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# Form, 990

Department of the Treasury Internal Revenue Service

# **Return of Organization Exempt From Income Tax**

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

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

OMB No 1545-0047

2010

Open to Public Inspection

	For the	ZUIU calen	dar year, or tax year beg	inning	, 2010, a	nd endin	<u>g</u>			_!
В	Check if a	pplicable	C Name of organization AN	CIENT FREE & ACCEPTED MAS	SONS 12	5 MOSAI	C LODGE	D Emplo	yer Ider	ntification Number
	Addre	ess change	Doing Business As MC	SAIC LODGE NO. 125,	A.F.	AND A	.M.	42-	<u>60</u> 6	6292
	Name	e change		box if mail is not delivered to street addr)		Room/s		E Teleph		
		l return	1355 WEST THIRD	STREET				(56	3) !	583-0460
		ınated	City, town or country	<u> </u>	State	ZIP code + 4		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		<u></u>
	Ħ	nded return	DUBUQUE			52001-	6445	G Gross	acointe	\$ 388,070.
	Ħ			unal officer			H(a) Is this			
	Appli	cation pending	1	•	T 7		H(b) Are ali			Yes Yes
_				EST THIRD STREET DUBUQUE		52001-644		attach a list		
		mpt status	501(c)(3) X 501(c) (		(a)(1) or	527				
<u></u>	Webs	<del></del>	W.MOSAICLODGE12				H(c) Group		ımber	<u>▶ 0495</u>
<u>K</u>		organization	Corporation Trust	Association X Other ► FRATERI	NAL L Ye	ar of Formati	<u>on 1858</u>	<u>M:</u>	State of	legal domicile IA
P	art I 🟸	Summai	ry							
	1 Br	refly descri	be the organization's mis	sion or most significant activities	TO P	ROMOTE A	WAY OF	LIFE TH	T BI	NDS LIKE-MINDED N
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Activities & Governance	L .			erning body (Part VI, line 1a)					$\overline{}$	73
es	l .			rs of the governing body (Part V		)		•	4	70
₹	1			ın calendar year 2010 (Part V, lıı	ne 2a) .				5	0
₹	1		of volunteers (estimate if	<del>-</del> -					6	0
•				Part VIII, column (C), line 12					7a	<del></del>
_	b Ne	t unrelated	business taxable income	from Form 990-T, line 34	<del></del>				7b	
							Pı	ior Year		Current Year
ø.			and grants (Part VIII, line		•			4,3	93.	3,73
3		•	ice revenue (Part VIII, lin				ļ			
Hevenue			come (Part VIII, column (	· ·				-11,0		50,08
ב	11 Ot	her revenue	e (Part VIII, column (A), li	ines 5, 6d, 8c, 9c, 10c, and 11e)					96.	3
_	<b>12</b> To	<u>tal revenue</u>	<ul> <li>add lines 8 through 11</li> </ul>	(must equal Part VIII, column (	A), line 1	12)		-6,6	03.	53,85
	<b>13</b> Gr	ants and sii	milar amounts paid (Part	IX, column (A), lines 1-3)				33,2	99.	21,10
	<b>14</b> Be	nefits paid	to or for members (Part I	X, column (A), line 4)						
	<b>15</b> Sa	laries, othe	r compensation, employe	ee benefits (Part IX, column (A),	lines 5-1	10)				
ge c	Ī		undraising fees (Part IX,			•				
							<u> </u>	5 1, 1	٠	
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Forn	1 990 (2010) ANCIENT FREE & ACCEPTED MASONS 125 MOSAIC LODGE	42-6	0662	92		⊃age 2
	就肌緩、Statement of Program Service Accomplishments	-				
	Check if Schedule O contains a response to any question in this Part III					
