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Return of Organization Exempt From Income Tax

OMB No 1545-0047 2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Inter	artment d rnal Reve	of the Treasury enue Service	► The orga	nization may have to use a cop	by of this return to satis	fy state report	ling requirer	nents		Inspection
_			lar year, or tax year	beginning	, 2012,	and endin	q		•	·
		applicable		ANCIENT FREE & ACC	TEPTED MASONS	25 MOSAT	C LODGE	D Employe	r Identific	ation Number
	I1	dress change	Doing Business As	MOSAIC LODGE N					0662	92
	H-1	me change		P O box if mail is not delivered		Room/		E Telephon		
	H	, i	1355 WEST TH	TDD STRFFT				(563	١ 58	3-0460
	Н	minaled	City, town or country	IND SINEEI	State	ZIP code + 4	1	(303	, 50	5 0300
	-				IA	52001-	6115	G Gross to	sounte S	311,496.
	Н	r	DUBUQUE F Name and address of	organial officer	IA	32001-		a group return		
		plication pending			DECOUR TO		1 ' '	-		
•				55 WEST THIRD STREET DU		1 52001-644	If 'No,	affiliates inclu attach a list (see instru	ctions)
<u>' </u>		xempt status	*	(c) (10) (insert no	1) 4947(a)(1) or	527				0.405
J			M.MOSAICLODGE	- , , , , -, -				exemption num		0495
K		of organization	Corporation Trus	t Association X Other	FRATERNAL L	Year of Format	tion 185	8 M St	ate of lega	al domicile IA
Pa	rt I	Summary								
	1	-		mission or most signific						S LIKE-MINDED MEN
g				SCENDS ALL RELIGIO						
뗦	1			IPLES OF BROTHERLY L						
Activities & Governance	1			PASSION, AND CONCERN						
် တို	l	Check this box		ization discontinued its o governing body (Part VI,		sea or mor	e man zo	% OF Its net	3	66
જ			_	nbers of the governing b	•	lb)		-	4	63
ies	l		· -	red in calendar voar 201		10)		-	5	0
Ξ	l		of volunteers (estima		(() () () () ()				6	0
Act				rom Part VIII, column (C), line 12				7a	0.
-	b l	Net unrelated	business taxable inc	ome from Form 990-T, In	ine 34				7b	0.
			····	<u> </u>	· · · · · · · · · · · · · · · · · · ·		P	rior Year		Current Year
	8 (Contributions a	and grants (Part VIII,	, line 1h)				3,64	14.	3,203.
JE			ce revenue (Part VIII	•						
Revenue		_	•	nn (A), lines 3, 4, and 7			46,73	34.	28,872.	
æ	1		(Part VIII, column (/							
				h 11 (must equal Part V		e 12)		50,37	78.	32,075.
				Part IX, column (A), line				19,80		20,625.
				art IX, column (A), line	•		}			20,020.
ı	ľ			loyee benefits (Part IX,	•	5.10)	-			
Se				IX, column (A), line 11e	* * * *	, 10)				
e			• ,		•		— —		<i>,</i>	
Expenses	b ī	Total fundraisi	ng expenses (Part I)	(, column (D), line 25) 🕨	·	0.				
_				4), lines 11a-11d, 11f-24	•			17,22	21.	16,921.
-	18 7	Total expenses	Add lines 13-17 (n	nust equal Part IX, colun	an (A), line:25),	A ALD		37,02	25.	37,546.
ام	19 F	Revenue less	expenses Subtract I	ine 18 from line 12		!VEU		13,35	3.	-5,471.
Net Assets of Fund Balance					ဖွ		Beginnin	g of Current \	/ear	End of Year
Bata	20 7	「otal assets (F	Part X, line 16)		ΔPR 9 :	1 2013	Ö	771,73	6.	813,927.
달	21 7	Total liabilities	(Part X, line 26)				$\bar{\infty}$			
žΖ	22 N	Vet assets or f	und balances Subtra	act line 21 from line 20			卢	771,73	6.	813,927.
Pa	rt II	Signature	Block		(Janes	V				
				his return, including accompany	ung schedules and slater	nents, and to t	he best of m	v knowledge ar	nd belief.	it is true correct and
omp	iele Dec	daration of prepare	er (other than officer) is bas	his return, including accompany sed on all information of which p	preparer has any knowled	ige		,	,	
		E64	. D. Calindra					March	25.3	lo13
Sig	ın	Signature	of officer				Da	te		
lei		EDWI	N D. BLINKS				TREAS	SURER		
			rint name and title					, , , , , , , , , , , , , , , , , , , ,		
		Print/Type pre	eparer's name	Preparer's signature	 -	Date		Check	ıf PT	IN .
) ~ i	ų	James 1	Kircher	James Kirch	ner	03/20/	13	self-employed	!	01057802
Pai Pre	o parer	<u> </u>		· · · · · · · · · · · · · · · · · · ·		100/20/			I E	. 100,002
	parer Only	.	JIM KIRCH		5, P.C.			Firm's EIN	40 1	1.62210
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			DUBUQUE	1 1 2		2-3788	!	Phone no (563)	556-3392 X Yes No
11211	the ID	 diccure this 	roturn with the prop	arer shown above? /see	inciriictione)					ALTOC INO

