management official

b Other officers or key employees of the organization

If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?

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?

	Yes	No
10a	X	
10b		
11	X	
12a	X	
12b		
12c		
13	X	
14	X	
15a	X	
15b	X	
16a	X	
16b		

**Section C. Disclosure**

17 List the states with which a copy of this Form 990 is required to be filed ► **MA**

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 organization. ► **ROBERT SHIELDS, TREASURER - 617-268-6492**  
**441 EAST 5TH STREET SOUTH BOSTON, MA 02127**

Form 990 (2009)

INDEPENDENT ORDER OF ODD FELLOWS  
BETHESDA LODGE #30

**Form 990 (2009)**

## BETHESDA LODGE #30

04-1086363 Page 7

## **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

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

INDEPENDENT ORDER OF ODD FELLOWS  
BETHESDA LODGE #30

## Form 990 (2009)

04-1086363 Page 8

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

**1b Total**

3,540.

0

0

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 ►

9

3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

**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 **NONE**

(A) Name and business address	(B) Description of services	(C) Compensation

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

10

Form 990 (2009)

INDEPENDENT ORDER OF ODD FELLOWS  
BETHESDA LODGE #30

**Form 990 (2009)**

04-1086363 Page 9

**Part VIII 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					
1 a Federated campaigns	1a				
b Membership dues	1b				
c Fundraising events	1c				
d Related organizations	1d	70,282.			
e Government grants (contributions)	1e				
f All other contributions, gifts, grants, and similar amounts not included above	1f	26.			
g Noncash contributions included in lines 1a-1f \$					
h Total. Add lines 1a-1f		70,308.			
Program Service Revenue		Business Code			
2 a					
b					
c					
d					
e					
f All other program service revenue					
g Total. Add lines 2a-2f					
3 Investment income (including dividends, interest, and other similar amounts)		►	194,714.	194,714.	
4 Income from investment of tax-exempt bond proceeds		►			
5 Royalties		►			
6 a Gross Rents	(i) Real	(ii) Personal			
b Less: rental expenses					
c Rental income or (loss)					
d Net rental income or (loss)		►			
7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
b Less cost or other basis and sales expenses	3679012.				
c Gain or (loss)	3592164.				
d Net gain or (loss)	86,848.	►	86,848.	86,848.	
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a				
b Less: direct expenses	b				
c Net income or (loss) from fundraising events		►			
9 a Gross income from gaming activities See Part IV, line 19	a				
b Less: direct expenses	b				
c Net income or (loss) from gaming activities		►			
10 a Gross sales of inventory, less returns and allowances	a				
b Less: cost of goods sold	b				
c Net income or (loss) from sales of inventory		►			
Miscellaneous Revenue	Business Code				
11 a					
b					
c					
d All other revenue					
e Total. Add lines 11a-11d		►	351,870.	281,562.	0.
12 Total revenue. See instructions.		►			0.

**INDEPENDENT ORDER OF ODD FELLOWS**  
**BETHESDA LODGE #30**

Form 990 (2009)

04-1086363 Page 10

**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	39,300.	39,300.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	8,800.	8,800.		
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	3,600.		3,600.	
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	6,500.		6,500.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses	1,184.		1,184.	
14 Information technology				
15 Royalties				
16 Occupancy	4,432.		4,432.	
17 Travel				
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	526.		526.	
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 <b>INVESTMENT FEES</b>	37,736.		37,736.	
b <b>GENERAL FUND</b>	27,080.		27,080.	
c <b>CONTINGENT FUND</b>	15,500.		15,500.	
d <b>SCHOLARSHIPS</b>	6,000.		6,000.	
e <b>RELIEF FUND</b>	2,500.		2,500.	
f All other expenses	1,081.	1,081.		
<b>25 Total functional expenses. Add lines 1 through 24f</b>	<b>154,239.</b>	<b>49,181.</b>	<b>105,058.</b>	<b>0.</b>
<b>26 Joint costs. Check here ► <input type="checkbox"/></b> 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				

**INDEPENDENT ORDER OF ODD FELLOWS**  
**BETHESDA LODGE #30**

Form 990 (2009)

