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Form

Department of the Treasury

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 2011

Open to Public

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Α	For the	e 2011 ca		<u>r, or tax year</u>		7/01/11	, and ending		0/1	2				
В	Check if app	plicable	C Name of org	anization	ANCIENT FR	EE & ACC	EPTED MAS	SONS OF			D Employ	er identification number		
	Address ch	hange			GRANBURY L	ODGE 392								
=	Name change Doing Business As 23-7500577													
᠆	Name Chan	nge	Number and	E Telepho	one number									
	Initial return	n	ров	OX 461					1					
	Terminated	d		state or country,	and ZIP + 4	-		_		-				
=	Amended r		GRANB	mov		TX 760	048					ents \$ 97,632		
4	Amendedi	return		ddress of principal	officer		340			1	G Gross rece	ipis 5 77,032		
	Application	pending								H(a) Isthisagr	oup return for a	ffliates? Yes X No		
										17/52 \$		Yes No		
											iliates included			
										11-140	, attach a list	(see instructions)		
1	Tax-exem			(c)(3) X 50	$_{1(c)}$ (10) \triangleleft	(insert no)	4947(a)(1) or	527						
J	Website	<u>▶ N</u>	I/A							H(c) Group ex	emption numb	er 🕨		
ĸ	Form of or	rganization	X Corpor	ation Trust	Association	Other			L Ye	ar of formation		M State of legal domicile		
P	art I	Su	ımmary											
	1 B			ganization's m	nission or most sig	nificant activiti	es							
۵.	1	The	purpose	of the	Granbury L	odge is	to contro	l and r	equ	late the	practi	.ce		
ĕ					ughout its	_			_		_			
na E				-	bership.	J								
Activities & Governance	ر ا				zation discontinued	t ite operations	or disposed of	f more than '	25% 0	f ite net accete				
တိ	1						s of disposed of	i inore man z	20 10 0	i its riet assets	3	0		
త			=	=	overning body (Pa	-	All long 4 b)					0		
Ë	1		•	•	bers of the govern	• , ,	•				4			
Ξ	1			' '	ed in calendar year	2011 (Part V,	line 2a)				5	0		
Ä				•	e if necessary)						6	0		
	7a ⊺	Total unre	elated busine	ss revenue fr	om Part VIII, colun	nn (C), line 12					7a	0		
_,.		b Net unrelated business taxable income from Form 990-T, line 34									7b	0		
-FReyenue 012	₹								H	Prior Ye		Current Year		
er G	3 8 0		-	nts (Part VIII,	1,694 2,777	25,130								
Ę	9 F	Program :	restment income (Part VIII, column (A), lines 3, 4, and 7d)									22,668		
Š	10 li	Investmer										46,487		
ă	11 (1 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)									3,500	3,347		
<u> </u>	12 7	Total reve	enue – add lii	nes 8 through	11 (must equal Pa	art VIII, columr	n (A), line 12)			15	7,072	97,632		
	13 (Gr <u>ants</u> ar	nd sımılar am	ounts paid (P	art IX, column (A),	, lines 1-3)					0	0		
CHINESON THE	14 E	Benefits r	efts particle of for members (Part IX, column (A), lines 1–3)									0		
3	15 9				oyee benefits (Par		A), lines 5–10)			7,536		6,459		
8	16a F										0	0		
		Total	Graffin expe	See Gran IX	🏈 ¢olumn (A), lin တွဲolumn (D), line :	25) ▶	6	, 645				1		
					Hines 11a-11d,			,		7	1,969	65,618		
		_			nust equal Part IX,		ne 25)				9,505	72,077		
	1	1000			ne 18 from line 12		ne 25)		_ <u> </u>		7,567	25,555		
		Revenue	iess expense	55 Subilact II	ne romani ine rz	·				Beginning of Cu		End of Year		
Net Assets or	20 1	Total ass	ets (Part X, I	ine 16)							6,069	1,324,792		
ASS	21 7		ılıtıes (Part X	-							230	0		
Š	22 4		•	· ·	act line 21 from lin	e 20			<u> </u>	1.29	5,839	1,324,792		
	Part II		gnature E	_	dot line 21 from lin	<u> </u>					- /			
					warmined this setuen	unaludina assar	maanuna sahadi	ulan and state	monte	and to the best	of my knowle	adae and halief it is		
					examined this return, arer (other than office						OI IIIY KIIOWIE	euge and belief, it is		
		The 's	71	Biller	Die			<u></u>			17	ANUASU 17 7A12		
ei.	an.		Signature of office	<u> </u>			· · · · · · · · · · · · · · · · · · ·				Date	18 08/17 11 2017		
Sig	_		•		r 10			CEC	ייםפי	מס גיו	2010			
He	ere	=		ILLESPI	L.C.			SEC	, K.E.	<u> </u>				
_		<u> </u>	ype or print nam							T _				
			e preparer's nam		· _	Preparer's signal		7		Date	Check	T PTIN		
Pai -		De	<u>llaine</u>	1 ay			\leftarrow			01/17	/13 self-em			
	eparer	Firm's na	me 🕨		ne's Plac						Firm's EIN	45-5553423		
Us	e Only			1101 V	V Pearl S	t								
		Firm's add	dress	Granbı	ıry, TX	76048-1	821			[i	Phone no	682-936-4542		
Ma	y the IR	S discus	s this return	with the prepare	arer shown above?	(see instruction	ons)					X Yes No		