1	Briefly describe the organization's mission.					
	TO PROMOTE A WAY OF LIFE THAT BINDS LIKE-MINDED MEN		- <b></b>			<del>-</del>
	IN A BROTHERHOOD THAT TRANSCENDS ALL RELIGIOUS, ETHNIC, CULTURAL, SOCIAL, A	ND EDUCAT	IONAI	DIF	FERE	CES;
	See Form 990, Page 2, Part III, Line 1 (continued)					
		<del>-</del> -	<b>-</b>			
2	Did the organization undertake any significant program services during the year which were not listed of	on the prior				
	Form 990 or 990-EZ?			Yes	X	No
	If 'Yes,' describe these new services on Schedule O.				ت	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program si	eruces?		Yes	$\mathbf{x}$	No
·	If 'Yes,' describe these changes on Schedule O	0,41000	لــا		ت:	
4	Describe the exempt purpose achievements for each of the organization's three largest program service	as hy avnan	- SA	ction (	501(c)	(3)
7	and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants a expenses, and revenue, if any, for each program service reported	and allocation	ns to ot	hers,	he tot	al
4a	(Code ) (Expenses \$ including grants of \$)	(Revenue	\$			)
	FRATERNAL EDUCATION AND ACTIVITIES: TO PRESENT THE PRINCIPLES AND TEACHINGS OF FRE	EMASONRY T	O MEME	ERS I	N ORE	ER TO
	MAKE THEM BETTER INDIVIDUALS WITHIN SOCIETY AND TO PROVIDE MEANINGFUL ACTIVITIES	TO PROMOT	E MASC	NIC E	ELTO	SHIP
	THE PRINCIPLES AND TEACHINGS OF FREEMASONRY ARE FIRST PRESENTED TO THOSE JOINING					
	DEGREES OF SYMBOLIC MASONRY AND THEREAFTER BY EDUCATIONAL PROGRAMS, NUMEROUS					
	WITNESSING HOW OTHER MASONS PRACTICE THEM IN THEIR DAILY LIVES. THE SEVENTY-TH					
	PROVIDED WITH A VARIETY OF OPPORTUNITIES FOR MASONIC FELLOWSHIP AND GROV			<del>-</del>		
	ABOUT LODGE MEETINGS, DEGREE WORK, AND VARIOUS ACTIVITIES AND WERE ENCOURAGED TO P	ARTICIPAT	E_WHEN	<u>EVER</u>	POSS	BLE.
	SOME OF THE ACTIVITIES INCLUDED FAMILY MEMBERS.				~	
_						
4b	(Code: ) (Expenses \$ including grants of \$ )	(Revenue	\$			)
	CHARITABLE ASSISTANCE: TO PROVIDE FUNDS AND OTHER ASSISTANCE TO INDIVIDUALS AND/OR	RORGANIZA	TIONS	FOR R	ELIG:	ous,
	CHARITABLE, SCIENTIFIC, LITERARY, AND EDUCATIONAL PURPOSES					
	CHARITY IS ONE OF THE FUNDAMENTAL PRINCIPLES OF FREEMASONRY AND IS EVIDENT THROU	GH TTS FIN	ANCTA	 I. SUP	PORT	OF A
	VARIETY OF WORTHWHILE CAUSES. IN 2010 MOSAIC LODGE AWARDED GRANTS TOTALING \$13,100					
		<i></i> -				
	ORGANIZATIONS AND AWARDED \$2,000 SCHOLARSHIPS TO FOUR OUTSTANDING HIGH SCHOOL SEN	<del></del>				
	IN PURSUING A POST-SECONDARY EDUCATION. MASONIC CHARITY, HOWEY					
	FINANCIAL ASSISTANCE AND IS EVIDENT THROUGH ITS MEMBERS' ACTS		NESS.	AND		
	SERVICE TO THOSE IN NEED OF ASSISTANCE WHETHER THEY BE MASONS	OR NOT.		<b>-</b>		
				<b>-</b>	- <b>-</b> -	- <b>-</b> -
				- <b></b> -	~	
4 c	(Code·) (Expenses \$ including grants of \$)	(Revenue	\$			)
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	Other program services (Describe in Schedule O.)					
	Expenses \$ including grants of \$ ) (Revenue \$	·			)	
4e -	Total program service expenses ►					