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2012)

FFFA0101 08/08/12

Form 9	90 (2012)		Page 2
Part			_
	Check if Schedule O contains a response to any question in this Part III	· · · · ·	<u> </u>
1	Briefly describe the organization's mission:	conial and	
	To promote a way of life that binds like-minded men in a brotherhood that transcends all religious, ethnic, cultural, educational differences; by teaching the great principles of brotherly love, relief, and truth, and by the outward ext		
	through its fellowship, compassion, and concern, to find ways in which to serve God, family, country, and self	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	☐ Yes	✓ No
•	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	⊓ ∏Yes	□ No
	If "Yes," describe these changes on Schedule O.	163	V NO
4	Describe the organization's program service accomplishments for each of its three largest program service	es. as meas	sured by
•	expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and all	locations to	others,
	the total expenses, and revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$including grants of \$) (Revenue \$)
	Fraternal Education and Activities: To present the principles and teachings of Freemasonry to members in order t	o make ther	n
	better individuals within society and to provide meaningful activities to promote Masonic fellowship		
	The principles and teachings of Freemasonry are first presented to those joining Mosaic Lodge through the three of	degrees of	
	Symbolic Masonry and thereafter by educational programs, numerous self-study resources, and by witnessing ho		ons
	practice them in their daily lives. The sixty-six members of the Lodge were provided with a variety of opportunities		
	fellowship and growth. Members were informed about Lodge meetings, degree work, and various activities and we		
	to participate whenever possible. Some of the activities included family members.		
4b	(Code.) (Expenses \$ including grants of \$) (Revenue \$)
	Charitable Assistance: To provide funds and other assistance to individuals and/or organizations for religious, ch		·- ′
	scientific, literary, and educational purposes		
	Charity is one of the fundamental principles of Freemasonry and is evidenced through its financial support of a va		
	causes In 2012 Mosaic Lodge awarded grants totaling \$12,425 to eleven qualified non-profit organizations and awarded grants totaling \$12,425 to eleven qualified non-profit organizations and awarded grants totaling \$12,425 to eleven qualified non-profit organizations and awarded grants totaling \$12,425 to eleven qualified non-profit organizations and awarded grants totaling \$12,425 to eleven qualified non-profit organizations and awarded grants totaling \$12,425 to eleven qualified non-profit organizations and awarded grants totaling \$12,425 to eleven qualified non-profit organizations and awarded grants totaling \$12,425 to eleven qualified non-profit organizations and awarded grants totaling \$12,425 to eleven qualified non-profit organizations and awarded grants totaling \$12,425 to eleven qualified non-profit organizations and awarded grants totaling \$12,425 to eleven qualified non-profit organizations and awarded grants totaling \$12,425 to eleven qualified non-profit organizations and awarded grants totaling \$12,425 to eleven qualified non-profit organizations and awarded grants are also profit organizations are also profit organizations and awarded grants are also profit organizations are also profit organizations and awarded grants are also profit organizations are also profit organizations are also profit organizations and awarded grants are also profit organizations are also prof		
	scholarships to four outstanding high school seniors in order to assist them in pursuing a post-secondary education also awarded a \$200 grant to a young handicapped individual to make it possible for that person to attend a summer		
	for handicapped persons. Masonic charity, however, goes beyond that of financial assistance and is evident throu		
	acts of kindness and service to those in need of assistance whether they be Masons or not.		
		·	
4	/Code: \/Code: \/Payonyo\$		
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$		'
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)		
4e	Total program service expenses ▶		

