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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)

OMB No 1545 0047 2012

Open to Public

Denartment of the Treasury

Inter	nal Revenue	Service	► The organizati	on may have to use a copy	of this return to satisf	y state reportii	ng requirem	ents		Inspection
A	For the 2	012 calendar	year, or tax year begi	nning Jul 1	, 2012,	and ending	Jun			013
В	Chick it app	plicable C	Name of organization AN	CIENT FREE & A	CCEPTED MAS	SONS OF	TEXAS	D Employe	r Identificat	ion Number
	Addres	is change	Doing Business As					23-7	143666	6
	Name	change	Number and street (or P O	box if mail is not delivered to	street addi)	Room/si	nte	E Telephon	e number	
	initial i	eturn P	O BOX 578					(979) 236-	-5084
	Termin	nated	City town or country		State	ZIP code + 4				
	Ameno	led return LA	AKE JACKSON		TX	77566		G Gross red	ceipts \$	88,642.
	Applica	stion pending F	Name and address of princi	pal officer		I	I(a) Is this a	a group return	for affiliates	Yes X No
	_	DO	RSEY HAMILTON 312	N SHANKS CLU	TE TX	: 77531	H(b) Are all	affiliates inclu attach a list (ded?	Yes No
1	Tax exen	ipt status	501(c)(3) X 501(c) (4947(a)(1) or	527	II NO	allacii a iist (see msnucu	O(15)
J	Websit	e: N/A	<u></u>				H(c) Group 6	exemption nur	nber ►	
K	Form of a	organization X	Corporation Trust	Association Other	LY	ear of Formati	on 1948	3 Misi	ate of legal of	domicile TX
Pa	art I	Summary						· · · · · · · · · · · · · · · · · · ·		
	1 Bri	efly describe	the organization's mis-	sion or most significar	it activities SE	E SCHE	OULE O			
a)	i									
auc		 -	. 				- -			
Ë		- 								 .
Governance	2 Ch	eck this box •		on discontinued its op		sed of more	than 25%	% of its net		
		,	g members of the gove endent voting membe	~ , ,	•	b)		-	3 4	275
es			individuals employed		•	U)		-	5	275
Activities &			volunteers (estimate i		(i dit v, iiic za)			F	6	275
Act	7a Tot	al unrelated b	ousiness revenue from	Part VIII, column (C),	line 12				7a	0.
	b Ne	t unrelated bu	isiness taxable income	from Form 990-T, line	e 34				7b	
							P	rıor Year		Current Year
e)	!		d grants (Part VIII, line	•				5,6	57.	8,379.
Revenue		-	revenue (Part VIII, lin	•						
eve	!		me (Part VIII, column					7,0:		3,935.
ш	11 Oth	nei revenue (F	Part VIII, column (A), I	ines 5, 6d, 8c, 9c, 10c	, and 11e)	FIVE	1	73,50		76,328.
	12 Tol	ai revenue –	Part VIII, column (A), I add lines 8 through 1 ar amounts paid (Part	(must equal Part VIII	, corumn (A)	20120	<u> </u>	86,1		88,642.
				,	. 5)	. ሳሽ	₩ /Ó	2,2	75.	
)			or for members (Part		" I WIA	Ry & Co	1 78			
es	15 Sa	iaries, otner c	ompensation, employe	ee benefits (Part IX, co	numn (a) lines 5	··10)		1		
Expenses	16a Pic	otessional fun	diaising fees (Pait IX,	column (A), line 11e)		BOEN,		لـ		
×	b Tot	lal fundraising	j expenses (Part IX, co	olumn (D), line 25) 🟲		300				
;	17 Oth	ner expenses	(Part IX, column (A), I	ines 11a-11d, 11f-24e)			36,80	01.	41,565.
2	18 To	al expenses	Add lines 13-17 (must	equal Part IX, column	n (A), line 25)			39,0	76.	41,565.
		venue less ex	penses Subtract line	18 from line 12				47,1	22.	47,077.
15 o -							Beginnin	g of Current	Year	End of Year
Net Assets or Fund Balancos	20 To	al assets (Pa						649,10	\longrightarrow	696,185.
10 F	21 Tol		Part X, line 26)					14,2	75.	15,300.
	1	t assets or fur	nd balances Subtract	line 21 from line 20				634,83	33.	680,885.
Pa	art II 📑	Signature I	Block							
Unde	er penalties i	of perjury I declar	e that I have examined this r (other than office) is based of	eturn including accompanyin	g schedules and staten	ments and to the	ne best of m	y kn owled ge <i>a</i>	ind belief it	is true correct and
		1. Prepar	(one) than one of its based of	A			Г.	<u> </u>	16	
_		Signature o	Officer William	-γ-			Dai	<u> 3-11-</u>	-14	
Sig	gn	, signature	1, 19 0	ssbaeer 1	1-01:01			. 1. 1/2	1-1-6	[#] 1317
He	re	Type or prin	74-03 10 1.1	somety (NO25h.ptu	maste	LAV	CACKE	wy	1211
		Print/Type prepa		Preharer's signature		Date		a. ke	, PTIN	
_				Preparer's signature	Ma.		,	Check X]"	
Pa			N A. SHAW	- Cours	200-00	103/17/	14	self employed	150	1223919
	eparer e Only	Firm's name	KATHLEEN A.	SHAW, TAX PR	EPARATION_			F F		
US	e Only	Firm's address	PO BOX 3073					Firms EIN		000 011
NA	. 150 100	discourse the s	FREEPORT	r aboun about 3 (2-1273		Phone no	(979)	233-2411
			eturn with the prepare						X	Yes No
DA.	m rurra	perwork Real	uction ACL NOTICE, See	one separate instruct	IUIIS.	TEFA	A0101 05/0	P1/13		- comm 990 (2012).