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	·		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		х
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2	<b> </b>	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		х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? 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		Х
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		<u>x</u>
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments $^7$ If 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable	100 mm	- 144 1 7 54	
i	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a		X
I	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	11 ь		_X_
(	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	11 c		Х
•	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	11 d		X
•	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	$\longrightarrow$	X
	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 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11f		_x_
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a		<u>X</u>
k	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		_X_
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule $E$ .	13		<u>X</u>
14 a	Did the organization maintain an office, employees, or agents outside of the United States?.	14a		<u>X</u>
k	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, Parts I and IV	14b		_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, Parts II and IV	15		<u>x</u>
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, Parts III and IV	16		<u>X</u>
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 (see instructions)	17		<u>x</u>
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	18		<u>x</u>
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	19		<u>X</u>
<b>20</b> a	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		X
b	If 'Yes' to line 20a, did the organization attach its audited financial statements to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20 b		

Form 990 (2010) ANCIENT FREE & ACCEPTED MASONS 125 MOSAIC LODGE 42-6066292 Page 4 Part IV , Checklist of Required Schedules (continued) Yes No 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 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 Х 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 Х Schedule J 23 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, and 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 Х 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 Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I 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 25b Schedule L. Part I 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II 26 Х 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 Х 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 Х b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete 28b Schedule L, Part IV Х c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV 28 c 29 Х Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 contributions? If 'Yes,' complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I 31 Х 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete 32 Schedule N, Part II Х 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 Х 33

Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V,

35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?

a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2

Yes X No

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

7 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI

38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O

Form 990 (2010)

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# Form 990 (2010) ANCIENT FREE & ACCEPTED MASONS 125 MOSAIC LODGE Partive Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			للب
			Yes	No
1	a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a	0 - ,		
	b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b	<u> </u>	; ;	
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	10		,
2	a 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	0		.,
	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	21	)	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		7	ļ
3	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	_ 3a	<u> </u>	X
	<b>b</b> If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3 t	<u> </u>	<u> </u>
4	a 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)?	42		x_
	b If 'Yes,' enter the name of the foreign country.	``;;```		1
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	- '	1	
	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a	+	X
	<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 t		X_
	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	50	<del>-</del>	ļ
6	a 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 If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b	X	
7	Organizations that may receive deductible contributions under section 170(c).		774 ·	17:
	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		FX .
	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b		
•	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		
1	d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d	. 200		-4
•	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		
:	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			
!	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			ļ 
١	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	1	,
9	Sponsoring organizations maintaining donor advised funds.	. = .,,	-122 cz-400	
ä	a Did the organization make any taxable distributions under section 4966?	9 a	<u></u>	
ŀ	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	ļ	
10		71.4	1 2 2	
á	a Initiation fees and capital contributions included on Part VIII, line 12		1	,
ŀ	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		); 1 2	11
11	Section 501(c)(12) organizations. Enter			44 63
ā	a Gross income from members or shareholders 11a	- F 3	7	-1-
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )	] - (1) 	ûş, e	1-6
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	<u> </u>	
	of If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	-1.73	35-4	`_
	Section 501(c)(29) qualified nonprofit health insurance issuers.		·	
а	a Is the organization licensed to issue qualified health plans in more than one state?	13a	,	
	Note. See the instructions for additional information the organization must report on Schedule O.	्रोप्ट	<u>ا</u> رُ ،,`]	. •
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		1,75	
	Enter the amount of reserves on hand	1,4	` ``	<del></del>
4 a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u>X</u>
1.	If IVer I has it filed a Form 720 to report these payments? If INe I provide an explanation in Schedule O	1 1/16		