04-1086363 Page 11

**Part X | Balance Sheet**

		(A) Beginning of year		(B) End of year
<b>Assets</b>				
1	Cash - non-interest-bearing	22,544.	1	14,678.
2	Savings and temporary cash investments	2		
3	Pledges and grants receivable, net	3		
4	Accounts receivable, net	4		3,920.
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	399.	9	399.
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	11		
12	Investments - other securities See Part IV, line 11	7,120,829.	12	7,724,042.
13	Investments - program-related See Part IV, line 11	13		
14	Intangible assets	14		
15	Other assets See Part IV, line 11	2,109.	15	2,109.
<b>16</b>	<b>Total assets. Add lines 1 through 15 (must equal line 34)</b>	<b>7,145,881.</b>	<b>16</b>	<b>7,745,148.</b>
<b>Liabilities</b>				
17	Accounts payable and accrued expenses	17,500.	17	12,500.
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	25		
<b>26</b>	<b>Total liabilities. Add lines 17 through 25</b>	<b>17,500.</b>	<b>26</b>	<b>12,500.</b>
<b>Net Assets or Fund Balances</b>				
	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	25,000.	27	25,000.
28	Temporarily restricted net assets	22,479.	28	19,471.
29	Permanently restricted net assets	7,080,902.	29	7,688,177.
	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	7,128,381.	33	7,732,648.
34	Total liabilities and net assets/fund balances	7,145,881.	34	7,745,148.

Form 990 (2009)

INDEPENDENT ORDER OF ODD FELLOWS  
BETHESDA LODGE #30

Form 990 (2009)

04-1086363 Page 12

Part XI | Financial Statements and Reporting

	Yes	No
1 Accounting method used to prepare the Form 990: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> 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?	2a	X
b Were the organization's financial statements audited by an independent accountant?	2b	X
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.	2c	
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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> 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?	3a	X
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	3b	

Form 990 (2009)

**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

**2009**

Open to Public  
Inspection

Name of the organization **INDEPENDENT ORDER OF ODD FELLOWS  
BETHESDA LODGE #30**

Employer identification number **04-1086363**

**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).	
<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> 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	
a Total number of conservation easements	<b>Held at the End of the Tax Year</b>
b Total acreage restricted by conservation easements	2a
c Number of conservation easements on a certified historic structure included in (a)	2b
d Number of conservation easements included in (c) acquired after 8/17/06	2c
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► _____	2d
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?	<input type="checkbox"/> Yes <input type="checkbox"/> 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)?	<input type="checkbox"/> Yes <input type="checkbox"/> 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	► \$ _____

**INDEPENDENT ORDER OF ODD FELLOWS**  
**BETHESDA LODGE #30**

Schedule D (Form 990) 2009

04-1086363 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 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 the 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					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

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

a Board designated or quasi-endowment ► \_\_\_\_\_ %

b Permanent endowment ► \_\_\_\_\_ %

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)		
3a(ii)		
3b		

**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)) ► 0.

Schedule D (Form 990) 2009

INDEPENDENT ORDER OF ODD FELLOWS  
BETHESDA LODGE #30

Schedule D (Form 990) 2009

04-1086363 Page 3

**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		
<b>SECURITIES AND CASH</b>	<b>7,724,042.</b>	<b>End-of-Year Market Value</b>

**Total** (Col (b) must equal Form 990, Part X, col (B) line 12.) ► **7,724,042.**

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

**Total. (Col (b) must equal Form 990, Part X, col (B) 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.)**

**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

**INDEPENDENT ORDER OF ODD FELLOWS**  
**BETHESDA LODGE #30**

Schedule D (Form 990) 2009

04-1086363 Page 4

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

1	351,870.
2	154,239.
3	197,631.
4	
5	
6	
7	
8	406,636.
9	406,636.
10	604,267.

10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9

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

1	1
2	
a	2a
b	2b
c	2c
d	2d
2e	
3	
4	
a	4a
b	4b
4c	
5	

5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)

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

1	1
2	
a	2a
b	2b
c	2c
d	2d
2e	
3	
4	
a	4a
b	4b
4c	
5	

5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

**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 XI, Line 8 - Other Adjustments:**

**ACCUMULATED OTHER COMPREHENSIVE INCOME: 406636.**



**INDEPENDENT ORDER OF ODD FELLOWS  
BETHESDA LODGE #30**

**BETHESEDA LODGE #30**

**Grants and Other Assistance to Individuals in the United States. Co**  
**Use Part IV and Schedule I-1 (Form 990) if additional space is needed.**

If the organization answered "Yes" to Form 990, Part IV, line 22

(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
---------------------------------	--------------------------	--------------------------	-----------------------------------	---	--

Book IV Sunkenbottom Information. Complete this chart to record the information contained in Book IV and any additional information you may have.

