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Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service 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.

For the 2011 calendar year, or tax year beginning January 2011, and ending 20 11 C Name of organization Most Worshipful Grand Lodge of Free & Accepted Masons of AK D Employer identification number 92-0082478 Address change Doing Business As E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/sulte Name change 907-561-1477 PO Box 190668 Initial return City or town, state or country, and ZIP + 4 Terminated Anchorage, Alaska 99519-0668 G Gross receipts \$ Amended return H(a) Is this a group return for affiliates? Yes No Jerome P, Wasson F Name and address of principal officer Application pending PO Box 190668, Anchorage, Alaska 99519-0668 H(b) Are all affiliates included? The Yes V No If "No," attach a list. (see instructions) 501(c)(3) 501(c) (Tax-exempt status Website: ▶ Alaska Masons.org H(c) Group exemption number ▶ Association ☐ Other ► L Year of formation 1982 M State of legal domicile Form of organization Corporation Trust Part I To Provide day to day services of 20 Member Briefly describe the organization's mission or most significant activities: **Lodges and other Grand Lodges** Activities & Governance Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) . . . 3 6 Number of independent voting members of the governing body (Part VI, line 1b) 0 1 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 5 6 85 Total number of volunteers (estimate if necessary) . . . 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 0 Net unrelated business taxable income from Form 990-T, line 34 **7b** Prior Year Current Year Contributions and grants (Part VIII, line 1h). 45.783 64.566 Program service revenue (Part VIII, line 29) 0 9 Investment Ricome (Part VIII, column (A) lines 3, 4, and 7d) . 41.363 6,952 10 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 7.742 16,081 11 Total revenue + add lines 8 through 11 (rhust equal Part VIII, column (A), line 12) 12 94 888 87,599 Grants and similar amounts paid [Part IX, column (A), lines 1-3) . . . 0 n 13 O 0 14 Benefits paid-to-or-for-members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 13,751 12,605 15 Professional fundraising fees (Part IX, column (A), line 11e) 0 16a Total fundraising expenses (Part IX, column (D), line 25) ▶ 92.626 19.887 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 106,377 32,492 18 55,107 Revenue less expenses. Subtract line 18 from line 12 -11.489 19 Beginning of Current Year **End of Year** 848.511 844,432 20 Total assets (Part X, line 16) 14,788 21 5,270 Total liabilities (Part X, line 26) . 829,634 22 Net assets or fund balances. Subtract line 21 from line 20 843.241 Signature Block Part II 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. swet Signature of officer Date Sign Ames ZRAND TREASURED Here Type or print name and title Date Print/Type preparer's name Preparer's signature Check | if Paid self-employed **Preparer** Firm's EIN ▶ Firm's name **Use Only** Phone no. Firm's address ▶ May the IRS discuss this return with the preparer shown above? (see instructions) ✓ Yes
☐ No

Form **990** (2011)

	90 (2011)				Page ∠
art		atement of Program Service Acc			
		heck if Schedule O contains a resp	onse to any question in this Par	t III	<u> U</u>
1		describe the organization's mission:	ladges and other Grand Lodges in B	North and South America as well as i	ndividual
	Mason	ride day to day services of 20 member and affiliated bodies. Provide counci	luidance and education as required	and promote fraternal relations wor	Idwide
	WIASUITS	and anniated bodies. Flowide counci	i didance and education as required	and promote fracting relations wo	
2	Did the	organization undertake any significa	ant program services during the ye	ear which were not listed on the	
		orm 990 or 990-EZ?]Yes ☑No
	If "Yes,	" describe these new services on Sc	hedule O.		
3		e organization cease conducting, c			
	service	s?		[⊒Yes ☑No
		" describe these changes on Schedu			
4	expens	ne the organization's program services. Section 501(c)(3) and 501(c)(4) and allocations to others, the total expending the services.	organizations and section 4947(a	a)(1) trusts are required to report	as measured by the amount of
	J		• , , , , , , , , , , , , , , , , , , ,		,
4a	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
	•				
41.	<u> </u>	\((\frac{1}{2}\)\)	in all reliance are as a fifth	\/Devenue ¢	
4b	(Code:) (Expenses \$	Including grants of \$) (Hevenue \$)

		*			

					•
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
					,,.
4d	Other r	program services (Describe in Sched	ule O.)	······	
	(Expen			e\$ o)	
40		program service expenses	0	- ,	····