Part	Checklist of Required Schedules		V	N.
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	Yes	No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		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	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		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, for escrow or custodial account liability, 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		1
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	7).4 70.2		
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		1
þ	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
	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		✓
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		✓
	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.	111	_	✓
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		✓
	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 and XII is optional	12b	_	✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	14a		✓
b	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		✓
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		✓
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		√
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		✓
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		✓
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		✓
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		

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Par	t IV Checklist of Required Schedules (continued)			,
24	Did the organization report more than \$5,000 of greats and other appearance to any accomment or organization		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		1
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
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
2 6	Was a loan to or by a current or former officer, director, trustee, key employee, highest 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
2 8	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		√
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		*
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29		√
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		✓
3 3	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		✓
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		✓
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, 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	35a 35b		✓_
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		√
3 8	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	✓	

Pa	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V		
	Check in Confedule C Confeding a response to any question in this rail V	Yes	No
18	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0		
Ł			
(The transfer delitery with bucker withholding raide for reportable payments to vehicle and		
_	reportable gaming (gambling) winnings to prize winners?	1c	
2 a	The state of the s	Marie Sale	
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	
3a	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	20	
b	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3a 3b	1
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	35	+
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial		
	account)?	4a	✓
b	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.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?.	5a	1
b b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5b 5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	30	
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a ✓	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or		†
	gifts were not tax deductible?	6b √	<u> </u>
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 and services provided to the payor?	7a	
þ	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
С	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	海岸海岸	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f	ļ
g h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	<u> </u>
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	7 h	
•	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	100
9		THE REPORT OF THE PARTY OF THE	
а	Did the organization make any taxable distributions under section 4966?	9a	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9 b	
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12		
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. Gross income from members or shareholders		
a b	Gross income from members or shareholders		
	against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	10000000
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
а	Is the organization licensed to issue qualified health plans in more than one state? [13a	
_	Note. See the instructions for additional information the organization must report on Schedule O.		
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		
	Enter the amount of reserves on hand		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	
		Form 990	(2012)