				D MASONS OF	23-7500577		Page 2
Part I			r <mark>am Service Acco</mark> D contains a respo	mplishments nse to any question in	this Part III		X
The of	efly describe the purpose freemase	e organization's me e of the onry thre	Granbury Lo	odge is to cor jurisdiction,	ntrol and reg		practice
prio	or Form 990 or 9	990-EZ?	significant program serves	rices during the year which v	were not listed on the		Yes X No
3 Did ser	d the organizatio		ng, or make significant	changes in how it conducts,	any program		Yes X No
4 Des	scribe the organ	nization's program 501(c)(3) and 50	n service accomplishme (1(c)(4) organizations at	nts for each of its three large nd section 4947(a)(1) trusts renue, if any, for each progra	are required to report the		
4a (Co	ode) (Expenses \$		including grants of \$) (Revenue \$)
4b (Co	ode) (Expenses \$		including grants of \$) (Revenue \$)
4c (Co	ode.) (Expenses \$		including grants of \$	••) (Revenue \$)
		vices (Describe					
	xpenses \$ otal program se	10, ervice expenses	114 including gran ▶ 10	ts of \$ 0,114) (Revenue \$)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, 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 98-197 If "Yes," complete Schedule C,			
	Part III	5		Х
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		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Х
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		Х
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		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, 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	X	
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		Х
С	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		Х
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	X	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			1
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a		Х
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	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		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			1
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	<u> </u>	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on		[l .
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		İ	
	If "Yes," complete Schedule G, Part III	19	<u> </u>	X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	<u> </u>	X
b	if "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	}	

Part IV 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		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K If "No," go to line 25	24a		X
þ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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 Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or 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		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			'
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	 	<u> </u>
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			v
	Schedule L, Part IV	28b	<u> </u>	<u> </u>
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	├	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			J.,
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	۱		\ . ,
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			.
	complete Schedule N, Part II	32	ļ	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			v
0.F.	IV, and V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u> </u>
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the	256		v
	meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	20		
a -	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	Ī		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	1 27		v
20	Part VI	37	 	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	20		х
	19? Note. All Form 990 filers are required to complete Schedule O	38	00	0 (2011)
		Fo	ım フラ	U (2011)

Pa	irt V Statements Regarding Other IRS Filings and Tax Compliance			
	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	_		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	- (
	reportable gaming (gambling) winnings to prize winners?	1c		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	ł		l
	Statements, filed for the calendar year ending with or within the year covered by this return 2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	ļ		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
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		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		-	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	<u> </u>	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	<u> </u>	X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	<u> </u>	<u> </u>
6a	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?	6b	ļ	<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).	1	1	
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		<u>↓</u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	<u> </u>	Ь
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			İ
	required to file Form 8282?	7c	ļ	<u> </u>
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	-	<u> </u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		 -
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	-	
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	-	
9	Sponsoring organizations maintaining donor advised funds.			1
a	Did the organization make any taxable distributions under section 4966?	9a	1	╁
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		├─
10	Section 501(c)(7) organizations. Enter			İ
a	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990. Part VIII, line 12, for public use of club facilities 10b	-		}
b			1	
11	Section 501(c)(12) organizations. Enter Gross income from members or shareholders			
a	Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources			
b	· · · · · · · · · · · · · · · · · · ·	ĺ		
122	against amounts due or received from them) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		-
12a b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	144	1	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	\dashv		}
ıs 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	100	1	+
b	Enter the amount of reserves the organization is required to maintain by the states in which	1		1
J	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	\dashv		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	1	X
1-7Cl	If "Voc " has it filed a Form 700 to report these payments? If "No " provide an explanation in Schedule O	14h	†	