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Form 99	0 (2011)		F	ege 3
Part I	V Checklist of Required Schedules	·		
_	la Alan anno institut dan antiqui CO4/a\/a\/a\/a\/a\/a\/a\/a\/a\/a\/a\/a\/a\/		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		1
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		▼
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		1
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		1
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		V
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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		√
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		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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 temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
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.		1	
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		✓
	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	11b		√
	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	11c		√
d	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	11d		√
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e		✓
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X. Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f		✓
	Schedule D, Parts XI, XII, and XIII	12a		✓
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a b	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	14b		1
16	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV 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	15		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	16		√
18	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 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		1
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		1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19 20a	 	1
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	$\vdash \dashv$	1

Part	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
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		1
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		√
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		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		√
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 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		1
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		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		✓
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 b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
С	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	28c		√
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		
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		
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		<u>√</u>
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		▼
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		7
b	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	35b	·	✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	<u> </u>		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		✓
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	38	1	
		<u>. </u>		

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Part				
	Check if Schedule O contains a response to any question in this Part V	·		
4.	Estable and because and in Box 0 of Form 1006 Fator 0 if not applicable	-	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			ŀ
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	reportable gaming (gambling) winnings to prize winners?	4.		,
0-	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1c		1
2a				ŀ
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 1	O.L	,	ŀ
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	√ _	
2-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2-		,
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a 3b		1
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	30		V
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		1
	If "Yes," enter the name of the foreign country: ▶	-40		' -
b	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
E	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
5 a	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
b	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		1
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	3	-	 •
va	organization solicit any contributions that were not tax deductible?	6a		/
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			<u> </u>
-	gifts were not tax deductible?	6b		1
7	Organizations that may receive deductible contributions under section 170(c).			Ť
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			l
	and services provided to the payor?	7a		1
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		1
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7 f	_	✓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		1
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		1
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			ļ
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		✓
9	Sponsoring organizations maintaining donor advised funds.	_		١.
а	Did the organization make any taxable distributions under section 4966?	9a		/
ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		1
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			ŀ
b				ŀ
11_	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
a b	Gross income from members or shareholders			ŀ
•	against amounts due or received from them.)			
120	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		1
12a b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b N/A			┝
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state?	13a	-	1
a	Note. See the instructions for additional information the organization must report on Schedule O.			Ť
b	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			
С	Enter the amount of reserves on hand	Ì		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
	If "Ves " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		1

Part '					
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change				
Casti	Check if Schedule O contains a response to any question in this Part VI		<u> </u>		<u> </u>
Secu	on A. Governing Body and Management			Yes	No
12	Enter the number of voting members of the governing body at the end of the tax year	1a 6			
	If there are material differences in voting rights among members of the governing body, or				}
	if the governing body delegated broad authority to an executive committee or similar				
	committee, explain in Schedule O.				•
b	Enter the number of voting members included in line 1a, above, who are independent .	1b 6			
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?	· · · · ·	2		1
3	Did the organization delegate control over management duties customarily performed by or				
	supervision of officers, directors, or trustees, or key employees to a management company or other	-	3		/
4	Did the organization make any significant changes to its governing documents since the prior Form 9		4		V
5	Did the organization become aware during the year of a significant diversion of the organization		5	1	✓
6	Did the organization have members or stockholders?		6	-	
7a	one or more members of the governing body?		7a	1	
	Are any governance decisions of the organization reserved to (or subject to approve		<u> </u>	_	
b	stockholders, or persons other than the governing body?		7b	✓	
8	Did the organization contemporaneously document the meetings held or written actions ur				_
	the year by the following:	3	l		
а	The governing body?		8a	1	
	Each committee with authority to act on behalf of the governing body?		8b	✓	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cann	ot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule C		9	L	✓
Secti	on B. Policles (This Section B requests information about policies not required by the	e Internal Reven	ue C	ode.)	
			r	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a	✓	
b	If "Yes," did the organization have written policies and procedures governing the activities of affiliates, and branches to ensure their operations are consistent with the organization's exent their operations.		10b	1	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before	re filing the form?	11a		✓
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	•			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a		1
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give		12b		1
C	Did the organization regularly and consistently monitor and enforce compliance with the describe in Schedule O how this was done	policy? If "Yes,"	12c		1
13	Did the organization have a written whistleblower policy?		13		1
14	Did the organization have a written document retention and destruction policy?		14		1
15	Did the process for determining compensation of the following persons include a review				
	independent persons, comparability data, and contemporaneous substantiation of the deliberation	n and decision?			
а	The organization's CEO, Executive Director, or top management official		15a	<u> </u>	1
b	Other officers or key employees of the organization		15b	ļ	✓
46	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	Han aman			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or sim with a taxable entity during the year?		16a		1
b	If "Yes," did the organization follow a written policy or procedure requiring the organization	n to evaluate its		T	r
	participation in joint venture arrangements under applicable federal tax law, and take steps	to safeguard the			
	organization's exempt status with respect to such arrangements?	<u> </u>	16b		1
Secti	on C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed ► Alaska				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a	and 990-T (Section	า 501((c)(3)s	only)
	available for public inspection. Indicate how you made these available. Check all that apply.				
40	Own website Another's website Upon request	umanta sa-filat -	f int-	raat -	olice
19	Describe in Schedule O whether (and if so, how), the organization made its governing doc and financial statements available to the public during the tax year.	uments, conflict c	ı ınte	est þ	oncy,
20	State the name, physical address, and telephone number of the person who possesses the b	ooks and records	of the	•	
	organization: Verome P. Wasson, 544 F14th Anchorage, Alaska 99519-0668 907 561-1477				