	990 (2012					age 6
Par	t VI	Governance, Management, and Disclosure For each "Yes" response to lines 2 th				
		response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change		iee inst	ructi	_
-	A: A	Check if Schedule O contains a response to any question in this Part VI		<u>: :</u>	<u>· · · </u>	<u> </u>
Sec	tion A.	Governing Body and Management	_ 	·	Yes	No
1a	Enter	the number of voting members of the governing hady at the and of the toy year	140	744		NO
16		the number of voting members of the governing body at the end of the tax yearre are material differences in voting rights among members of the governing body, or	1a 66			
		governing body delegated broad authority to an executive committee or similar				
		nittee, explain in Schedule O.)			
b	Enter	the number of voting members included in line 1a, above, who are independent	1b 63			
2	Did a	ny officer, director, trustee, or key employee have a family relationship or a business ther officer, director, trustee, or key employee?	relationship with	2		✓
3		ne organization delegate control over management duties customarily performed by or vision of officers, directors, or trustees, or key employees to a management company or oth		3		✓
4	Did th	e organization make any significant changes to its governing documents since the pnor Form 9	90 was filed?	4		√
5		e organization become aware during the year of a significant diversion of the organizati	on's assets?.	5		1
6		e organization have members or stockholders?		6	✓	
7a		ne organization have members, stockholders, or other persons who had the power to		_		
		r more members of the governing body?		7a	\dashv	<u>√</u>
ь		ny governance decisions of the organization reserved to (or subject to approva nolders, or persons other than the governing body?	• •	76		✓
8		e organization contemporaneously document the meetings held or written actions ur		7b		WALL THE
Ü		ar by the following.	dertaken danng			
а		overning body?		8a -	/	Section 1
b	_	committee with authority to act on behalf of the governing body?		8b	-	√
9		e any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot	ot be reached at			<u> </u>
	the or	ganization's mailing address? If "Yes," provide the names and addresses in Schedule C)	9		✓
Sect	ion B.	Policies (This Section B requests information about policies not required by th	e Internal Reven	ue Co	de.)	
					Yes	No
10a		e organization have local chapters, branches, or affiliates?		10a		✓_
ь		5," did the organization have written policies and procedures governing the activities o es, and branches to ensure their operations are consistent with the organization's exert		10b		
11a		organization provided a complete copy of this Form 990 to all members of its governing body before		11a	\dashv	
b		be in Schedule O the process, if any, used by the organization to review this Form 990	g			
12a		e organization have a written conflict of interest policy? If "No," go to line 13		12a		√
b		ficers, directors, or trustees, and key employees required to disclose annually interests that could give	e rise to conflicts?	12b		
С		e organization regularly and consistently monitor and enforce compliance with the poe in Schedule O how this was done	policy? If "Yes,"	12c		
13	Did the	e organization have a written whistleblower policy?		13		✓
14				14		✓
15		e process for determining compensation of the following persons include a review and entire persons, comparability data, and contemporaneous substantiation of the deliberation				
a		ganization's CEO, Executive Director, or top management official		15a		<u>√</u>
þ		officers or key employees of the organization		15b		√
16a		" to line 15a or 15b, describe the process in Schedule O (see instructions).	lar amangamant			
104		e organization invest in, contribute assets to, or participate in a joint venture or simitaxable entity during the year?	iar arrangement	16a		
b	If "Yes	" did the organization follow a written policy or procedure requiring the organization pation in joint venture arrangements under applicable federal tax law, and take steps to				
		ation's exempt status with respect to such arrangements?		16b	200	#### <u>#</u>
Section		Pisclosure				
17	List the	states with which a copy of this Form 990 is required to be filed ▶				
18	Section	6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a	nd 990-T (Section	501(c)	(3)s	only)
		le for public inspection. Indicate how you made these available. Check all that apply.				
		n website				
19		be in Schedule O whether (and if so, how), the organization made its governing docu	iments, conflict o	intere	st po	olicy,
20		ancial statements available to the public during the tax year.	notes and records	of the		
20		ne name, physical address, and telephone number of the person who possesses the boation.		oi the		
	J. 9UI 112	ation: Edwin D. Blinks, 10602 Cedar Point Court, Dubuque, IA 52003-8102 (563) 583-046	υ <u></u>			

	(2012)	

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year.
- 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 no	or any relate	d org	anız	zatio	on c	ompe	ensa	ated any currer	nt officer, directo	r, or trustee
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, office or director	unle: er an	Pos heck ss pe	erson	e than i is boti tor/trus	h an tee)	(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) Thomas A. McKeon Master	.75			√		ă		0	0	75
(2) James B Kendell Senior Warden	.50			1				o	0	o
(3) Brian E. Kelley Junior Warden	.50			√	-			0	0	0
(4) Edwin D. Blinks Treasurer	1.00			✓				0	0	150
(5) D Keith Robertson Secretary (6)	1.50			✓				0	0	300
(7)										
(8)										
(9)										
(10)			-							
(11)										
(12)										
(13)										
(14)										

Par	t VII Section A. Officers, Directors, Trus	tees, Key E	mplo	yees			lighe	st C	ompensated E	mployees (cont	inued)
	(A) Name and title		box,	unies	Pos neck ss pe d a d	rson	e than o	n an tee)	(D) Reportable compensation from	(E) Reportable compensation fron	(F) Estimated amount of other
		week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation
(15)							_				
(16)							_				
(17)											
(18)											
(19)							_				
(20)											
(21)				_							
(22)					_						
(23)											
(24)								_	<u> </u>		
(25)											
											50
1b c d	Sub-total . Total from continuation sheets to Part Total (add lines 1b and 1c)	VII, Section		•		 		*	0 0		0 529 0 0 529
2	Total number of individuals (including but reportable compensation from the organi	not limited						e) w	ho received m	ore than \$100,0)00 of
3	Did the organization list any former of employee on line 1a? If "Yes," complete 5							mp	loyee, or high	est compensa	Yes No ted 3 ✓
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of rep	ortat	ole d	com	per	satio	n ai s,"	nd other comp complete Sch	ensation from seedule J for se	the uch . 4 ✓
5	Did any person listed on line 1a receive of for services rendered to the organization?	r accrue co	mper omple	nsat	ion Sch	fror	n any ile J f	uni or s	related organiz	ation or individ	
Section	on B. Independent Contractors		J.,,,,	-							
1	Complete this table for your five highest of compensation from the organization. Replyear.	compensate oort comper	ed ind	lepe on fo	ende or th	ent o	contra alend	acto ar y	ors that receive rear ending wit	ed more than \$1 h or within the i	100,000 of organization's tax
	(A) Name and business add	ress			-				(B) Description of s	ervices	(C) Compensation
None					-						
	Total number of independent continues	en (maleda	a hii	+	- t.	mit	nd *c	+h-	osa listed shi	ove) who	San State Committee State S
2	Total number of independent contracto	•	-					LI 1	OSC IISICU ADI	JVG) WIIO	

