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## Fam **99**(

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

OMB No. 1545-0047

2011

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.

Open to Public Inspection

<u>A</u>	For the	2011 cale	ndar year, or tax year beginning	January 1	, 2011, a	nd endir	ng Decen	nber 31	, 20 11	
В	Check if	applicable:	C Name of organization Palo Alto	Roller Lodge No. 34	16 F&AM			D Employ	er identificati	on number .
	Address	change	Doing Business As Palo Alto Ro	olier Lodge No. 346	F&AM				94-100267	8
	Name ch	nange :	Number and street (or P.O. box if rr	nail is not delivered to s	treet address)	Room/su	iite	E Telepho	ne number	· · · · · ·
	initial ret	um	P.O. Box 346						650-322-03	38
	Terminat	ted	City or town, state or country, and a	ZIP + 4						
$\overline{\Box}$	Amende	d return	Palo Alto, CA 94320-0346					<b>G</b> Gross n	aceints \$	39823.19
=			F Name and address of principal offic	er: Kevin D. Hall			Lifet to this			Yes 🗹 No
	4,	p	289 Fernando Ave, Palo Alto, (				1		ncluded?	
	Tay-over	mot status:	<b>□</b> 501(c)(3) <b>☑</b> 501(c) (		4947(a)(1) or [	527			ist (see instr	
	Website		w.paloaltolodge.com	10 ) 4 (Biodelio)	L 4947/A/(1) OF L	321		•	number ►	
	·		<del></del>	ation ✓ Other ► Fro	eemasonr L-Yea	r of forma				ile: CA
	arti	Summ		andi [v] Olier > Fit	SCHIMSON   E-1CE	r OF FORTING	tion: 1902	M State	of legal domic	zie: CA
	_		<b>-</b>	ion or most sissif	innet nethiting				<del></del>	
	•	-	scribe the organization's miss					<del></del>		
8	1	rreemasi	onry is the oldest fraternity still	active today. It is d	edicated to the d	cause of	helping good	men be	come better	men.
ğ	l									
9	١ ـ									
Activities & Governance			is box ▶☐ if the organization			sposed (	of more than	25% of	its net asse	ts.
4			of voting members of the gove					3		140
9			of independent voting membe					4		0
₹	5	Total nun	nber of individuals employed i	n calendar year 20	)11 (Part V, line	2a) .		5		4
Ç	l .		nber of volunteers (estimate if					6		40
			elated business revenue from					7a		0
	Ь	Net unrel	ated business taxable income	from Form 990-T	, line 34⊆	· .		7b		0
Revenue						ပ	Prior Ye	ar	Curre	nt Year
	8	Contribut	tions and grants (Part VIII, line	1h) . (c) . 2a) (S) . APR	1	SO ·	•	3309.04		7193.00
	9	Program	service revenue (Part VIII, line		0.0		4901.94			
Š	10	Investme	nt income (Part VIII, column (A	9184.75		9728.25				
€	11	Other rev	enue (Part VIII, column (A), lin		0.0		18000.00			
	12	Total reve	enue-add lines 8 through 11 (r	2493.79	39823.19					
			nd similar amounts paid (Part I					0.0		0.0
			paid to or for members (Part D			· ·		0.0		0.0
		-	other compensation, employee		2061.00		11078.48			
Expenses			nal fundraising fees (Part IX, o			_,,o,		0		0
Dec			draising expenses (Part IX, col			0.0				<del> </del>
Ä			penses (Part IX, column (A), lin			<del></del>		35886.98		20024 55
	ľ	•	enses. Add lines 13-17 (must	<del></del>	7947.98		38031.55			
			less expenses. Subtract line 1			·	42094.53			
		HEVEILUE	iess expenses. Subtract line i	ondinare iz .	<del></del>		Beginning of Cu	-5454.19	End a	-2271.34 f Year
Net Assets or Fund Balances	20	Total ass	ets (Part X, line 16)			ļ.				
25	20		• •				54	1969.76		507515.42
	21		ilities (Part X, line 26)			· ·		0.0		0.0
			ts or fund balances. Subtract I	ine 21 from line 20	<u>,</u>		54	1969.76		507515.42
-	art II		ure Block							
Uni	der penat • comect	ties of perjur and comple	ry, I declare that I have examined this etc. Declaration of preparer (other than	return, including accom Adficer/#Shased on all	panying schedules information of which	and state	ments, and to the	e best of r	ny knowledge	and belief, it is
	,				The state of the s	прифан	1 125 21 Y NI DWA			
e:	_		Hauer S	ed)				<u> </u>		
Sig		Signa	ature of officer	:1	1.		Dat	//	101	7 d
He	re	<b>                                     </b>	harles S. ORA	<del>CCH</del>	TReas	<u> 5 U R</u>	er f	JOQ.	1 21,	2012
		<del></del>	or print name and title	T				<u>''                                   </u>		
Pa	id	Print/Typ	oe preparer's name	Preparer's signature		D	ate .	Check	if PTIN	
•	epare:	r		<u> </u>				self-emp		•
	e Only		ame 🕨				Firm	's E!N ▶		
		Firm's ax	ddress ▶				Pho	10 no.		/
Ma	the IR	S discuss	this return with the preparer	shown above? (se	e instructions)					Yes No