	990 (2011) ANCIENT FREE & ACCEPTED MASONS OF 23-7500577			age 6
Pa	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below	, and fo	ra	
	"No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in S	Schedul	е	
	O. See instructions. Check if Schedule O contains a response to any question in this Part VI			
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or			E
	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			i
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	7		
	any other officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	-		
-	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Co			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	141		
_	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	1111		
12a		12a		x
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	1.22		
ŭ	describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by	1.7		
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			:
а	The organization's CEO, Executive Director, or top management official	15a		х
b	Other officers or key employees of the organization	15b		X
J	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			'
100	with a taxable entity during the year?	16a	-	x
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	100		1
b	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?	16b		
Sac	tion C. Disclosure	IOD		<u> </u>
<u> 3ec</u> 17	List the states with which a copy of this Form 990 is required to be filed None			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)			
	available for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website Upon request			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy,			
	and financial statements available to the public during the tax year			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization ▶ Lee Gillespie, Treasurer 4508 Garden View Drive			
GI	RANBURY TX 76048			

Form 990 (2011)	ANCIENT	FREE	æ	ACCEPTED	MASONS	OF	

23-7500577

Page 7

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 organ	nization nor any r	elated	d org	anıza	ation	s cor	nper	nsated any current officer, d	rector, or trustee	
(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	bo	x, unl	ess pe	ition more t rson is irector	on ore than on on is both a ector/trustee		(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Lee Gillespie	-									
SECRETARY	0.00			х				7,800	0	0
(2) Glenn Riale SR.		†						,		
Worshipful Master	0.00	1		Х				2,000	0	0
(3) Colin Zimmerle										
Treasurer	0.00			X				0	0	0
(4)										
(5)										
(6)										
(7)									<u></u>	
(8)		ļ								
(9)		<u> </u>							1	
(10)		<u> </u>								
(11)	-									
(12)				-						
(13)			<u> </u>			-				
(14)										
	<u>L</u>		L	L		L		<u> </u>	L	

Form 990 (2011) ANCIENT FREE & ACCEPTED MASONS OF 23-7500577

,	(A) Name and title	(B) Average hours per week (describe hours for	(d bo	o not x, unl	Pos check ess pe	C) sition more erson i	than o	ne an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the			
		related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(organiza and rela organiza	ition ited	
(15)														
(16)					-	-	<u> </u>				<u> </u>			
(17)			-			_					<u> </u>			
(18)	 		-											
(19)					ļ		ļ							
(20)	·				-			<u> </u>	<u> </u>					
(21)					-			-				<u>.</u>		
(22)							ļ				-			
(23)													_	
(24)											-			
(25)	-		-											
1b	Sub-total	<u> </u>		<u> </u>			<u> </u>	>	9,800					
c d	Total from continuation shee Total (add lines 1b and 1c)	ets to Part VII, S	ectio	on A				>	9,800		+			
2	Total number of individuals (inc	-		_	ose l	ıstec	abo	ve)		·				_
	reportable compensation from t	he organization	<u> </u>	0									Yes	No
3	Did the organization list any for employee on line 1a? If "Yes," of							ploy	ee, or highest compensated			3	-	X
4	For any individual listed on line organization and related organiz	1a, is the sum of	repo	ortab	le co	mpe	nsatı			the				
5	individual Did any person listed on line 1a									vidual		4		X
Sec	for services rendered to the organical forms. Independent Contracted		s," co	ompl	ete S	che	dule .	J for	r such person	<u>. </u>		5		X
1	Complete this table for your five compensation from the organiz	e highest comper	sate	d inc	leper	nden the	t con	trac	ctors that received more than	\$100,000 of				
		(A) I business address	- pon				<u> </u>			(B) obton of services		Co	(C) mpensat	ion
				•										
										.,				_
														_
											<u></u>			
2	Total number of independent c	ontractors (includ	ling l	out n	ot lın	nited	to th	ose	e listed above) who			 		