Form 990 (2012)	ANCIENT FREE & ACCE	PTED MASONS OF TEXAS	S 23-	7143666 Page 2							
	ement of Program Service										
Chec	k if Schedule O contains a respor	ise to any question in this Part II	1								
1 Briefly descr	the the organization's mission										
SEE SCH	EDULE O										
2 Did the orga	nization undertake any significant	program services during the year	ar which were not listed on the prior	,							
Form 990 or	990-EZ?			Yes X No							
If 'Yes,' desc	cribe these new services on Sche	dule O									
3 Did the orga	nization cease conducting, or ma	ke significant changes in how it o	conducts, any program services?	Yes X No							
	cribe these changes on Schedule										
Section 501											
		· · · · <u>·</u>									
) (Expenses \$	including grants of	\$) (Revenue	\$)							
<u>N/A</u>											
											
											
											
	. 										
											
_											
4 b (Code) (Expenses \$	including grants of	\$) (Revenue	\$)							
	. 										
	. 			-							
	. 										
											
4 c (Code) (Expenses \$	including grants of	\$) (Revenue	; \$)							
				-							
	-			-							
4 d Other progra	am services (Describe in Schedu	le O)									
(Expenses		luding grants of \$) (Revenue \$)							
4 e Total progra	am service expenses 🕨										
BAA		EA0102 08/08/12		Form 990 (2012							

		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		Χ
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		Х
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		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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	88		Х
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		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			
a	Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D. Part VI	11 a	Х	
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	11 b		Х
С	EDID 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	11 c		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	11 d	Х	
	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	X	
f	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	11 f		Х
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a		Х
	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		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14 a	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		Х
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		Х
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		Х
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		Х
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		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G. Part III	19		Х
20 a	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		Х
b	olf 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes, complete Schedule I, Parts I and II	21		Х
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		Х
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? <i>If 'Yes,' complete Schedule J</i>	23		х
24 a	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, and 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		х
t	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	: 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		
c	Did the organization act as an on behalf of issuer for bonds outstanding at any time during the year?	24d		
25 a	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		
t	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, 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		Х
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		Х
	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	A current or former officer director, trustee or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
t	A family member of a current or former officer, director, this lee on key employee? If 'Yes,' complete Schedule L. Part IV	28b		Х
	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 conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, 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		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-3? If 'Yes' complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity $^{\circ}$ If 'Yes,' complete Schedule R, Parts II, III, IV, and V line 1	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
t	olf '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	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		Х
38	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	X	
BAA		Form	990	(2012)

Form 990 (2012) ANCIENT FREE & ACCEPTED MASONS OF TEXAS

Part V | Statements Regarding Other IRS Filings and Tax Compliance
Check if Schedule O contains a response to any question in this Part V