Part		tatement of Program Service		rage £
1	Briefly	Theck if Schedule O contains a describe the organization's miss	response to any question in this P ion:	art III
	Free a	nd Accepted Masons of California		
2	prior F	orm 990 or 990-EZ?		· · · · · · · · · · □ Yes • ☑ No
3	service	e organization cease conductires?	ng, or make significant changes in	how it conducts, any programYes  No
4	Descri expen	be the organization's program sess. Section 501(c)(3) and 501(c)	ervice accomplishments for each of	its three largest program services, as measured by 7(a)(1) trusts are required to report the amount of each program service reported.
4a	(Code	) (Expenses \$	including grants of \$	) (Revenue \$)
4b	(Code:	) (Expenses \$	including grants of \$	) (Revenue \$)
4c	(Code:	) (Expenses \$	including grants of \$	) (Revenue \$)
4d	(Exper		•	ue\$ )
4e	Total	rogram service expenses ▶	N/A	

Part	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	ļ	1
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	<u> </u>	1
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	<b>Section 501(c)(3) organizations.</b> 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		1
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		1
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		1
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		1
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		/
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	  11a		/
b	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		1
C	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		1
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		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
	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		/
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		1
b	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		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		1
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> </u>	1
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		1
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> </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		1
19	Did the organization report more than \$15,000 of gross income from garning activities on Part VIII, line 9a?  If "Yes," complete Schedule G, Part III	19	<u> </u>	1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	<del> </del>	1
	If "Yes" to line 20s, did the emanization attach a copy of its audited financial statements to this return?	20a	$\vdash$	-

Part	Checklist of Required Schedules (continued)			
٠ مم			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		1
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		1
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		<b>√</b> '
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		1
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):		٠	
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		<b>√</b>
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	28c		1
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		1
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		1
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		1
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		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
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	:	1
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		1
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		1
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
			000	

Part	V Statements Regarding Other IRS Filings and Tax Compliance			ago
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	ł		1
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
<b>2</b> 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 2a 4			
b	If at least one is reported on line 2a, did the organization file all required federal employment fax returns? .	2b	1	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓_
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	<u> </u>	<u> </u>
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)?			1
_	•	4a		<b>-</b>
Þ	If "Yes," enter the name of the foreign country: ►  See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	l		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	_		,
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a 5b		1
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		-
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	<del>  •</del>		
	organization solicit any contributions that were not tax deductible?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			Ť
	gifts were not tax deductible?	6ь		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		ł	
	and services provided to the payor?	7a		✓
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?	7c		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<b>V</b>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<b>√</b>
9 h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<b>√</b>
8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	7h	ļ	<u> </u>
•	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.	<u> </u>		<u> </u>
а	Did the organization make any taxable distributions under section 4966?	9a		1
Ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		1
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12	j		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
Ь	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
100		40-		
12a b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b	12a		
13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers.			
ıs a	Is the organization licensed to issue qualified health plans in more than one state?	13a	<u> </u>	1
-	Note. See the instructions for additional information the organization must report on Schedule O.	13a	<del>                                     </del>	<b>-</b>
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			
c	Enter the amount of reserves on hand	İ		Ì
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b		1