		Check if Schedule O	contains a respi	onse to any questio	on in this Part VIII			
		227 ii Cornodiic O			(A) Total revenue	(B) Related or exempt function	(C) Unrelated business	(D) Revenue excluded from tax under sections
				3		revenue	revenue	512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a	n Federated campaigns n Membership dues s Fundraising events d Related organizations e Government grants (contribute	1 a 1 b 1 c 1 d ons) 1 e	2,509.				
(TRIBUTIO D OTHER (f	All other contributions, gifts, q similar amounts not included	grants, and above 1 f	694.				
ਨੂ ₹	<u>0</u>	n Noncash contributions include n Total. Add lines 1a-1f	ed in Ins 1a 1f \$_					
-		Total. Aud lilles 14-11		Business Code	3,203.			
PROGRAM SERVICE REVENUE	2 a							
PROGRAM S		All other program services Total. Add lines 2a-2f	ce revenue	•				,,
	3 4 5	Investment income (incl other similar amounts) Income from investmen Royalties	-	•	27,028.	27,028.	0.	0.
	b	Gross rents Less rental expenses Rental income or (loss) Net rental income or (lo	(i) Real	(ii) Personal			,	
	7 a	Gross amount from sales of assets other than inventory	(i) Securities 281, 265	(ii) Other				
	С	Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss)	279,421 1,844		1,844.	1,844.	0.	0.
OTHER REVENUE	8a	Gross income from fund (not including \$	d on line 1c)	a		***		
0		Net income or (loss) fro		<u>'</u>			•	
		Gross income from gam See Part IV, line 19	_	a				
		Less direct expenses	_	0		· · · · · · · · · · · · · · · · · · ·	,	
	С	Net income or (loss) from	m gamıng actıvı	ties <u></u>				
	b	Gross sales of inventory and allowances Less' cost of goods sold Net income or (loss) from	i i	a o o o o o o o o o o o o o o o o o o o		,		
	11 a	Miscellaneous Revenu		Business Code				
1	b c							
		All other revenue Total. Add lines 11a-11c	<u>-</u>	•				
		Total revenue. See instr		▶	32.075	28.872.	0.	0.

	rt IX Statement of Functional Expen				
Sec	tion 501(c)(3) and 501(c)(4) organizations must			must complete column (A	1)
	Check if Schedule O contains a r	esponse to any question			
Do i 7b,	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	12,425.			
2	Grants and other assistance to individuals in the United States See Part IV, line 22	8,200.		`	
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				1
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	'				
	Fees for services (non-employees)				
	a Management				
	b Legal				
	Accounting	300.			
	Lobbying				
	e Professional fundraising services. See Part IV, line 17		,		
	Investment management fees	7,009.			
	Other (If line 11g amt exceeds 10% of line 25, col-	1,7003.		 	
_	umn (A) amt, list line 11g expenses on Sch O)				
	Advertising and promotion	60.			
	Office expenses	754.			
14	Information technology				
15	Royalties				
16	Occupancy	4,560.		<u></u>	
17	Travel	48.			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest			<u> </u>	
21	Payments to affiliates	1,828.			
22	Depreciation, depletion, and amortization .				
23 24	Insurance Other expenses Itemize expenses not covered above (List miscellaneous expenses				
	of line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)	,			
a	DINNERS/REFRESHMENTS	1,205.			0.
	OFFICER HONORARIUMS	525.			
	OFFICER INSTALLATION EXPENSE				
	FOREIGN TAXES	92.			
	All other expenses	347.			
	Total functional expenses Add lines 1 through 24e	37,546.			0.
		577540.			
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 Great Information (B) if following SOP 98-2 (ASC 958-720)				