**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

INDEPENDENT ORDER OF ODD FELLOWS  
BETHESDA LODGE #30

Employer identification number  
04-1086363

Form 990, Part I, Line 1, Description of Organization Mission:

SECTION 501(c) 8

Form 990, Part VI, Section B, line 11: ONCE THE FORM 990 IS COMPLETED, A  
MEETING IS CALLED AND THE TREASURER, ROBERT SHIELDS, GOES OVER THE ENTIRE  
FORM 990 WITH THE GOVERNING BODY.

Form 990, Part VI, Section C, Line 19: ALL GOVERNING DOCUMENTS, CONFLICT  
OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC  
UPON REQUEST.

BETHESDA LODGE # 30 - TRUSTEES FUND

9/30/10

LIST OF SPECIFIC ASSISTANCE TO INDIVIDUALS

Mrs. Patricia Antonucci	400.00
Mrs. Barbara Barr	400.00
Mrs. Hilda Callihan	400.00
Mrs. Brenda Campbell	400.00
Mrs. Evelyn Cope	400.00
Mrs. Mary Dunlap	400.00
Mrs. Joyce Facella	400.00
Mrs. Miriam E. Fallon	400.00
Mrs. Dianna Gillard	400.00
Mrs. Glayds Ginnetti	400.00
Mrs. Nancy Goddard	400.00
Mrs. Doris Green	400.00
Mrs. Mildred Hatch	400.00
Mrs. Maureen Howard	400.00
Mrs. Mary Johnson	400.00
Mrs. Barbara Leslie	400.00
Mrs. Thelma G. Long	400.00
Mrs. Mildred Miller	400.00
Mrs. Margaret Perkins	400.00
Mrs. Betty Ann Rupp	400.00
Mrs. Gladys Simms	400.00
Mrs. Dorothy Ward	400.00

\$ 8,800.00

BETHESDA LODGE # 30 - TRUSTEES FUND

9/30/10

LIST OF GRANTS AND ALLOCATIONS

Arthritis Committee	3,500.00
Jimmy Fund	1,000.00
Crotched Mountain Fund	1,000.00
Perkins Institute for the Blind	1,500.00
Cystic Fibrosis Foundation Mass Chapter	800.00
Muscular Dystrophy Association	800.00
U.S.O. of New England	500.00
The Salvation Army	1,000.00
Home for Little Wanderers	1,800.00
American Cancer Society	800.00
American Heart Association	800.00
Joslin Diabetes Center	1,200.00
Children's Hospital Trust	1,500.00
Morgan Memorial Goodwill Ind. Inc.	800.00
Shriners Burns Hospital	1,500.00
Rosie's Place	800.00
Pine Street Inn	800.00
Museum of Science	1,000.00
Children's Museum	1,000.00
The Mayhew Program	1,000.00
Odd Fellows Visual Research Fund	1,500.00
New England Aquarium	1,000.00
Kiwanis Pediatric Trauma Institute	800.00
Project Bread	1,000.00
Odd Fellows Home of Massachusetts	1,500.00
Pagets' Disease Foundation	800.00
The Lupus Foundation of America	900.00
The Way Up	1,300.00
Camp NEOFA	1,300.00
American Kidney Fund	800.00
National Multiple Sclerosis Society	800.00
Education Foundation IOOF	2,500.00
Salvation Army - Haiti Relief	2,000.00
	<hr/>
	\$39,300.00
	<hr/>

**BETHESDA LODGE # 30 - TRUSTEES FUND**

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**9/30/10**

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**LIST OF DEATH BENEFITS PAID TO OR FOR MEMBERS**

---

**Richard S. Shellene Jr.**

**1,081.00**

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**\$1,081.00**

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**BETHESDA LODGE # 30 - TRUSTEES FUND**

**9/30/10**

**LIST OF OFFICERS, DIRECTORS & TRUSTEES**

Mr. Robert Shields  
441 East 5th Street  
South Boston, MA 02127  
Treasurer - \$2,040.00