Part	VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below,	and		"No"
rait	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S			
•	Check if Schedule O contains a response to any question in this Part VI			🗆
Secti	on A. Governing Body and Management			<u>.                                    </u>
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 140			
	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.	ļ	1	
Þ	Enter the number of voting members included in line 1a, above, who are independent . 1b 0	Į	l	
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 customarity performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		i
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		<b>✓</b>
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5	<u> </u>	<b>✓</b>
6	Did the organization have members or stockholders?	6		1
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	1		
_	one or more members of the governing body?	7a		<b>✓</b>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,		Ì	1
	stockholders, or persons other than the governing body?	7b	<u> </u>	<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	ļ	ļ	
_	• •			
a	The governing body?	8a 8b	$\vdash$	<b>V</b>
9 9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	00	<del> </del>	<del>  •</del>
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	ŀ	1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven		ode.)	<u></u>
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		<b>√</b>
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	1	L
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		1
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	l		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		<b>V</b>
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	<u> </u>	<b>✓</b>
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		1
13	Did the organization have a written whistleblower policy?	13	L	✓
14	Did the organization have a written document retention and destruction policy?	14	ļ	✓
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?			
8	The organization's CEO, Executive Director, or top management official	15a	·	1
Þ	Other officers or key employees of the organization	15b		✓
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a	<u> </u>	1
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the		ļ	Į.
	organization's exempt status with respect to such arrangements?	16b	<u>L</u>	✓_
	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► California			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	n 501(	(c)(3)s	only)
	Own website  Another's website  Upon request			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict o	f inte	rest p	olicy,
~~	and financial statements available to the public during the tax year.	-e ··	_	
20	State the name, physical address, and telephone number of the person who possesses the books and records organization: ► Charles Grech, 34400 Mission Blvd., Union City, CA 94587	or the	;	

Form 990 (2011)
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# 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.

☐ Check this box if neither the organization	n nor any relate	d org	aniz			ompe	ensa	ated any currer	t officer, director	r, or trustee.
		(C)								
(A)	(18)	(B) Position						(0)	(E)	(F)
Name and Title	Average	(do not check more than one						l	Reportable	Estimated
. —	hours per							compensation	compensation from	
	week	Offices and a circular deside,					<u> </u>	4	related	other
	(describe	용품	ᆵ	Officer	<u> </u>	35	Former	the	organizations	compensation
	hours for	▍뚫좆	₹	<u> </u>	<u> </u>	무글	Į	organization	(W-2/1099-MISC)	from the
	related	3 2	賣	~	뒴	\ \& \\ \& \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	₹	(W-2/1099-MISC)		organization
	organizations	4 =	를		Key employee	9			1	and related
	in Schedule	Individual trustee or director	2		8	_ ₽				organizations ,
	0)	8	institutional trustee			<b>1 2 3</b>	Į .	ł		
		<u> </u>	L			Highest compensated employee	L	ļ		
(4) Diaband Wine Courses										
(1) Richard Wing, Secretary	5.0			/			i	6000.00	0	0
(2) Charles S Grech, Treasurer	3.0	<b></b> -	-	┡			$\vdash$	5000.00	-	<u>_</u>
	5.0			1				600.00	o	0
(3) Yvonne Myers, Editor							Π			
	4.0	i .			1			1650.00	o	0
(4) Luis Orozco, Organist				├─	<del>                                     </del>		1	1000.00	<u> </u>	
(4) Luis Ordzos, Organisc	1.0			1				1051.00	ا	0
(5) Kevin D. Hall, Sr., Master				<u> </u>						
				<b>/</b>				0.0	0.0	. 0
(6) Sinsuat Andang Senior Warden										
				✓	L			0.0	0.0	0.0
(7) Larry Fama, Junior Warden										
				<b>√</b>				0.0	0.0	0.0
(8)										
(0)		ļ	_		<u> </u>		L	ļ		
(9)										
(10)			┝┈	┢┈	<del> </del>		<u> </u>			
						l				
(11)										
(12)			$\vdash$	$\vdash$	L	<b></b> -	-	<b></b>		
19						•				
(13)			П							
(14)				-	$\vdash$			<del> </del>		
1.7				Į						