Part VII	Compensation of C	Officers, Directors,	Trustees,	Key Employees,	Highest	Compensated	Employees	, and
	Independent Contr	ractors						

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 employees."
- 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 neither the organization no	r any relate	d org	aniz	atio	n c	ompe	nsa	ited any currer	nt officer, directo	r, or trustee.
				•	C)					
(A)	(B)	Position						(D)	(E)	(F)
Name and Title	Average	(go not check more than one						Reportable	Reportable	Estimated
	hours per		officer and a director/trustee)						compensation from related	amount of
	week (describe	우급	sul	₽	8	age	ξ	from the	organizations	other compensation
	hours for	and	₹	Officer	9	망망	Former	organization	(W-2/1099-MISC)	from the
	related organizations	호트	one		Key employee	8 8	`	(W-2/1099-MISC)	1	organization and related
	ın Schedule	Individual trustee or director	1		8	#				organizations
	0)	8	Institutional trustee			Highest compensated employee				
							 			
(1) Jerry W. Pinion	1				ļ					
President	40	✓		✓	Ĺ		_	0	0	0
(2) James P. Herrington						ŀ				
Vice President	30	✓		✓				0	0	0
(3) David Worel	_									
Director	20	✓		✓	<u> </u>			0	0	0
(4) Doug Teninity							}			
Director	20	✓		✓				0	0	0
(5) Jerome P. Wasson					l					
Secretary	20	1		✓			<u></u>	0	0	0
(6) James D. Grubbs									1	
Treasurer	20	1		✓			_	0	0	0
(7) Thomas Schram	I									
Office Manager	20	✓		✓				12,605	0	0
(8)								,		
(9)								•		
(10)										
		<u> </u>	L	L	ļ	ļ	 _	 		
(11)	1									
(12)										7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
(13)					_					
	 	ļ	<u> </u>	<u> </u>	\vdash	1	<u> </u>	<u> </u>	 	
(14)	4									
	l	l	<u> </u>		1	1	<u> </u>	l	l	

Part	VII Section A. Officers, Directors, Trust	ees, Key E	mplo	yees			lighes	st C	ompensated E	mployees (co	ntinue	d)	
	(A) Name and trile	(B) Average hours per week	rage box, unless person is bot officer and a director/trusek					an (ee)	Reportable compensation	(E) Reportable compensation frelated	(F) Estimated om amount of other		t of
		(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS		compens from t organiza and rela organiza	ation he ation ated
(15)			:				<u>a</u>				+		
(16)			ļ ——								+-		
(17)											+		
(18)			<u> </u>					-		<u> </u>	+		
(19)								-					
(20)									,	<u>, , , , , , , , , , , , , , , , , , , </u>			<u> </u>
(21)								_					
(22)			<u> </u>					-					
(23)												<u></u>	
(24)													
(25)			<u> </u>										
1b c	Sub-total		n A		 :		•	>	12,605		0		0
d 2	Total (add lines 1b and 1c)	not limited						▶ e) w	12,605 ho received m		0 ,000 c	of	0
3	Did the organization list any former of employee on line 1a? If "Yes," complete 5	ficer, direc	tor, o	or tr	uste	e, ividu	key e	emp	oloyee, or high	nest compens	ated	3 Y	es No
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of re	portal	ble (con	nper	nsatio						
5	Did any person listed on line 1a receive of for services rendered to the organization?									zation or indiv	idual	4	
Section	on B. Independent Contractors	: 11 103, 0	- Inpi	010	007		100	0/ 3	sucii persori	• • • • •	<u> </u>	5	
1	Complete this table for your five highest of compensation from the organization. Replyear.												s tax
	(A) Name and business add	ress							(B) Description of s	ervices	C	(C) ompensation	วก
2	Total number of independent contractor							th	ose listed abo	ove) who			