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Form 990 (2010) ANCIENT FREE & ACCEPTED MASONS 125 MOSAIC LODGE 42-6066292 Pairt 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.  $\mathbf{x}$ Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body at the end of the tax year 1b 70 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee or key employee? 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? 3 x Х 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Х 6 X 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? 7 b Х b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8 a a The governing body? Х 81 b Each committee with authority to act on behalf of the governing body? Is there any officer, director or 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 9 Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes 10a Does the organization have local chapters, branches, or affiliates? 10 a Х b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, 10b and branches to ensure their operations are consistent with those of the organization? 11 a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11 a Х عبي وين 1127 b Describe in Schedule O the process, if any, used by the organization to review this Form 990 Х 12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13 12 a 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 12 c 13 13 Does the organization have a written whistleblower policy? 14 Does the organization have a written document retention and destruction policy? 14 Х Did the process for determining compensation of the following persons include a review and approval by independent ÷ 1. persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15 a X 15b Х b Other officers of 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? 16 a 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 List the states with which a copy of this Form 990 is required to be filed > 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. X Upon request Another's website 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

Form 990 (2010)

IA 52003-8102 (563) 583-0460

State the name, physical address, and telephone number of the person who possesses the books and records of the organization

► EDWIN D. BLINKS 10602 CEDAR POINT COURT, DUBUQUE

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Form <b>990</b> (2010)	ANCIENT FREE & ACCEPTED MASONS 125 MOSAIC LODGE

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Form 990 (2010)

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

#### 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
- 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, if any. 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

									cer, director, or trustee	
(A)	(B)	_		•	C)		L.A	(D)	(E)	(F)
Name and title	Average hours per week (describe hours for related organizations in Schedule O)	or director	hrippint	Office	a Key employee	ap High est connactions at employees	y) ramer	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W 2/1099 MISC)	Estimated amount of other compensation from the organization and related organizations
(1) BRIAN E. KELLEY MASTER	0.75			х				0.	0.	75.
(2) THOMAS A. MCKEON SENIOR WARDEN	0.75			X				0.	0.	0.
_(3) BRIAN_PCARROLLJUNIOR_WARDEN	0.50	_		x				0.	0.	0.
_(4) EDWIN_DBLINKSTREASURER	1.00			x				0.	0.	150.
_(5) D. KEITH ROBERTSONSECRETARY	1.50			Х			-	0.	0.	300.
	-	-								
_(?)	-									
_(8)	-									
<u>_(9)</u>						•				······································
<u>(10)</u>										
<u>(11)</u>										
<u>(12)</u>										
(13)					$\dashv$					
(14)										
(15)										
(16)										
(17)			1				$\exists$			

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12/21/10

	from the organization	_		
			Yes	No
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual	3	1.	X
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	4	.·   .·	. , X
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If 'Yes,' complete Schedule J for such person	 5		X

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

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

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		
2 Total number of independent contractors (including but not limited to those listed ab	ove) who received more than	, , ,

0.

0.

525.

525.

0.

0.

1 b Sub-total

d Total (add lines 1b and 1c)

c Total from continuation sheets to Part VII, Section A

\$100,000 in compensation from the organization

d All other revenue

e Total. Add lines 11a-11d

12 Total revenue. See instructions

39

50,123

53,857

0.

0.

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#### **PartilX** 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)

	o not include amounts reported on lines , 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	13,100.			
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	8,000.		Market Market Comment	Francis - 6 m
3				THE RESERVE OF THE PARTY OF THE	
4	Benefits paid to or for members			A . 634 Th Ship 1 - 1 5	July of the same
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages .				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				<u> </u>
10	•				
11	· · · · · · · · · · · · · · · · · · ·				
	a Management .				
	<b>b</b> Legal	ļ			
	c Accounting	430.			
	d Lobbying	ļ	Abdress of various was	administration of the state of the state of	
	e Professional fundraising services See Part IV, line 17		A CONTRACTOR OF THE PROPERTY O		
	f Investment management fees .	6,873.			
	g Other				
	Advertising and promotion				
13	Office expenses	1,027.			
14	Information technology .	<u> </u>			<del> </del>
15	Royalties				
15	Occupancy	4,475.			<del></del>
17 18	Travel .  Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				<del></del>
21	Payments to affiliates	2,043.			
22	Depreciation, depletion, and amortization .				
23 24					
ē	DINNERS/REFRESHMENTS	1,532.			
Ŀ	OFFICER HONORARIUMS	525.			
c	FOREIGN DEDUCTION	2.			
c	FOREIGN TAXES	64.			
€	MISCELLANEOUS EXPENSES	159.			
f	All other expenses .				
_25	Total functional expenses Add lines 1 through 24f	38,230.			
26	Joint costs. Check here Inf following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
BAA					Form 990 (2010)