			X
		Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1 a			
b Enter the number of Forms W 2G included in line 1a. Enter -0- if not applicable 1 b 0			
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2 a			
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b		
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		Х
b If Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3 b		
4 a 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)?	4 a		Х
bilf ites 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			
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
c If 'Yes' to line 5a or 5b, did the organization file Form 8886 T?	5 c		<u> </u>
6 a 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 as charitable contributions?	6 a		х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 n.c de partly as a contribution and partly for goods and services provided to the payor?	7 a		Х
bil Yes, did the organization notify the donor of the value of the goods or services provided?	7 b		Х
c Did the organization sell, exchange or otherwise dispose of tangible personal property for which it was required to file	_		1,
Form 8282?	7 c		X
d If 'Yes' indicate the number of Forms 8282 filed during the year 7 d	_		v
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		<u> </u>
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098 C?	7 h		<u> </u>
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.			
a Did the organization make any taxable distributions under section 4966?	9 a		
b Did the organization make a distribution to a donor, donor advisor, or related person?	9 b		
0 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			
11 Section 501(c)(12) organizations. Enter			l
a Gross income from members or shareholders			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	12 a		ļ
b If 'Yes' enter the amount of tax-exempt interest received or accrued during the year			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.	_		
' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	13 a		ļ
Note. See the instructions for additional information the organization must report on Schedule O			İ
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 13b			
c Enter the amount of reserves on hand			
<u> </u>	14 a		X
	14b		

Form 990 (2012) ANCIENT FREE & ACCEPTED MASONS OF TEXAS 23-7143666 Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Check if Schedule O contains a response to any question in this Part VI X Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a 275 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, a plain in Schedule O b Enter the number of voting members included in line 1a, above, who are independent 1 b 275 Did any officer, director trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee? 2 Χ 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 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Х Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 Χ 7 a 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? 7 a Х b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders or other persons other than the governing body? 7 b Χ Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8 a Х b Each committee with authority to act on behalf of the governing body? 8 b Χ Is there any officer, director or 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code Yes No

10 a Did the organization have local chapters, branches, or affiliates? 10 a Χ b If Yes, did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? 11 a Х b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 Χ 12 a b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise 12 b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 12 c 13 Did the organization have a written whistleblower policy? 13 Х Did the organization have a written document retention and destruction policy? 14 Х Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO Executive Director, or top management official 15 a b Other officers of key employees of the organization 15 b Х If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions.) 16 a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16 a Χ bilf 'Yes did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 3

		100	- 1
ec	ction C. Disclosure		
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, and 990-T (501(c)(3)s only) available. Indicate how you make these available. Check all that apply	ailable for	public
	Own website Another's website V Upon request Other (explain in Schedule O)		

Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

State the name, physical address, and telephone number of the person who possesses the books and records of the organization

102 N PARKING PLACE LAKE JACKSON TN 77566 ____(979)_297-8091 TEEA0106 08/08/12 Form 990 (2012)

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

Check if Schedule O contains a response to any question in this Part VII

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any. See instructions for definition of 'key employee'
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization	on nor any r	elated	org	anız (C		n com	pen	sated any current offic	cer, director, or trustee	2
(A) Name and Title	(B) Average hours per	Positio one bo offic	n (do x un' eran	not o	heck	more the structure of t	nan n an e)	Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	week (list any hours for related organiza trons below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W 2/1099 MISC)	related organizations (W 2/1099 MISC)	compensation from the organization and related organizations
(1) DORSEY HAMILTON	20.00				-					
WORSHIPFUL MASTER				Χ				0.	0.	0.
(2) WILL MOSSBARGER	4.00									
SENIOR WARDEN				〈				0.	0.	0.
(3) TONY CORNELL	4.00									
JUNIOR WARDEN				Χ				0.	0.	0.
(4) GERALD SHANKS	12.00	ļ								
TREASURER				Χ				0.	0.	
(5) HENRY MENDEZ	24.00									
SECRETARY				Χ				0.	0.	0.
(6)	-	1								
(9)			-						***************************************	·····
<u>(10)</u>										
(11)										
(12)							-			
(13)		ļ <u> </u>	-			÷-				· · · · · · · · · · · · · · · · · · ·
(14)						<u> </u>				