Mr. Francis Engrassia  
26 Hood Street  
Attleboro, MA 02703  
Board of Trustees - \$180.00

Mr. Neil D. MacPherson  
15 Dexter St.  
South Boston, MA 02127  
Secretary-Clerk - \$360.00

Mr. Frank P. Buono  
663 East 6th St.  
South Boston, MA 02127  
Financial Secty.-Lodge-\$1,080.00

Mr. David J. Dalzell, Jr.  
35 Oakland Road Unit #2  
Brookline, MA 02445  
Board of Trustees - \$180.00

Mr. Harold G. Heeder  
111 Kimball Rd.  
Dedham, MA 02026  
Secty. of Lodge - \$1,800.00

Mr. Harold G. Heeder  
111 Kimball Rd.  
Dedham, MA 02026  
Board of Trustees - \$180.00

Mr. John Peterson  
36 Deirdra Drive  
Plymouth, MA 02360  
Board of Trustees - \$240.00

Mr. Albert A. Cicchetti  
32 Youngs Road  
Dedham, MA 02026  
President of Board of  
Trustees - \$420.00

Mr. Richard Dubois, Jr.  
72 Belcher Drive  
Whitman, MA 02382  
Treasurer - Lodge - \$810.00

Mr. Francis Engrassia  
26 Hood Street  
Attleboro, MA 02703  
Editor - Lodge - \$320.00

**BETHESDA LODGE #30 GAIN/LOSS SUMMARY**  
**FISCAL YEAR ENDED 09/30/10**

**SHORT TERM**

DATE PURCHASED	DATE SOLD	SHARES	DESCRIPTION	SELLING PRICE	COST BASIS	Short Term Gain/(Loss)
Various	Various	21231212 030	BOSTON TRUST DAILY INCOME FUND	2,131,212.03	2,131,212.03	0.00
10/19/09	01/13/10	50000 000	FED HOME LN BKS	383,063.91	384,913.71	(1,849.80)
11/05/09	01/13/10	50000 000	FED HOME LN BKS	51,024.67	51,226.00	(201.33)
09/30/09	01/19/10	250000 000	FED HOME LN BKS	252,392.50	251,893.02	499.48
07/17/09	06/22/10	300 000	VISA INC	23,874.04	19,422.45	4,451.59
01/15/10	06/22/10	400 000	VISA INC	31,832.05	34,542.49	(2,710.44)
<b>SHORT TERM</b>				<b>2,873,399.20</b>	<b>2,873,209.70</b>	<b>189.50</b>

**LONG TERM**

DATE PURCHASED	DATE SOLD	SHARES	DESCRIPTION	SELLING PRICE	COST BASIS	Long Term Gain/(Loss)
Various	Various	100517 020	GNMA POOL	100,517.02	97,059.42	3,457.60
01/17/91	12/29/09	600 000	PROCTER & GAMBLE CO	36,874.20	6,180.77	30,693.43
08/06/03	12/29/09	200 000	PEPSICO INC	12,273.71	8,938.00	3,335.71
03/07/05	12/29/09	400 000	PEPSICO INC	24,547.41	21,713.55	2,833.86
06/15/06	12/29/09	100 000	PEPSICO INC	6,136.85	5,882.11	254.74
12/27/05	12/29/09	700 000	COLGATE-PALMOLIVE CO	58,135.03	38,584.35	19,550.68
12/26/06	12/29/09	500 000	COLGATE-PALMOLIVE CO	41,525.02	32,428.80	9,096.22
07/18/08	12/29/09	350 000	WAL-MART STORES INC	18,895.65	20,223.21	(1,327.56)
12/22/08	12/29/09	300 000	BECTON, DICKINSON AND CO	23,769.44	20,212.78	3,556.66
12/23/08	12/29/09	500 000	DENTSPLY INTERNATIONAL INC	17,714.78	13,400.01	4,314.77
09/29/08	03/31/10	200000 000	FED HOME LN BKS	203,690.00	205,035.58	(1,345.58)
12/29/03	04/23/10	100000 000	TREASURY INFL IDX	130,202.67	112,269.70	17,932.97
01/12/06	04/27/10	1500 000	NOKIA	18,588.26	28,245.37	(9,657.11)
03/03/06	04/27/10	2550 000	NOKIA	31,600.05	54,340.91	(22,740.86)
01/05/79	04/30/10	600 000	BP	31,143.06	3,180.97	27,962.09
09/29/08	09/17/10	50000 000	FED HOME LN BKS	50,000.00	51,258.90	(1,258.90)
<b>LONG TERM</b>				<b>805,613.15</b>	<b>718,954.43</b>	<b>86,658.72</b>
<b>NET</b>				<b>3,679,012.35</b>	<b>3,592,164.13</b>	<b>86,848.22</b>