VIII	Statement of Revenue	(A) Total revenue	(B) Related or	(C) Unrelated	(D)
		Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
1a	Federated campaigns 1a				
b	Membership dues 1b 47,670				
C	Fundraising events 1c 7,984		1		
d	Related organizations 1d		Ī		
е	Government grants (contributions) 1e 0		•		
f	All other contributions, gifts, grants, and similar amounts not included above 1f 8,948			:	
g	Noncash contributions included in lines 1a-1f: \$	1			
h	Total. Add lines 1a–1f	64,566		ľ	
	Business Code				
2a					
Ь					
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) ▶	6,952	0	0	6,95
4	Income from investment of tax-exempt bond proceeds ►	0	0	0	
5	Royalties	0	0	0	·
	(i) Real (ii) Personal] [1	
6a	Gross rents 0 0	<u>'</u>			
b	Less: rental expenses 0 0	-i	ļ		
C	Rental income or (loss) 0	<u>'</u>	i		
d	Net rental income or (loss)	0	0	0	(
7a	Gross amount from sales of (i) Securities (ii) Other]		1	
	assets other than inventory 0 0	<u>'</u>	ŀ	1	
b	Less: cost or other basis		[1	
	and sales expenses . 0 0	- I		1	
C	Gain or (loss) 0 0	-1 1	ļ	ļ	
d	Net gain or (loss)	 	0	0	
8a	Gross income from fundraising events (not including \$ 0				
	of contributions reported on line 1c).				
	O = 0 = 0.4 P = 40	,	1		
_		4 1	i		
	2000: 411001 0/4011000 :	- 1	ı		
C	Net income or (loss) from fundraising events . Gross income from gaming activities.	0		0	
74	0 0 10111 10				
		-4	ļ		
b	Less: direct expenses b 0 Net income or (loss) from gaming activities b	-{ }	ا	ام	
100	Gross sales of inventory, less	0	0	0	
IVa	returns and allowances a 6,221		1		
_		-i		İ	
b	Less: cost of goods sold b 14,461 Net income or (loss) from sales of inventory b	-i)		ام	0.24
<u>c</u>	Miscellaneous Revenue Business Code	8,240	0	0	8,24
44-		7 330		ٳ	7.00
11a	Assessments, Petitions, etc	7,339	0	0	7,33
b	Assessments Bulletins				3,17
0	Reimbursed Expense	13,804	0	0	13,80
d	All other revenue	ļ 	0	<u> </u>	
e 12	Total revenue. See instructions.	24,321			
-	TOTAL PARTIES SEE HISHUCHUIS	87,599	0	O	23,03

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).

	Check if Schedule O contains a respont include amounts reported on lines 6b, 7b, and 10b of Part VIII.	se to any question (A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
1	Grants and other assistance to governments and		expenses	general expenses	expenses
•	organizations in the United States. See Part IV, line 21	اه	o		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	0	0		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	o	o		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	0 12,605	0	12,605	0
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
7	Other salaries and wages	0	0	0	0
8	Pension plan accruals and contributions (include				
•	section 401(k) and 403(b) employer contributions)	٥	o	o	0
9	Other employee benefits	0	0	0	0
10	Payroll taxes	1,166	0	1,166	0
11	Fees for services (non-employees):	.,,			
a	Management	o	o	0	0
b	Legal	1,921	1,921	0	0
C	Accounting	8,000	0	8,000	0
d	Lobbying	0	0	0	0
e	Professional fundraising services. See Part IV, line 17	0			0
f	Investment management fees	9,966	9,966	0	0
g	Other	0	0	0	0
12	Advertising and promotion	0	0	0	0
13	Office expenses	4,901	4,901	0	0
14	Information technology	1,224	1,224	0	0
15	Royalties	0	0	0	0
16	Occupancy	5,400	0	5,400	0
17	Travel	15,200	15,200	0	0
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings .	22,446	22,44	0	0
20	Interest	0	0	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization .	1,463	0	1,463	0
23	Insurance	7,918	0	7,918	0
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	Dues Subscriptions, etc	1,198	1,198	0	0
ь	Regalia	3,965	3,965	0	0
C	GW Memorial Association	2,146	2,146	0	0
d	Discretionary Expenses Fund	1,500	1,500	0	0
e	All other expenses Bank Fees, etc	186	186	0	0
25	Total functional expenses. Add lines 1 through 24e	101,205	4,653	36,552	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)	0	0	0	0