Part VIII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)														
		1			_	7								
•	(A) (B)					ition	. abon o	~~~	(C))	(E)	ĺ		<b>(F)</b>	
	Name and title	Average	(do not check more than of box, unless person is both						Reportable	Reportable	le	Es	timated	i
		hours per					or/trus		compensation	compensation	from		nount of	f
		week (describe	익물	2	Q	줎	3 =	77	from the	related organizatio	ns		other pensati	ion
		hours for	Individual trustee or director	Institutional trustee	Highest compensated employee Key employee Officer			Former	organization	(W-2/1099-M			om the	
		related	35	<del>ថ្</del>	]	employee	yee yee	*	(W-2/1099-MISC)				anizatio	
		organizations in Schedule	`₫.	멸		oye.	ğ		]		ľ		i relate Inizatio	
		O)	1 m			0	en en				- 1	~.g-		
				3			<b>P</b>		<b>[</b>		l			
(15)			<del> </del>		Н	├	<u> </u>							
119		•				ŀ					ł			
46		<del> </del>	-	$\vdash$	H		<u> </u>	⊢						
(16)		Į.		[				l	[		l l			
<del></del>					-	_	<u> </u>		· · · · · · · · · · · · · · · · · · ·					
(17)		ļ												
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(18)											į.			
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(19)			ŀ											
(20)														
		<u>l</u>	L											
(21)														
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(22)														
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(23)								$\vdash$			-			
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(24)	<del></del>			$\vdash$	_	$\vdash$		┢						_
<u>v= ·</u> 2		1					ŀ							
(25)		<del></del>	<del>                                     </del>	Н	$\vdash$			┢		··			·····	
<u> </u>		1												
1b	Sub-total	<u> </u>	1	<b>!</b>		L	L	_	9301					
C	Total from continuation sheets to Part	 VII Sactio	 . A	•	•	• •	•		0					
d	T. 4 14: 410: 41 14 1			•	•		•		9301					
<u>u</u>				<u>.</u>		· · ·	<del></del>	<u> </u>	ــــــــــــــــــــــــــــــــــــــ	45 64				
Z	Total number of individuals (including but			ose		ed a	above	e) W	no received m	ore than \$10	30,000	ot		
	reportable compensation from the organi	zauon 🕨 u											124	1
_	Did the constitution the one forms of	C											Yes	No
3	Did the organization list any former of							amp	oloyee, or high	est compe	nsated		1	١.
	employee on line 1a? If "Yes," complete 3								· · · · ·			3	↓	<b>↓</b> ✓
4	For any individual listed on line 1a, is the													]
	organization and related organizations	greater th	an \$1	150,	000	? 1	"Ye	s, "	complete Sch	edule J fo	r such		]	
	individual			•	•		-					4	<u> </u>	1
5	Did any person listed on line 1a receive of						,			ration or ind	lividual			
	for services rendered to the organization	? If "Yes," c	compl	ete	Sch	edu	ile J 1	for s	auch person			5		<b>√</b>
Section	on B. Independent Contractors													
1	Complete this table for your five highest	compensat	ed inc	tepe	end	ent	contr	act	ors that receive	d more tha	n \$100	,000 c	ıf	
	compensation from the organization. Rep	ort compe	nsatio	on fo	or th	ne c	alend	lar y	ear ending wit	h or within t	the orga	anizat	ion's	tax
	year.													
	(4)							Π	(18)			(C	 )	
	Name and business add	ress						1	Description of s	ervices	C	Comper		
				-					<del></del>					
													•	
	<del> </del>	<del></del>						Н				·		
	<del></del>							$\vdash$					•	<del></del>
								1						
2	Total number of independent contractor	ns (includir	na he	rt n	at I	imit	ed to	) th	nse listed ah	we) who				
-	received more than \$100,000 of compens								0	,				