10/14/2010  
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**BETHESDA LODGE # 30 I.O.O.F.**  
**9/30/10**  
**SCHEDULE OF INVESTMENTS - SECURITIES**

	Cost	FMV
Cash on Hand	<u>81</u>	<u>81</u>
Fixed Income Assets:		
Daily Money Market	178,909	178,909
U.s Govt & Agency Issues	2,776,005	2,959,104
Corporate Debt Securities	336,808	383,530
Asset-Backed Securities	<u>5,900</u>	<u>6,303</u>
	<u>3,297,622</u>	<u>3,527,846</u>
Common Stocks and Convertibles:		
Finance	428,175	541,708
Consumer Products	496,813	697,783
Consumer Discretionary	244,951	490,752
Industrial Product & Services	396,373	646,366
Industrial Materials	128,180	176,021
Information Technology	423,293	551,871
Healthcare	396,371	599,599
Energy & Resource	<u>372,541</u>	<u>492,015</u>
	<u>2,886,697</u>	<u>4,196,115</u>
Total	<u><b>6,184,400</b></u>	<u><b>7,724,042</b></u>

BETHESDA LODGE # 30 I.O.O.F.  
GENERAL FUNDS  
COMPARATIVE STATEMENT OF ACTIVITIES AND NET ASSETS  
FOR THE YEARS ENDED SEPTEMBER 30.

	<u>2010</u>	<u>2009</u>
<u>REVENUES AND OTHER SUPPORT:</u>		
Trustees	27,080	40,000
Dues	<u>1,139</u>	<u>931</u>
	<u>28,219</u>	<u>40,931</u>
<u>EXPENSES:</u>		
Sick Benefits	160	315
Printing, Postage & Office	1,576	2,096
Directors Fees	4,010	3,960
Donations	14,308	17,113
Grand Lodge (Per Capita Tax)	2,252	2,146
Prescription Benefits	5,803	5,893
Lodge Expense	6,894	5,316
Contingent Fund - 10% Of Dues	114	119
Noble Grand Fund	100	100
Vice Grand Fund	100	100
State Tax	190	70
	<u>35,507</u>	<u>37,228</u>
<u>CHANGE IN NET ASSETS</u>	<u>(7,288)</u>	<u>3,703</u>
<u>NET ASSETS - OCTOBER 1, 2009</u>	<u>(475)</u>	
<u>NET ASSETS - SEPTEMBER 30, 2010</u>	<u>(7,763)</u>	

The accompanying accountant's audit report and notes are an integral part of these statements.

BETHESDA LODGE # 30 I.O.O.F.  
CONTINGENT FUNDS  
COMPARATIVE STATEMENT OF ACTIVITIES AND NET ASSETS  
FOR THE YEARS ENDED SEPTEMBER 30,

	<u>2010</u>	<u>2009</u>
<u>REVENUES AND OTHER SUPPORT:</u>		
Trustees	15,500	20,500
General Fund - 10% Dues	114	119
	<hr/>	<hr/>
	15,614	20,619
	<hr/>	<hr/>
<u>EXPENSES:</u>		
Anniversary Night	2,296	1,920
Suppers & Collations	961	927
Roll Call Night	1,070	2,014
Installation Night	2,039	1,975
Christmas Party	8,153	5,997
Game Night	1,627	1,430
Grand Masters Degree Night	3,454	2,928
Election of Officer	1,155	920
	<hr/>	<hr/>
	20,755	18,111
	<hr/>	<hr/>
<u>CHANGE IN NET ASSETS</u>	(5,141)	2,508
	<hr/>	<hr/>
<u>NET ASSETS - OCTOBER 1, 2009</u>	15,095	
	<hr/>	
<u>NET ASSETS - SEPTEMBER 30, 2010</u>	9,954	
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The accompanying accountant's audit report and notes are an integral part of these statements.