Hic	1145¥	Balance Sheet		. —	<del></del>
			(A) Beginning of year		(B) End of year
	ī	Cash – non-interest-bearing		1	
	2	Savings and temporary cash investments	128,860.	2	124,711.
	3	Pledges and grants receivable, net		3	
	1	Accounts receivable, net		4	
	[		m marte the metaline and	3	; , , , , , , , , , , , , , , , , , , ,
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.	1 1,24 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)	And the second s	· :: · 6	
ASSETS	7	Notes and loans receivable, net .		7	
Ē	8	Inventories for sale or use		8	
S	9	Prepaid expenses and deferred charges .		9	
	l	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D			And the state of t
	l t	Less accumulated depreciation 10b		10 c	<del></del>
	11	Investments – publicly traded securities .	650,888.	11	687,449.
	12	Investments - other securities See Part IV, line 11		12	
	13	Investments – program-related. See Part IV, line 11		13	ļ
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
ı	16	Total assets Add lines 1 through 15 (must equal line 34)	779,748.	16	812,160.
	17	Accounts payable and accrued expenses .		17	
ı	18	Grants payable		18	
	19	Deferred revenue .		19	
Ļ	20	Tax-exempt bond liabilities		20	
Å	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
i I		·	With the Court of	1 2 3	Can and State of
LIABIL TIES	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L.		22	
E   S	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
- 1	25	Other liabilities Complete Part X of Schedule D .		25	
	26	Total liabilities. Add lines 17 through 25	0.	26	0.
N		Organizations that follow SFAS 117, check here ► X and complete lines	SMEAN NEW YORK		数数数は高いとは分とく
P P		27 through 29 and lines 33 and 34.		標準	Mark The Control of t
- 1	27	Unrestricted net assets	779,748.	27	812,160.
ASSETS	28		175,140.	28	012,100.
֡֡֞֞֓֓֞֞֞֞֓֓֡֡֞֞֞֓֓֡֡֡֡֞֞֓֓֡֡֡֡֡֡֡֡֡֡		Temporarily restricted net assets		29	
R	29	Permanently restricted net assets	SERVICE PROPERTY ASPEC 1.3	29 234, 3	40 5 5 5 Th A 198 1 C 1 .
		Organizations that do not follow SFAS 117, check here ► and complete	表。写得"写到"。 一句:"是是一句,我是一句的话。	, 1	2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
FUND		lines 30 through 34.	以高路數十三元。 四次路數十三元。 四次 四次 中 次	1	Note that the second of the se
	30	Capital stock or trust principal, or current funds		30	
B A	31	Paid-in or capital surplus, or land, building, or equipment fund .		31	
Ä	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ě	33	Total net assets or fund balances	779,748.	33	812,160.
Š	34	Total liabilities and net assets/fund balances	779,748.	34	812,160.