Part	VIII	Statement of Revenue						
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excuded from tax under sections 512, 513, or 514
2 2	1a	Federated campaigns	1a	0.0	- 1,7 -			†
6 2	ь	Membership dues	1b	6993.00			İ	
عَ ق	C	Fundraising events	1c	0.0			ļ	
₽ [	d	Related organizations	1d	0.0				
Contributions, Gifts, Grants and Other Similar Amounts	e	Government grants (contributions)	1e	0.0				
5 5	f	All other contributions, gifts, grants,	<b>⊢</b>	- 0.0			ļ	
풀	_	and similar amounts not included above	11	200.00				
₹ 5	Ω	Noncash contributions included in lines 1:		0.0				
SE	h	Total. Add lines 1a-1f			7193.00			
			<del></del>	Business Code				
<b>1</b>	2a							
ě	Ь							· · · · · · · · · · · · · · · · · · ·
8	C							
2	d							
8	e							:
喜	f	All other program service reven	ue .		4901.94			
Program Service Revenue	9	Total. Add lines 2a-2f			4901.94		L	<u> </u>
	3	Investment income (including						
				▶	9728.25			
	4			ond proceeds▶	0.0		· · · · · · · · · · · · · · · · · · ·	<del>                                     </del>
	5	Royalties	-	· ·	0.0			1
		(i) Rec		(ii) Personal				
	6a	Gross rents					ł	
	b	Less: rental expenses						
	C	Rental income or (loss)						
	d	Net rental income or (loss) .			0.0			
	7a	Gross amount from sales of (i) Securi	ties	(ii) Other				
		assets other than inventory						
	b	Less: cost or other basis						
		and sales expenses .						
	C	Gain or (loss)						
i	d	Net gain or (loss)		▶	9728.25			<u></u>
_								
PT P	8a	Gross income from fundraising		i l				
8		events (not including \$						
Other Revel		of contributions reported on line	-				4	
ě	_	See Part IV, fine 18					}	
ŏ		Less: direct expenses	. b	L			ŀ	1
		Net income or (loss) from fundr		events . >	0.0			ļ
	36	Gross income from gaming active See Part IV, line 19						
			-				ţ	
		Less: direct expenses Net income or (loss) from gamin			0.0			
	10a	Gross sales of inventory,			0.0		ļ	
	IVa		. а					
	Ь	Less: cost of goods sold	_	<del></del>				
	-	Net income or (loss) from sales			0.0		i	
		Miscellaneous Revenue		Business Code	5.0		ļ	
	11a	Transfer from money market		18000.00	18000.00			
	b							<del>                                     </del>
	C				,		<del> </del>	
	d	All other revenue	<del></del>				<u> </u>	
	е	Total. Add lines 11a-11d		•	18000.00	·····	<b></b>	
	12	Total revenue. See instructions		▶	39823.19	· · · · · · · · · · · · · · · · · · ·	<u> </u>	† · · · · · · · · · · · · · · · · · · ·

### 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 response to any question in this Part IX										
	t include amounts reported on lines 6b, 7b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising					
	· · · · · · · · · · · · · · · · · · ·		expenses	general expenses	expenses					
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	0.0								
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	0.0								
4 5	Benefits paid to or for members	9301.00			•					
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								
7		0.0		<del> </del>						
7 8	Pension plan accruals and contributions (include	0.0	**** h	<del> </del>	<u> </u>					
0	section 401(k) and 403(b) employer contributions)	0.0	-							
9	Other employee benefits	0.0								
10	Payroll taxes	1777.48								
11	Fees for services (non-employees):									
а	Management	0.0								
b	Legal	0.0			·······					
G	Accounting	0.0								
d	Lobbying	0.0								
e	Professional fundraising services. See Part IV, line 17	0.0		<del> </del>	<del></del>					
f	Investment management fees	0.0		<del> </del>	<del>,</del>					
-		0.0			<u></u>					
9	Other	0.0	<del></del>	<del> </del>						
12	Advertising and promotion			<del> </del>						
13	Office expenses	2172.35								
14	Information technology	0.0		ļ						
15	Royalties	0.0								
16	Occupancy	4800.00	· · · · · · · · · · · · · · · · · · ·							
17	Travel	0.0								
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0.0			:					
19	Conferences, conventions, and meetings .	636.00								
20	Interest	0.0								
21	Payments to affiliates	0.0			•					
22	Depreciation, depletion, and amortization .	0.0		.,						
23	Insurance	0.0								
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	Required and Expenditures	7422.11								
Ь	Discretionary Expenditures	5731.80								
C	Social and Fraternal Expenditures	10253.79								
d										
e	All other expenses									
25	Total functional expenses. Add lines 1 through 24e	42094.53								
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								