Form **990** (2012)

ANCIENT FREE & ACCEPTED MASONS 125 MOSAIC LODGE **Balance Sheet** Check if Schedule O contains a response to any question in this Part X (B) End of year (A) Beginning of year Cash - non-interest-bearing 2 Savings and temporary cash investments 122,952 122,622. 3 Pledges and grants receivable, net 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 Loans and other 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) Complete Part II of Schedule L 6 Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10 a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10 a b Less accumulated depreciation 10b 10 c Investments - publicly traded securities 648,784 11 691,305 Investments - other securities See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 Other assets See Part IV, line 11 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 771,736 813,927 Accounts payable and accrued expenses 17 17 Grants payable 18 18 19 Deferred revenue 19 Tax-exempt bond liabilities 20 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 25 Total liabilities. Add lines 17 through 25 0 26 0. Organizations that follow SFAS 117 (ASC 958), check here ► k and complete lines 27 through 29, and lines 33 and 34. ASSET'S Unrestricted net assets 27 771,736 813,927. Temporarily restricted net assets 28 28 Permanently restricted net assets 29 R Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. FUND D Capital stock or trust principal, or current funds 30 31 Paid in or capital surplus, or land, building, or equipment fund 31 BALANCES 32 Retained earnings, endowment, accumulated income, or other funds 32

BAA

33

34

Total net assets or fund balances

Total liabilities and net assets/fund balances

813,927. Form 990 (2012)

813,927.

33

34

771,736

771,736

LOU	1 990 (2012) ANCIENT FREE & ACCEPTED MASONS 125 MOSAIC LODGE 43	2-6066292		ة ٣	age 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		32,0	075.
2	Total expenses (must equal Part IX, column (A), line 25)	2			546.
3	Revenue less expenses Subtract line 2 from line 1	3		~5,4	471.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	7	71,	736.
5	Net unrealized gains (losses) on investments	5		47,	662.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	8	13,9	927.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				X
	official in configure of contains a response to any question in this i arrow			Yes	No
1	Accounting method used to prepare the Form 990. X Cash Accrual Other	<u> </u>			
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O				
2 8	Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		Х
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviews separate basis, consolidated basis, or both	ed on a			
	Separate basis Consolidated basis Both consolidated and separate basis				
b Were the organization's financial statements audited by an independent accountant?					X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separabasis, consolidated basis, or both	ate			
	Separate basis Consolidated basis Both consolidated and separate basis		,		
(If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of review, or compilation of its financial statements and selection of an independent accountant?	the audit,	2 c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				
3 a	i As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Audit Act and OMB Circular A-133?	Single	3 a		х
k	olf 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audits, explain why in Schedule O and describe any steps taken to undergo such audits.	uired audit	3 b		

Form 990 (2012)

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TEEA0112 08/09/11

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

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

▶ Attach to Form 990.

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OMB No 1545-0047 '

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Ancient Free and Accepted Masons 125 Mosaic Lodge	25 Mosaic Lodge						Employer identrfication number
Part I General Information on Grants and Assistance	on Grants and	Assistance					42-6066292
Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	ain records to sub	stantiate the amou	int of the grants or	assistance, the c	grantees' eligibility for	or the grants or assis	tance, and
Desc	award the grants ization's procedur	or assistance? es for monitoring	the use of grant fu	nds in the United	States.		· · · · · Yes □ No
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	ssistance to Go	vernments and received more the	Organizations i	in the United Sill can be duplic	tates. Complete in a ted if additional	f the organization space is needed.	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)							
(2)							
(6)							
(4)							
(5)							
(9)							
(2)							
(8)							
(6)							
(10)							
(11)							
(12)							
2 Enter total number of section 501(c)(3) and governmen3 Enter total number of other organizations listed in the I	1501(c)(3) and govrganizations listed		t organizations listed in the line 1 table ine 1 table	ine 1 table			
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	see the Instruction	s for Form 990.		Ö	Cat No 50055P		Schedule I (Form 990) (2012)