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Form 990 (2010)

Form 990 (2010) ANCIENT FREE & ACCEPTED MASONS 125 MOSAIC LODGE 42	-6066292	Page 12
保証機能 Reconciliation of Net Assets		
Check if Schedule O contains a response to any question in this Part XI		X
·		
1 Total revenue (must equal Part VIII, column (A), line 12)	1	<u>53,857.</u>
2 Total expenses (must equal Part IX, column (A), line 25)	2	38,230.
3 Revenue less expenses. Subtract line 2 from line 1	3	15,627.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) .	4	779,748.
5 Other changes in net assets or fund balances (explain in Schedule O)	5	16,785.
6 Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	812,160.
Part		
Check if Schedule O contains a response to any question in this Part XII		x
1 Accounting method used to prepare the Form 990 X Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O		Yes No
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 review, or compilation of its financial statements and selection of an independent accountant?	ne audit,	2c
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue separate basis, consolidated basis, or both:	ed on a	The state of the s
Separate basis Consolidated basis Both consolidated and separate basis		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S Audit Act and OMB Circular A-133?	Single	3a X
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audits, explain why in Schedule O and describe any steps taken to undergo such audits.	ired audit	3ь
BAA		Form 990 (2010)

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

Ancient Free and Accepted Masons 125 Mosaic Lodge

Part I

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

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

► Attach to Form 990.

OMB No. 1545-0047 Open to Public Inspection 2010

Employer identification number

% U (h) Purpose of grant Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II or assistance ✓ Yes 42-6066292 Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and . . . . . . . . . . . . (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) . Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (e) Amount of non-cash assistance (d) Amount of cash . Enter total number of section 501(c)(3) and government organizations (c) IRC section if applicable the selection criteria used to award the grants or assistance? For Paperwork Reduction Act Notice, see the Instructions for Form 990. General Information on Grants and Assistance Enter total number of other organizations (G) 1 (a) Name and address of organization Part II E (12) 2 ල 9 5 E € 3 8 ව

Schedule I (Form 990) (2010)

Cat. No. 50055P

Schedule I (Form 990) (2010)					Page
P G	dividuals in the L I space is needec	J <b>nited States.</b> Con I.	plete if the organiza	ils in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line is needed.	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
1 College Scholarships for High School Graduates	4	8,000	0		
2					
8					
4					
5					
9					
Ĺ					
Part IV Supplemental Information. Complete this		wide the informatio	n required in Part I,	part to provide the information required in Part I, line 2, and any other additional information.	litional information.
Mosaic Lodge has developed a comprehensive application process to be followed by non-profit organizations applying for grants and by students applying for scholarships to be awarded	ion process to be fo	llowed by non-profit o	ganizations applying f	or grants and by students ap	plying for scholarships to be awarded
by the Lodge. Firsthand knowledge is required of members or other individuals needing charitable assistance and must be supported by bills or other documents.	bers or other individ	uals needing charitabl	e assistance and must	be supported by bills or oth	r documents. If approved by the
Lodge, checks are issued directly to non-profit organizations awarded grants, to institutions of higher learning for students awarded scholarships, and to those businesses which are	itions awarded gran	ts, to institutions of hi	gher leaming for stude	nts awarded scholarships, ar	d to those businesses which are
owed funds by a member or other individual needing charitable	ıaritable assistance.	Since most of the no	1-profit organizations a	warded grants are local, the	Since most of the non-profit organizations awarded grants are local, the Lodge has the ability to monitor
their implementation. A number of non-profit organizations hav	ions have presented	, prior to Lodge meeti	igs, programs describi	ng how the funds granted we	re presented, prior to Lodge meetings, programs describing how the funds granted were used. Most grants awarded
outside of the local area were for Masonic organizations for whi	for which the Lodg	e is very familiar with	ich the Lodge is very familiar with how the funds granted were used.	were used. Students selecte	Students selected to receive scholarships generally
write to the Lodge expressing their appreciation and occasionally write follow-up letters indicating how the scholarships helped them during their first year at the institution of higher	casionally write follo	ow-up letters indicating	J how the scholarships	helped them during their fir	t year at the institution of higher
learning they are attending.					
		1 0 4 0 0 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1			

#### SCHEDULE 0 (Form 990 or 990-EZ)

### Supplemental Information to Form 990 or 990-EZ

2010

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization Employer identification number
Ancient Free and Accepted Masons 125 Mosaic Lodge 42-6066292