**Balance Sheet** Part X (A) (B) Beginning of year End of year Cash-non-interest-bearing . . . . . . . . . 10063.50 1 8336.25 215586.36 2 361400.37 2 3 0.0 3 0.0 4 0.0 4 0.0 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 5 0.0 0.0 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) . . . . . 0.0 6 0.0 7 0.0 7 0.0 Inventories for sale or use . . . . . . 8 0.0 8 0.0 Prepaid expenses and deferred charges . . . 0.0 9 0.0 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 0.0 Less: accumulated depreciation . . . . 10b 0.0 0.0 b 0.0 10c 211380.62 11 32839.52 11 Investments—publicly traded securities . . . . . . 12 Investments—other securities. See Part IV. line 11 . . . . 12 0.00 13 Investments-program-related. See Part IV, line 11 . . . 0.00 13 14 14 0.00 15 15 104939.28 104939.28 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 541969.76 16 507515.42 17 17 0.0 0.0 18 0.0 18 0.0 19 0.0 19 0.0 20 0.0 20 0.0 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 0.0 21 0.0 Payables to current and former officers, directors, trustees, key 22 Jabilities employees, highest compensated employees, and disqualified persons. 22 0.0 0.0 23 Secured mortgages and notes payable to unrelated third parties . . . 0.0 23 0.0 24 Unsecured notes and loans payable to unrelated third parties . . . 0.0 24 0.0 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X 0.0 0.0 25 26 Total liabilities. Add lines 17 through 25 . . . . 0.0 26 0.0 Organizations that follow SFAS 117, check here ▶ ☐ and complete or Fund Balances lines 27 through 29, and lines 33 and 34. 27 506969.76 27 482515.42 28 10000.00 28 0.0 29 25000.00 29 25000.00 Organizations that do not follow SFAS 117, check here ▶ [] and complete lines 30 through 34. Net Assets 30 0.0 30 0.0 0.0 31 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 0.0 32 Retained earnings, endowment, accumulated income, or other funds. 0.0 32 0.0 33 507515.42 541969.76 33 34 Total liabilities and net assets/fund balances . . . . . . . 541969.76 34 507515.42

Form 990 (2011)					
Par	Xi Reconciliation of Net Assets	<del>.</del>			ge 12
	Check if Schedule O contains a response to any question in this Part XI	<u></u> .	<u></u>	<u> </u>	<b>V</b>
1	Total revenue (must equal Part VIII, column (A), line 12)	111		398	23.19
2	Total expenses (must equal Part IX, column (A), line 25)	2		420	94.53
3	Revenue less expenses. Subtract line 2 from line 1	3		(227	1.34)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		5419	69.76
5	Other changes in net assets or fund balances (explain in Schedule O)	5		(3218	3.00)
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		5075	15.42
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," ex Schedule O.	plain in			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?				1
ь					1
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o of the audit, review, or compilation of its financial statements and selection of an independent account		2c		1
	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O.	oplain in			
4	If "Vac" to line 2s or 2h, check a how helpy to indicate whether the financial determined for the year way			l l	

☐ 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 

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

**3a** 

3b

Form **990** (2011)

issued on a separate basis, consolidated basis, or both:

Separate basis

#### SCHEDULE 0 (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 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.

ional information. Open to Public Inspection

**Employer identification number** Name of the organization Palo alto Roller Lodge No. 346 F&AM 94-1002678 Part XI Line 5 Unrealized Investments loss for year 2011 (32183.00) 0