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Form **990-EZ****Short Form**
Return of Organization Exempt From Income Tax

OMB No 1545-1150

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)

Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions). All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form.

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

A For the 2012 calendar year, or tax year beginning June 1, 2012, and ending May 31, 2013**B** Check if applicable:

- ☒ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization

Royal Arch Masons of Montana, Grand Chapter Club

Number and street (or P O box, if mail is not delivered to street address)

821 Central Ave

Room/suite

City or town, state or country, and ZIP + 4

Great Falls, MT 59401

D Employer identification number

81-0189869

E Telephone number

406-453-9080

F Group Exemption
Number ▶**G** Accounting Method: ☐ Cash ☐ Accrual Other (specify) ▶ Modified Cash**I** Website: ▶ yorkrite org/mt**J** Tax-exempt status (check only one) — ☐ 501(c)(3) ☒ 501(c)(10) (insert no.) ☐ 4947(a)(1) or ☐ 527**H** Check ☒ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).**K** Check ☐ if the organization is not a section 509(a)(3) supporting organization or a section 527 organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.**L** Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$**Part I** **Revenue, Expenses, and Changes in Net Assets or Fund Balances** (see the instructions for Part I)Check if the organization used Schedule O to respond to any question in this Part I ☐

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	
	2	Program service revenue including government fees and contracts	2	400 00
	3	Membership dues and assessments	3	8504 00
	4	Investment income	4	48251 83
	5a	Gross amount from sale of assets other than inventory	5a	8741 57
	b	Less: cost or other basis and sales expenses	5b	
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	8741 57
	6	Gaming and fundraising events		
	a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
b	Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b		
c	Less: direct expenses from gaming and fundraising events	6c		
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d		
7a	Gross sales of inventory, less returns and allowances	7a		
b	Less: cost of goods sold	7b		
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8	Other revenue (describe in Schedule O)	8	20 00	
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	65917 40	
Expenses	10	Grants and similar amounts paid (list in Schedule O)	10	810 00
	11	Benefits paid to or for members	11	10244 53
	12	Salaries, other compensation, and employee benefits	12	4909 89
	13	Professional fees and other payments to independent contractors	13	120 00
	14	Occupancy, rent, utilities, and maintenance	14	1100 38
	15	Printing, publications, postage, and shipping	15	120 41
	16	Other expenses (describe in Schedule O)	16	1650 32
	17	Total expenses. Add lines 10 through 16	17	18955 53
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	46961 87
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	438429 29
	20	Other changes in net assets or fund balances (explain in Schedule O)	20	(35515 74)
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	449875 42

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 106421

Form **990-EZ** (2012)

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NOV 15 2013

U.S. DEPT. OF TREASURY

19

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V ☐

	Yes	No
33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	✓
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34	✓
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a	✓
b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b	✓
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c	✓
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36	✓
37a Enter amount of political expenditures, direct or indirect, as described in the instructions ► 37a	37b	✓
b Did the organization file Form 1120-POL for this year?	37b	✓
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a	✓
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	
39 Section 501(c)(7) organizations. Enter:	39a	
a Initiation fees and capital contributions included on line 9	39a	
b Gross receipts, included on line 9, for public use of club facilities	39b	
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ► ; section 4912 ► ; section 4955 ►		
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	
c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ►		
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ►		
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	
41 List the states with which a copy of this return is filed ►		
42a The organization's books are in care of ► Telephone no. ► Located at ► ZIP + 4 ►		
b 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)? If "Yes," enter the name of the foreign country: ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts	42b	✓
c At any time during the calendar year, did the organization maintain an office outside the U.S.? If "Yes," enter the name of the foreign country: ►	42c	✓
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the tax year ► 43		
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	✓
b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b	✓
c Did the organization receive any payments for indoor tanning services during the year?	44c	✓
d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d	
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	✓
45b 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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b	✓

- 46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

	Yes	No
46		☒

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47–49b and 52, and complete the tables for lines 50 and 51

Check if the organization used Schedule O to respond to any question in this Part VI ☐

- 47 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

	Yes	No
47		

- 48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

48		
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- 49a Did the organization make any transfers to an exempt non-charitable related organization?

49a		
-----	--	--

- b If "Yes," was the related organization a section 527 organization?

49b		
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- 50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee paid more than \$100,000	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation

- f Total number of other employees paid over \$100,000 ▶

- 51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

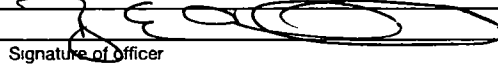
(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation

- d Total number of other independent contractors each receiving over \$100,000 ▶

- 52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A

▶ ☐ Yes ☐ No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of Officer 	Date 10/3/13
	ROGER E. CATHEL, SECRETARY	
	Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
	Firm's name ▶	Firm's EIN ▶			
	Firm's address ▶	Phone no. ▶			

May the IRS discuss this return with the preparer shown above? See instructions ▶ ☐ Yes ☐ No

SCHEDULE O
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ**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.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013**Open to Public
Inspection**

Name of the organization

Royal Arch Masons of Montana, Grand Chapter Club

Employer identification number

81-0189869

MT GRAND CHAPTER ROYAL ARCH MASONS
Profit & Loss Budget vs. Actual
June 2012 through May 2013