<u>Pa</u>	rt VI	II Staten	nent of Reve	nue							
]							(A) Total revenue		(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
SS	1a	Federated cam	paigns	1a				\top			
Contributions, Giffs, Grants and Other Similar Amounts		Membership du		1b							1
٥٤		Fundraising ev		1c		6,308					
T A		Related organiz		1d	•						
ပည္		Government grants (1e							,
Sign				16				ļ			
팔힐	•	f All other contributions, gifts, grants, and similar amounts not included above Q Noncash contributions included in lines 1a-1f				18,822			İ		
물탕	_					10,022					
52	_			,	Ψ		25,13	10			
	n	h Total. Add lines 1a–1f					25,13	+			<u> </u>
Ž	20	M				Busn Code	18,83	ıΩ	18,838		
Š	2a	Membersh	_				3,57	_	3,575		
8	b	Endowmen	t runds			<u> </u>	25	_	3,373		255
١	C	Sales						,,,,			
Š	a	d e f All other program service revenue						+			
ᆵ	e							+			
Program Service Revenue	-			ue		L	22,66	:0			
\exists	_9	Total. Add line					- 22,00	"	· - ·	·····	
	3		ome (including di	wideria	s, meresi		46,48	. 7		}	46,487
		and other similar amounts) Income from investment of tax-exempt bond pro					40,40	' †			40,407
	4				ceeds		╅				
	5	Royallies	(A Book	-	(4)	Demonal		+			
	٥-	C	(i) Real		(11) F	Personal		1	•		.
	6a	Gross rents									į
	D	Less rental exps									
ı	_	Rental inc or (loss)									
	d 7a	Net rental incor			1	<u> </u>		+			
		sales of assets		(11)	Other						
		other than inventory			ļ		٠	4		_	,
	b	Less cost or other			Ì						ļ
		basis & sales exps			<u> </u>		-				
		Gain or (loss)	L		<u> </u>			ŀ		,	
•		Net gain or (los				<u> </u>		\dashv			
e	вa		m fundraising event	IS				-			
Jen		(not including \$									ı
Re			eported on line 1c)					Ì			1
Other Reven	_	See Part IV, line		a			ĺ				
₹		Less direct ex		b	L					* * *	
1			(loss) from fundr	_	events			-			
	ча		m gaming activities								,
		See Part IV, line		a			-				
		Less direct ex		b							
			(loss) from gamı	ng acti	Vities	<u> </u>		-			
	าบล	Gross sales of	-								;
		returns and allo		a				-			
		Less cost of g		b	L			-			
	<u> </u>		(loss) from sales	of inve	entory	<u> </u>		_			
			cellaneous Revenue			Busn Code	· ·	ان			0.045
	11a	Restituti	on from Walte	on			3,34	± /			3,347
	b					<u> </u>	 	\dashv			
	C						 	\dashv			·
1	ď	All other reven				L					<u> </u>
	e	Total. Add line					3,34		00 440		E0 000
	12	Fotal revenue	 See instruction 	IS		•	97,63	34	22,413	0	50,089

7500577

Page **10**

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B) (C) and (D)

equi	Check if Schedule O contains a response	to any guestion in this Part IX			
	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and		expenses .	general expenses	-
•	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
_	the U.S. See Part IV, line 22		Ì		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	İ			
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	6,000		6,000	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	450		450	
10	Payroll taxes	459		459	
11	Fees for services (non-employees)				
a	Management				
b	Legal Accounting				
c d	Lobbying		· <u>-</u>		
u e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other				-
12	Advertising and promotion				
13	Office expenses	10,386		3,741	6,645
14	Information technology			•	
15	Royalties				
16	Occupancy				
17	Travel				. <u></u>
18	Payments of travel or entertainment expenses	1			
	for any federal, state, or local public officials		<u>-</u>		
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	10 507			-
22	Depreciation, depletion, and amortization	10,507	541	9,966 2,603	
23	Insurance	2,603		2,603	
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) Charity	9,573	9,573		
a	Utilities	7,919	9,313	7,919	·
b	Contract Labor	7,800		7,800	<u></u>
d	Maintenance and Repairs	5,449		5,449	
e	All other expenses	11,381		11,381	
25	Total functional expenses Add lines 1 through 24e	72,077	10,114	55,318	6,645
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)				