Page 8

Part VII Section A. Officers, Directors, Tru	ıstees, l	Key	Em	iplo		es,	and	d Highest Com	pensated Empl	oyees	(cor	1t)
(A) Name and title	hours box, unless person is both an officer and a director/trustee) Reportable compensation from compensation		(E) Reportable compensation from related organizations	ble Estimate amount of compensal								
	(list any hours for related organiza tions below dotted line)	or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	(W 2/1099 MISC)	(W 2/1099 MISC)	fri orga and	om the inization I related inization) j
(15)												
(16)												
(17)												
(18)							ļ <u>-</u>				·	
(19)												
(20)					-							
(21)												
(22)												
(23)												
(24)												
(25)												
1 b Sub-total		!			1	1	>	0.	0.			0.
c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)							>	0.	0.			0.
2 Total number of individuals (including but not limiter from the organization ►	ted to tho	se lis	ited	abo [,]	ve)	who	rece	eived more than \$	100,000 of reportabl	e comp		
3 Did the organization list any former officer, direct			кеу е	empl	loye	e, or	hig	hest compensated	i employee	3	Yes	No
 on line 1a? If 'Yes' complete Schedule J for such 4 For any individual listed on line 1a, is the sum of the organization and related organizations greater 	reportable	e con	nper	ısatı f 'V	on a	and o	othe	r compensation for	om	3		X
such individual 5 Did any person listed on line 1a receive or accrue									ndıvıdual	4		Х
for services rendered to the organization? If 'Yes, Section B. Independent Contractors	' complete	e Scl	nedu	ile J	for	such	pei	rson		5		X
Complete this table for your five highest compens compensation from the organization. Report compensation.	ated inde pensation	pend for th	ent o	cont alen	ract dar	ors t year	hat end	received more tha ding with or within	n \$100,000 of the organization's t	ax year		
(A) Name and business addr	ess			·				Description (of services	Compe	C) nsatio	'nΠ
Total number of independent contractors (including)	ng but not	lımıt	ed to	o the	ose	listed	d ab	ove) who received	I more than			
\$100,000 in compensation from the organization	•											

	Check if Schedule O contains a response to any question	· · · · · · · · · · · · · · · · · · ·	(B)	· · · · · · · · · · · · · · · · · · ·	
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
NTS TS	1 a Federated campaigns 1 a				
S S	b Membership dues 1b 5,777.				
TS,	c Fundraising events 1 c 2,475.				
GF	d Related organizations 1 d				
SNO	e Government grants (contributions)				
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grants, and similar amounts not included above 1 f 127.				
AND	g Noncash contributions included in lns la lf \$				
_ щ	h Total. Add lines 1a 1f	8,379.			
VEN	Business Code 2 a				
RE	b			·····	
VICE VICE	c				-
SER	d				
AM	e				
90	f All other program service revenue				
PA	g Total. Add lines 2a-2f				
	3 Investment income (including dividends, interest and				
	other similar amounts)	3,935.	3,935.	0.	0
	4 Income from investment of tax exempt bond proceeds > S Royalties >				
	(i) Reat (ii) Personal				
	6 a Gross rents 75, 516.	i			
	b Less rental expenses				
	c Rental income or (loss) 75,516.				
	d Net rental income or (loss)	75,516.	75,516.	0.	0
	7 a Gross amount from sales of (i) Securities (ii) Other				
	assets other than inventory				
	b Less cost or other basis				
	and sales expenses c Gain or (loss)				
	d Net gain or (loss)				
					-
NE	8 a Gross income from fundraising events (not including \$ 2,475.	Ì			
EVE	of contributions reported on line 1c)				
OTHER REVENUE	See Part IV line 18 a				
E	b Less direct expenses b				
	c Net income or (loss) from fundraising events				
	9 a Gross income from gaming activities See Part IV, line 19 a				
	b Less direct expenses b				
	c Net income or (loss) from gaming activities			 	,
	10 a Gross sales of inventory, less returns and allowances a				
	b Less cost of goods sold b				
	c Net income or (loss) from sales of inventory				
	Miscellaneous Revenue Business Code				
	11a MISCELLANOUS NONE	812.	812.	0.	0
	b				-
	d All other revenue				
	e Total. Add lines 11a-11d	812.			
	12 Total revenue. See instructions	88,642.	80,263.	0.	0