Schedule I (Form 990) (2012)

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed. Part III

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 Colleg	1 College Scholarship to High School Graduates	4	8,000			
2 Summ	2 Summer Campership to Handicapped Person	-	200			
က						
4						
z.						
ဖ						
۲						
Part IV	Supplemental Information. Complete this	te this part to pro	ovide the information	required in Part I,	line 2, Part III, column (b)	part to provide the information required in Part I, line 2, Part III, column (b), and any other additional

Lodge, checks are issued directly to non-profit organizations awarded grants, to institutions of higher learning for students awarded scholarships, and to those businesses which are outside the local area were for Masonic organizations for which the Lodge is very familiar with how the funds granted were used. Students selected to receive scholarships generally by the Lodge. Firsthand knowledge is required of members or other individuals needing charitable assistance and must be supported by bills or other documents. If approved by the owed funds by a member or other individual needing charitable assistance. Since most of the non-profit organizations awarded grants are local, the Lodge has the ability to monitor Mosaic Lodge has developed a comprehensive application process to be followed by non-profit organizations applying for grants and by students applying for scholarships to be awarded write to the Lodge expressing their appreciation and occasionally write follow-up letters indicating how the scholarships helped them during their first year at the institution of higher their implementation. A number of non-profit organizations have presented, prior to Lodge meetings, programs describing how the funds granted were used. Most grants awarded learning they are attending.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

Ancient Free and Accepted Masons 125 Mosaic Lodge

Employer identification number

42-6066292

Part VI, Section A, Lines 1, 6, & 7: Mosaic Lodge is classified as a subordinate organization operating under a central organization, the
Grand Lodge of Iowa, A.F. and A.M. The Grand Lodge, through its Constitution and Laws for Subordinate Lodges, specifies how subordi-
and the state of t
nate lodges are to operate including their form of governance. Any man, who has received the three degrees of Symbolic Masonry in a
particular lodge or any Mason who has affiliated with it, is classified as a member of that lodge with the right to vote on all matters which
particular rouge of any mason who has anniated with it, is classified as a member of that rouge with the right to vote or an inaterior
may come before it. The Grand Lodge specifies that all members of a lodge present at a regular meeting of that lodge, provided that a
quorum of seven is present, are entitled to vote and thus make governance decisions on behalf of the lodge. The Grand Lodge does not
authorize delegating this authority to a smaller body Thus the sixty-six members of Mosaic Lodge form its governing body.
Part VI, Section A, Line 8: As required by the Grand Lodge, the secretary of a lodge records the minutes of every regular and special
Part VI, Section A, Line 6. As required by the Grand Lodge, the Secretary of a lodge records the himbacs of every regards and spoots.
meeting of the lodge in a minutes book which is kept for an indefinite period with most being kept from the time that the lodge was
chartered by the Grand Lodge. During a regular meeting of Mosaic Lodge, various committees will give a verbal report of their activities, if
any These reports are entered into the minutes of that meeting Any recomendations made by a committee must be voted upon by the
members of the lodge present at a regular meeting
Part VI, Section B, Line 11: The data for Form 990 is initially prepared by the Treasurer of Mosaic Lodge and then given to a C.P.A firm for
review and preparation The Treasurer reviews the completed Form 990 at a regular meeting of the Lodge the members present consti-
tuting the governing body. Upon request, any member of the Lodge may examine Form 990 in detail.
Part VI, Section B, Line 15 & Part VII, Section A, Column F: As a small token of appreciation for their service, Mosaic Lodge provides for the
Part VI, Section B, Line 13 & Part VII, Section A, Column 1. As a small token of appreciation for their service, mosaro Loago provides for the
annual payment of honorariums to three of its officers the Master, Treasurer, and Secretary These honorariums; \$75, \$150, and \$300
respectively; are determined by tradition and the Lodge's By-Laws An amendment to the By-Laws would be required in order to change
the amounts specified therein. The current amounts have been in effect since 2001.

42-6066292

1

Schedule O (Form 990 or 990-EZ), Supplemental Information to Form 990 or 990-EZ Form 990, Page 10, Line 24e All Other Expenses (continued)

Description	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
MISCELLANEOUS EXPENSES	347.			