	<u>Jun '12 - May 13</u>	<u>Budget</u>	<u>\$ Over Budget</u>	<u>% of Budget</u>
Ordinary Income/Expense				
Income				
Due PLM fund	400.00			
Misc Income	20.00			
Per Capita Due & Payable	0.00	1,720.00	-1,720.00	0.0%
Per Capita Dues	8,504.00	9,450.00	-946.00	90.0%
Transfer from UBS PLM Account	8,741.57			
Total Income	<u>17,665.57</u>	<u>11,170.00</u>	<u>6,495.57</u>	<u>158.2%</u>
Expense				
Apron & Jewel	356.15 - 11	400.00	-43.85	89.0%
Dan Pushee Web Site	120.00 - 13	120.00	0.00	100.0%
Grand Officer Travel	1,500.00 - 11	1,500.00	0.00	100.0%
Misc Expense	0.00	250.00	-250.00	0.0%
Office Expense	6,800.00	6,800.00	0.00	100.0%
16 - Per Capita xpense	981.00 - 16	975.00	6.00	100.6%
PLM Payments	8,388.38 - 11			
PLM Transfer to UBS PLM Account	400.00 - 10			
Youth Group Donation	410.00 - 10	500.00	-90.00	82.0%
Total Expense	<u>18,955.53</u>	<u>10,545.00</u>	<u>8,410.53</u>	<u>179.8%</u>
Net Ordinary Income	<u>-1,289.96</u>	<u>625.00</u>	<u>-1,914.96</u>	<u>-206.4%</u>
Other Income/Expense				
Other Income				
PLM Investment gain/loss	3,620.59			
TH Investment gain/loss	51,713.61			
Total Other Income	<u>55,334.20</u>			
Net Other Income	<u>55,334.20</u>	<u>0.00</u>	<u>55,334.20</u>	<u>100.0%</u>
Net Income	<u><u>54,044.24</u></u>	<u><u>625.00</u></u>	<u><u>53,419.24</u></u>	<u><u>8,647.1%</u></u>

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OMB No. 1545-0047

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Name of the organization

Royal Arch Masons of Montana, Grand Chapter Club

Employer identification number

81-0189869

3:13 PM

10/03/13

Cash Basis

MT GRAND CHAPTER ROYAL ARCH MASON'S
Balance Sheet
As of May 31, 2013

	<u>May 31, 13</u>
ASSETS	
Current Assets	
Checking/Savings	
RA Checking	-2,454.71
Total Checking/Savings	<u>-2,454.71</u>
Total Current Assets	<u>-2,454.71</u>
Other Assets	
Due from other funds	18,192.00
Paid Life membership RA	125,562.93
Tesch Hedges Memorial	316,852.45
Total Other Assets	<u>460,607.38</u>
TOTAL ASSETS	<u><u>458,152.67</u></u>
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Other Current Liabilities	
Due other Funds RA	444.16
Montana RARA Fund	6,424.84
RA Triennial Fund	681.00
RARA Fund	727.25
Total Other Current Liabilities	<u>8,277.25</u>
Total Current Liabilities	<u>8,277.25</u>
Total Liabilities	<u>8,277.25</u>
Equity	
Opening Bal Equity	479,686.47
Retained Earnings	-83,855.29
Net Income	54,044.24
Total Equity	<u>449,875.42</u>
TOTAL LIABILITIES & EQUITY	<u><u>458,152.67</u></u>

485,391.16

(25,515.74)

T.H. Correction

SCHEDULE O
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Department of the Treasury
Internal Revenue Service

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OMB No. 1545-0047

2013

**Open to Public
Inspection**

Name of the organization

Royal Arch Masons of Montana, Grand Chapter Club

Employer identification number

81-0189869

3:12 PM

10/03/13

Cash Basis

MT GRAND CHAPTER ROYAL ARCH MASONS
Profit & Loss
June 2012 through May 2013

	<u>Jun '12 - May 13</u>
Ordinary Income/Expense	
Income	
Due PLM fund	400.00
Misc Income	20.00
Per Capita Dues	8,504.00
Transfer from UBS PLM Account	8,741.57
Total Income	<u>17,665.57</u>
Expense	
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Dan Pushee Web Site	120.00
Grand Officer Travel	1,500.00
Office Expense	6,800.00
Per Capita xpense	981.00
PLM Payments	8,388.38
PLM Transfer to UBS PLM Account	400.00
Youth Group Donation	410.00
Total Expense	<u>18,955.53</u>
Net Ordinary Income	<u>-1,289.96</u>
Other Income/Expense	
Other Income	
PLM Investment gain/loss	3,620.59
TH Investment gain/loss	51,713.61
Total Other Income	<u>55,334.20</u>
Net Other Income	<u>55,334.20</u>
Net Income	<u><u>54,044.24</u></u>

2012-2013 Office Budget allocations (actual)					
EXPENSE	total expense	royal arch	council	commandry	total
line 12 ← salary	\$25,000.00	\$4,575.00 ✓	\$3,700.00	\$16,725.00	\$25,000.00
← payroll tx	\$1,830.00	\$334.89 ✓	\$270.84	\$1,224.27	\$1,830.00
15 ← printing	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
15 ← postage	\$558.00	\$102.11	\$82.58	\$373.30	\$558.00
15 ← phone	\$806.00	\$147.50	\$119.29	\$539.21	\$806.00
15 ← off equip	\$100.00	\$18.30	\$14.80	\$66.90	\$100.00
16 ← insurance	\$3,454.00	\$632.08	\$511.19	\$2,310.73	\$3,454.00
← off supply	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
line 17 ← rent	\$3,606.98	\$660.08 ✓	\$533.83	\$2,413.07	\$3,606.98
← GL-rent	\$600.00	\$109.80 ✓	\$88.80	\$401.40	\$600.00
← Mt Mas news	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
16 ← misc ex	\$0.00	37.24 \$0.00	\$0.00	\$0.00	\$0.00
16 ← Session Advance	\$1,000.00	\$183.00	\$148.00	\$669.00	\$1,000.00
TOTAL	\$36,954.98	\$6,762.76	\$5,469.34	\$24,722.88	\$36,954.98

6800

4409.89
 1160.38
 120.41
669.32