Part VI, Section A, Lines 1 & 6: Mosaic Lodge is classified as a subordinate organization operating under a central organization, the Grand
Lodge of Iowa, A.F. and A.M. The Grand Lodge, through its Constitution and Laws for Subordinate Lodges, specifies how subordinate
lodges are to operate including their form of governance. Any man, who has received the three degrees of Symbolic Masonry in a particular
lodge or any Mason who has affiliated with it, is classified as a member of that lodge with the right to vote on all matters which may come
before It. The Grand Lodge specifies that all members of a lodge present at a regular meeting of that lodge, provided that a quorum of sever
is present, are entitled to vote and thus make governance decisions on behalf of the lodge. The Grand Lodge does not authorize delegating
this authority to a smaller body. Thus the seventy-three members of Mosaic Lodge form its governing body.
Part VI, Section A, Line 8: As required by the Grand Lodge, the secretary of a lodge records the minutes of every regular and special
meeting of the lodge in a minutes book which is kept for an indefinite period with most being kept from the time that the lodge was
chartered by the Grand Lodge. During a regular meeting of Mosaic Lodge, various committees will give a verbal report of their activities, if
any. These reports are entered into the minutes of that meeting. Any recommendations made by a committee must be voted upon by the
members of the Lodge present at a regular meeting.
Part VI, Section B, Line 11: The data for Form 990 is initially prepared by the Treasurer of Mosaic Lodge and then given to a C.P.A. firm for
review and preparation. The Treasurer reviews the completed Form 990 at a regular meeting of the Lodge the members present consti-
tuting the governing body. Upon request, any member of the Lodge may examine Form 990 in detail.
Part VI, Section B, Line 15: As a small token of appreciation for their service, Mosaic Lodge provides for the annual payment of honorariums
to three of its officers the Master, Treasurer, and Secretary. These honorariums; \$75, \$150, and \$300 respectively; are determined by
tradition and the Lodge's By-Laws. An amendment to the By-Laws would be required in order to change the amounts specified therein. The
current amounts have been in effect since 2001.

Schadula O (Form 990 or 990-EZ) (2010)	Page
Name of the organization Ancient Free and Accepted Masons 125 Mosaic Lodge	Employer identification number 42-6066292
Part VI, Section C, Line 19: The governing documents of Mosaic Lodge consist of the Constit	tution and Laws for Subordinate Lodges of the
Grand Lodge of lowa and the By-Laws of Mosaic Lodge which may not be inconsistent or in c	conflict with those of the Grand Lodge. Mosaic
Lodge does not have a conflict of interest policy. The financial records of Mosaic Lodge are r	maintained by the Treasurer. The above docu-
ments are available for examination by any member of the Lodge or members of the public up	
Part XI, Line 5: Unrealized gains on investments	
Part XII, Line 2: The Treasurer of Mosaic Lodge annually complles a written report summarizing	ng the financial activities of the Lodge for the
receding year. As required by the Laws for Subordinate Lodges of the Grand Lodge of Iowa,	the financial records of the Lodge, including
ne Treasurer's annual report, are examined annually by the Finance Committee of the Lodge.	The Finance Committee reports its findings a
regular meeting of the Lodge and recommends whether the annual report compiled by the Tr	reasurer should be accepted. If accepted, this
eport becomes a part of the minutes of the Lodge, and a copy of the report is sent to the Gran	nd Lodge of Iowa.
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Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 1 (continued)

Briefly describe the organization's mission.

BY TEACHING THE GREAT PRINCIPLES OF BROTHERLY LOVE, RELIEF, AND TRUTH; AND BY THE OUTWARD EXPRESSION OF THESE,
THROUGH ITS FELLOWSHIP, COMPASSION, AND CONCERN, TO FIND WAYS IN WHICH TO SERVE GOD, FAMILY, COUNTRY, AND SELF.