Pai	rt IX Statement of Functional Expen	ses			
Sec	tion 501(c)(3) and 501(c)(4) organizations must	complete all columns A	ll other organizations m	nust complete column (A)
	Check if Schedule O contains a re	esponse to any question	in this Part IX		
Do 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				
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
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				
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	Payroll taxes				
11	Fees for services (non-employees)				
i	a Management				
) Legal				
	Accounting	5,736.	5,736.		
(d Lobbying	37.33.	37.331		
	e Professional fundraising services. See Part IV, line 17				
	Investment management fees				
g	Other (If line 11g ami exceeds 10% of line 25, column (A) ami, list line 11g expenses on Sch O)				
12	Advertising and promotion				·
13	Office expenses	4,046.	4,046.		
14	Information technology				
15	Royalties				
16	Occupancy	16,727.	16,727.		
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,494.	1,494.		
20	Interest				
21	Payments to affiliates				
22	Depreciation depletion, and amortization				
	Insurance	10,028.	10,028.		
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)				
i	STEWARD FUND	1,573.	1,573.		
i	MISCELLANOUS	462.	462.		
	PR& ADVERTISING	150.	150.		
	FUND RAISING EXPNESE	1,349.	1,349.		
	All other expenses				
25	Total functional expenses Add lines 1 through 24e	41,565.	41,565.		
	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)		, 000.		

		Check if Schedule O contains a response to any que	estion in this Part X			
	-			(A) Beginning of year		(B) End of year
	1	Cash – non interest bearing		114,308.	1	87,052.
Ì	2	Savings and temporary cash investments		25,629.	2	100,148.
ĺ	3	Pledges and grants receivable, net			3	
	4	Accounts receivable net			4	
	5	Loans and other receivables from current and former of trustees, key employees, and highest compensated empart II of Schedule L	officers, directors, aployees Complete		5	
	6	Loans and other receivables from other disqualified pe section 4958(f)(1)), persons described in section 4958(employers and sponsoring organizations of section 50 beneficiary organizations (see instructions) Complete	(c)(3)(B), and contributing 1(c)(9) voluntary employees	·	6	
A	7	Notes and loans receivable, net			7	
Š	8	Inventories for sale or use			8	······
A S S E T S	9	Prepaid expenses and deferred charges			9	
	10 a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 490,310.			
	h	Less accumulated depreciation	10b 490,310.	490,310.	10 c	490,310.
	11	Investments – publicly traded securities	100	490,310.	11	490,310.
İ	12	Investments – other securities See Part IV, line 11			12	
	13	Investments – program-related See Part IV, line 11		13		
	14	Intangible assets		14		
	15	Other assets See Part IV, line 11	Ì	18,861.	15	18,675.
ı	16	Total assets. Add lines 1 through 15 (must equal line 3	34)	649,108.	16	696, 185.
i	17	Accounts payable and accrued expenses		019,100.	17	0,50,105.
1	18	Grants payable		18		
	19	Deferred revenue			19	
L	20	Tax-exempt bond liabilities			20	
4	21	Escrow or custodial account liability. Complete Part IV	of Schedule D		21	
ABILITIES	22	Loans and other payables to current and former officer key employees, highest compensated employees, and Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated this	rd parties		23	
5	24	Unsecured notes and loans payable to unrelated third	parties		24	
	25	Other liabilities (including federal income tax, payables and other liabilities not included on lines 17-24) Comp	s to related third parties, blete Part X of Schedule D	14,275.	25	15,300.
	26	Total liabilities. Add lines 17 through 25		14,275.	26	15,300.
N E T		Organizations that follow SFAS 117 (ASC 958), check lines 27 through 29, and lines 33 and 34.	here 🕨 🗓 and complete			
Ş	27	Unrestricted net assets			27	
ASSETS	28	Temporarily restricted net assets		114,308.	28	87,052.
	29	Permanently restricted net assets	520,525.	29	593,833.	
OR F		Organizations that do not follow SFAS 117 (ASC 958) and complete lines 30 through 34.				
OZC ₁	30	Capital stock or trust principal, or current funds		30		
,	31	Paid in or capital surplus, or land, building, or equipme		31		
Ļ	32	Retained earnings, endowment, accumulated income,	or other funds		32	
B4」420mの	33	Total net assets or fund balances		634,833.	33	680,885.
Š	34	Total liabilities and net assets/fund balances		649,108.	34	696,185.