		(A) Beginning of year		(B) End of year
1	Cash-non-interest-bearing	17,166	1	27,68
2	Savings and temporary cash investments	801,092	2	791,90
3	Pledges and grants receivable, net	0	3	
4	Accounts receivable, net	707	4	1,17
5	Receivables from current and former officers, directors, trustees, key			
	employees, and highest compensated employees. Complete Part II of			
	Schedule L	0	5	
6	Receivables from other disqualified persons (as defined under section	·		
	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
1	employers and sponsoring organizations of section 501(c)(9) voluntary			
	employees' beneficiary organizations (see instructions)	o	6	
7 8	Notes and loans receivable, net	0	7	
8	Inventories for sale or use	22,413		15.03
9	Prepaid expenses and deferred charges	0		
10a			-	
	other basis. Complete Part VI of Schedule D 10a			
l b	- - - - - - - - - -	7,133	10c	8,64
111	Investments—publicly traded securities	3,338		
12	Investments – other securities. See Part IV, line 11	0		
13	Investments—program-related. See Part IV, line 11	20,923		
14	Intangible assets	0		
15	Other assets. See Part IV, line 11	0	15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	848,511	16	844,43
17	Accounts payable and accrued expenses	2,056	17	84
18	Grants payable	0	18	-
19	Deferred revenue	3,214	19	13,95
20	Tax-exempt bond liabilities	0	20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D.	0	21	
22	Payables to current and former officers, directors, trustees, key			
	employees, highest compensated employees, and disqualified persons.		}	
	Complete Part II of Schedule L	o	22	
23	Secured mortgages and notes payable to unrelated third parties	0	23	· · · · · · · · · · · · · · · · · · ·
24	Unsecured notes and loans payable to unrelated third parties	0	24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part X	o		
1	of Schedule D	Ì	25	
26	Total liabilities. Add lines 17 through 25	5,270		14,79
	Organizations that follow SFAS 117, check here ▶ ☐ and complete	- · · · · · · · · · · · · · · · · · · ·		
	lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets	o	27	
28	Temporarily restricted net assets	0	28	
29	Permanently restricted net assets	0	29	*****************
	Organizations that do not follow SFAS 117, check here ▶ □ and			
1	complete lines 30 through 34.			
27 28 29 30 31 32 33	Capital stock or trust principal, or current funds	o	30	
31	Paid-in or capital surplus, or land, building, or equipment fund	843,241	31	829,63
32	Retained earnings, endowment, accumulated income, or other funds .	0	32	
33	Total net assets or fund balances	843,241		829,63
	Total liabilities and net assets/fund balances	848,511		844,43

0,111				A0
Par	XI Reconciliation of Net Assets			
	Check if Schedule O contains a response to any question in this Part XI	<u></u>		
	Total revenue (revet acced Dort VIII actions (A) line 10)			7,599
1	Total revenue (must equal Part VIII, column (A), line 12)			1,205
2	Total expenses (must equal Part IX, column (A), line 25)			3,606
3				3,201
4	The about of faire balances at beginning or your (mast square arry, into se, solarini ()).		- 04	3,201
5	Other changes in net assets or fund balances (explain in Schedule O)			
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))		82	9.635
Part	XII Financial Statements and Reporting			
	Check if Schedule O contains a response to any question in this Part XII			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a]	✓
b	Were the organization's financial statements audited by an independent accountant?	2b		
С	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?	2c		1
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	1	Ì	
За	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		✓
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		1
		Fon	n 990	(2011)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2011

Department of the Treasury Internal Revenue Service Name of the organization 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

Employer identification number

Most Worshipful Grand Lodge of Fee & Accepted Masons of Alaska	92-0084278
PART V 3(b) We had no unrelated income, we have no other businesses	
PART V 13(b) We are not an Insurance organization and therefore do not sell insurance	
PART V 14(b) We did not receive any indoor tanning services	
PART VI 1(a) There are do differences in officers voting rights, they all have 1 vote	
PART VI (b) All board members are the Executive Committee	
PART VI 6 All the members of the MW Grand Lodge of Free & Accepted Masons of Alaska are members of this organization	
PART VI 7(a) Board Members are elected by the members of the Grand Lodge	
PART VI 7(b) Members are informed of the board's decisions and voted on at the annual meeting	
PART VI 11(b) Copies of the Tax returns are kept in the organiations office for review, when requested	
PART VI 19 All codes, documents are available for review in the office upon request	
PART VII No officers are compensated for their duties, they are volunteers	
PART XII 3(b) The organization conducts internal audits of the books as directed by the Alaska Masonic Code	