Part X **Balance Sheet** (B) (A) Beginning of year End of year 100 100 1 Cash—non-interest bearing 888,613 927,843 2 Savings and temporary cash investments 2 Pledges and grants receivable, net 3 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 5 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 6 employees' beneficiary organizations (see instructions) Notes and loans receivable, net 7 8 inventories for sale or use Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 452,560 321,586 130,974 332,093 10b Less accumulated depreciation 11 Investments—publicly traded securities 11 12 Investments-other securities See Part IV, line 11 12 13 Investments-program-related See Part IV, line 11 13 14 14 Intangible assets 75,263 15 75,263 15 Other assets See Part IV, line 11 1,296,069 1,324,792 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 17 Accounts payable and accrued expenses 18 Grants payable 18 19 19 Deferred revenue 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Payables to current and former officers, directors, trustees, key iabilities employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 230 of Schedule D 230 26 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 939,950 27 Unrestricted net assets 255,789 250,004 28 Temporarily restricted net assets 100,100 121. Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds 32 1,295,839 1,324, Total net assets or fund balances 33 33 1,296,069 1,324,792 Total liabilities and net assets/fund balances 34

Form **990** (2011)

orm	1990 (2011) ANCIENT FREE & ACCEPTED MASONS OF 23-7500377			<u>Pa</u>	ge 12
Pà	irt XI 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			632
2	Total expenses (must equal Part IX, column (A), line 25)	2			077
3	Revenue less expenses Subtract line 2 from line 1	3		25,	555
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,2	95,	839
5	Other changes in net assets or fund balances (explain in Schedule O)	5			228
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	1,3	21,	622
Pa	art 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 X Cash Accrual Other				, 1
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		1		
	Schedule O		_	_	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
b	Were the organization's financial statements audited by an independent accountant?		2b		Х
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		<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O				i .
ď	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were		Í		
	issued on a separate basis, consolidated basis, or both				,
	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			ļ	<u> </u>
	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	L	<u> </u>
			Fo	m 99	0 (2011)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Name of the organization Employer identification number ANCIENT FREE & ACCEPTED MASONS OF GRANBURY LODGE 392 23-7500577 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year Total number of conservation easements 2a 2b Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes No violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) Yes No (i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

	dule D (Form 990) 2011 ANCIENT FF					23-7500			Page 2
Pà	rt III Organizations Maintaining (Collections of	Art, His	storical Tre	asures, o	r Other Simil	ar Assets (continued)	
3	Using the organization's acquisition, accession, collection items (check all that apply)	and other records, o	check an	y of the following	ng that are a s	significant use of	ıts		
а	Public exhibition	d \square	Loan or e	exchange progr	rams				
b	Scholarly research		Other	go prog.					
C	Preservation for future generations	- 🗀	•						
4	Provide a description of the organization's collect	tions and explain ho	w thev fu	urther the organ	nization's exer	mpt purpose in P	art		
-	XIV		···· , ···						
5	During the year, did the organization solicit or re-	ceive donations of a	rt, histori	cal treasures, o	or other simila	ır			
	assets to be sold to raise funds rather than to be	maintained as part	of the or	ganization's co	llection?			Yes	No
Pa	rt IV : Escrow and Custodial Arra	ngements. Con	nplete i	f the organi		wered "Yes" t	o Form 990	, Part IV,	
4-	line 9, or reported an amount								
та	Is the organization an agent, trustee, custodian of included on Form 990, Part X?	or other intermediary	for cont	ributions or oth	ier assets not			□ vaa □	7 No
	•	l accomplata the fallow	one toble					∐ Yes L	_ No
D	If "Yes," explain the arrangement in Part XIV and	complete the follow	ving table	;				Amount	
_	Pogunning balance						40	Amount	
C	Beginning balance Additions during the year						1c		
							1d		
e	Distributions during the year						1e		
1	Ending balance	000 D-4 V I 04	•				1f		7
	Did the organization include an amount on Form If "Yes," explain the arrangement in Part XIV	990, Part X, line 21	•					Yes _	No
	art V Endowment Funds. Comple	to if the organiz	ration a	neworod "V	oe" to Forr	n 000 Part IV	/ line 10		
	Endowment I unus. Comple	(a) Current year	•	o) Prior year	(c) Two yea		hree years back	(e) Four years	hack
12	Beginning of year balance	(a) Current year	,	5) 1 167 year	(c) two year	15 Dack (u)	THEC YEARS DUCK	(c) i dai years	Duck
	Contributions							 	
	Net investment earnings, gains, and					- -		 	······································
·	losses								~
a	Grants or scholarships		ļ					+	
	Other expenditures for facilities and		 					+	
٠									
	Administrative expenses								
	Administrative expenses End of year balance		 		-				
g 2	Provide the estimated percentage of the current	vear end balance (li	ne 1a co	olumn (a)) held	ae				
a	Board designated or quasi-endowment	%	ine ig, oc	nami (a)) neia	45				
b	Permanent endowment ▶ %	~							
c	Temporarily restricted endowment ▶	%							
	The percentages in lines 2a, 2b, and 2c should	equal 100%							
3a	Are there endowment funds not in the possession	on of the organizatio	n that are	e held and adm	inistered for t	he			
	organization by	-						Yes	No
	(i) unrelated organizations							3a(i)	
	(ii) related organizations							3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations lis	ted as required on S	Schedule	R?				3b	
4	Describe in Part XIV the intended uses of the or	ganızatıon's endowi	ment fund	ab					
Pa	rt VI Land, Buildings, and Equip	ment. See Forr	n 990,	Part X, line	10.				
	Description of property	(a) Cost or other t	casis	(b) Cost or o	ther basis	(c) Accumula	ted	(d) Book value	
		(investment)	. <u> </u>	(othe	er)	depreciatio	n		
1a	Land				16,822			16,	822
b	Buildings								
С	Leasehold improvements								
d	Equipment								
е	Other								
Tota	I. Add lines 1a through 1e (Column (d) must equ	al Form 990, Part X	, column	(B), line 10(c))	<u> </u>	•	16,	822

(11)

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

2. FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

Sche	dule D (Form 990) 2011 ANCIENT FREE & ACCEPTED MASONS			Page 4
Pà	rt XI Reconciliation of Change in Net Assets from Form 990 to A	udited Financial Stateme	ents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	97,632
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	72,077
3	Excess or (deficit) for the year Subtract line 2 from line 1		3	25,555
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities		5	
6	Investment expenses		6	
7	Prior period adjustments		7	
8	Other (Describe in Part XIV)		8	
9	Total adjustments (net) Add lines 4 through 8		9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		10	25,555
<u>Pa</u>	rt XII Reconciliation of Revenue per Audited Financial Statement	s With Revenue per Ret	urn	
1	Total revenue, gains, and other support per audited financial statements		1	97,632
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		1 1	
а	Net unrealized gains on investments	2a]	
b	Donated services and use of facilities	2b] [
С	Recoveries of prior year grants	2c]	
d	Other (Describe in Part XIV)	2d	1.	
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	97,632
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		1	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	. I	
b	Other (Describe in Part XIV)	4b	1 1	
C	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	97,632
Pa	rt XIII Reconciliation of Expenses per Audited Financial Statemer	its With Expenses per R	eturn	
1	Total expenses and losses per audited financial statements		1	72,077
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1		
а	Donated services and use of facilities	2a	1 .	
b	Prior year adjustments	2b	4 1	
С	Other losses	2c		
d	Other (Describe in Part XIV)	2d	4 .	
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1	1	3	72,077
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	4	
b	Other (Describe in Part XIV)	4b	J l	
C	Add lines 4a and 4b		4c	
_ 5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	72,077

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information

Part XIV Supplemental Information

Schedule D (Form 990) 2011

ANCIENT FREE & ACCEPTED MASONS OF

23-7500577

Page 5

Part XIV Supplemental Information (continued)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

ANCIENT FREE & ACCEPTED MASONS OF GRANBURY LODGE 392

Employer Identification number 23-7500577

Form 990, Part III, Line 4d - All Other Accomplishment Program Services

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 No review was or will be conducted.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public

Form 990, Part IX, Line 24e - Other Expenses

Description	Amount		
Grand Lodge Annual Paymen	\$ 4,711		
Insurance	\$ 2,603		
Investment Expenses	\$ 2,193		
Legal & Professional Fees	\$ 907		
Aprons & Supplies	\$ 466		
Officer Training	\$ 419		
Condolences	\$ 52		
Bank Fee's	\$ 30		

Form 990, Part XI - Additional Information

Year end adjustment to correct Payroll Liability entry from prior year

Form 4562

Depreciation and Amortization

(Including Information on Listed Property)

Department of the Treasury

See senarate instructions

► Attach to your tax return

• •	T FREE & AC	CEPTED MASO		to your tax retu	Identify	ing numb	
					7500	0577	
Business or activity to which this form relates Indirect Depreciat:	ion						
Part I Election To Exper		erty Under Section	n 179				
Note: If you have a	•	_		molete Part I			
Maximum amount (see instructions		,	<u>,</u>	p.o.to . dit		1	500,000
2 Total cost of section 179 property	•	instructions)				2	
	•	•	ions)			3	2,000,000
	Threshold cost of section 179 property before reduction in limitation (see instructions) Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-						
		'	n senarately see in	estructions		5	
	llar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0 If married filling separately, see instructions (a) Description of property (b) Cost (business use only) (c) Elected cost			Elected cost			
· · · · · · · · · · · · · · · · · · ·				<i>"</i>			
7 Listed property Enter the amount f	from line 29		•	7	·		
8 Total elected cost of section 179 pa		ın column (c) lines 6 an	nd 7		.	8	
9 Tentative deduction Enter the small		in column (c), inics o un	,			9	
10 Carryover of disallowed deduction		10 Form 4562				10	
11 Business income limitation Enter t	•		roro) or line E /co	o instructions)		11	
12 Section 179 expense deduction A		*	, ,	e instructions)		12	
*			ine ii	13		- '2	
13 Carryover of disallowed deduction Note: Do not use Part II or Part III below						1	
Part II Special Depreciat			ation (Do not	t include liste	d proper	tv) (S	ee instructions)
14 Special depreciation allowance for			***************************************	i inolade liste	u propor	<u> </u>	ee mendednej
during the tax year (see instruction		er triair listed property) p	nacea iii seivice			14	
15 Property subject to section 168(f)(•					15	
16 Other depreciation (including ACR	•					16	10,50
Part III MACRS Depreciate		ide listed property	(See instruc	tions)		1 10 1	
Part III MACITO Depreciai	tion (Do not meta	Section A		uoris. <i>)</i>			
17 MACRS deductions for assets pla	ced in service in tay ve		-			17	
'	•			.		<u> </u>	
		rvice During 2011 Tax			ciation Sv	stem	
	(b) Month and year	(c) Basis for depreciation			1		•
(a) Classification of property	placed in service	(business/investment use only-see instructions)	period	(e) Convention	(f) Meth	od	(g) Depreciation deduction
19a 3-year property	Service	Orny-see mandetions)					
	-				<u> </u>		
b 5-year property c 7-year property	┪,	· · · · · ·		1	1		
	· ·	<u> </u>		-			
d 10-year property e 15-year property	-						
f 20-year property	-				1		
	\dashv		25 450	 	S/L		
g 25-year property		 	25 yrs	1	S/L	$\overline{}$	
h Residential rental property			27 5 yrs	MM			
· · · · · · · · · · · · · · · · · · ·	+		27 5 yrs	MM	S/L		
i Nonresidential real property		-	39 yrs	 	S/L		
	Accete Placed in Son	/vice During 2011 Tax \	/ear Using the	MM Alternative Den	S/L		
	assets riaceu III Ser	VICE During 2011 18X	ear Using tile i	ancinative Dep			
20a Class life	\dashv		12 yrs		S/L S/L		
b 12-year							
c 40-year			40 yrs	MM	S/L		

Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here

and on the appropriate lines of your return. Partnerships and S corporations—see instructions

For assets shown above and placed in service during the current year, enter the

Listed property Enter amount from line 28

10,507

21

22

23