BAA

Form **990** (2012)

Forr	1990 (2012) ANCIENT FREE & ACCEPTED MASONS OF TEXAS	23-7143666	5	Pa	ige 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		88,6	542.		
2	otal expenses (must equal Part IX, column (A), line 25)			41,565.			
3	venue less expenses Subtract line 2 from line 1				47,077.		
4	et assets or fund balances at beginning of year (must equal Part X, line 33, column (A))				333.		
5	Net unrealized gains (losses) on investments	5					
6	Donated services and use of facilities	6					
7	Investment expenses 7						
8	Prior period adjustments	8		~1,()25.		
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	6	80,8	385.		
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response to any question in this Part XII				X		
	<u> </u>			Yes	No		
1	Accounting method used to prepare the Form 990 X Cash Accrual Other						
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O						
2 a 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 reviewseparate basis, consolidated basis, or both	ewed on a					
	Separate basis Consolidated basis Both consolidated and separate basis						
b Were the organization's financial statements audited by an independent accountant?			2 b		х		
	If 'Yes' check a box below to indicate whether the financial statements for the year were audited on a sep	arate					
	basis, consolidated basis, or both 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 review or compilation of its financial statements and selection of an independent accountant?	of 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 As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?			3 a		х		
!	oif 'Yes, did the organization undergo the required audit or audits? If the organization did not undergo the roor audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired audit	3 ь				
BAA			Form	990 ((2012)		

SCHEDULE D (Form 990)

Supplemental Financial Statements

2012

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization ► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.
► See separate instructions.

Employer identification number

ANC	CIENT FREE & ACCEPTED MASONS (OF TEXAS		23-7143666		
Par	Part I 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 fu	unds	(b) Funds and other accounts		
1	Total number at end of year					
2	Aggregate contributions to (during year)					
3	Aggregate grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donors are the organization's property, subject to the organization's			advised funds Yes No		
6	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 imperinissible private benefit? Yes No					
Par	t II Conservation Easements. Comp	lete if the organization ar	nswered 'Yes' to	Form 990, Part IV, line 7		
1	Purpose(s) of conservation easements held by					
	Preservation of land for public use (e.g., re	ecreation or education)	Preservation of a	n historically important land area		
	Protection of natural habitat		Preservation of a	certified historic structure		
	Preservation of open space					
2	Complete lines 2a through 2d if the organizatio last day of the tax year	on held a qualified conservation	contribution in the f	form of a conservation easement on the		
	lest day of the tax year			Held at the End of the Tax Year		
a	Total number of conservation easements			2 a		
	Total acreage restricted by conservation easen	nents		2 b		
c	: Number of conservation easements on a certifi	ed historic structure included in	(a)	2 c		
c	Number of conservation easements included in	(c) acquired after 8/17/06, and	not on a historic			
3	structure listed in the National Register Number of conservation easements modified, t	ransferred cleased extinguish	ed or terminated h	2 d		
3	tax year	ransierieu, cieaseu, extinguisii	led, or terminated b	y the organization during the		
4	Number of states where property subject to cor	nservation easement is located	·			
5	Does the organization have a written policy regard enforcement of the conservation easement		inspection, handline	g of violations, Yes No		
6	Staff and volunteer hours devoted to monitoring	g inspecting and enforcing con	iservation easemen	its during the year		
7	Amount of expenses incurred in monitoring, ins	specting, and enforcing conserv	ation easements du	uring the year		
8	Does each conservation easement reported on	line 2(d) above satisfy the requ	irements of section			
	and section 170(h)(4)(B)(ii)?			Yes No		
9	In Part XIII, describe how the organization report include, if applicable, the text of the footnote to conservation easements	o the organization's financial sta	tements that descri	bes the organization's accounting for		
Par	t III Organizations Maintaining Colle Complete if the organization ans	ctions of Art, Historical wered 'Yes' to Form 990,	Freasures, or O Part IV, line 8	ther Similar Assets.		
1 a	alf the organization elected, as permitted under art, historical treasures, or other similar assets in Part XIII, the text of the footnote to its finance	s held for public exhibition, educ	ation, or research ii			
t	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			▶ \$		
2	If the organization received or held works of ar amounts required to be reported under SFAS 1	t, historical treasures, or other s 16 (ASC 958) relating to these	sımılar assets for fir items	nancial gain, provide the following		
ā	Revenues included in Form 990, Part VIII, line	1		► \$		
Ł	Assets included in Form 990, Part X			► \$		

Schedule D (Form 990) 2012 ANCIENT	FREE & A	CCEPTED MAS	ONS OF TEXAS	23-71	43666	Page 2
Part III Organizations Maintaini	ng Collectio	ns of Art, Histo	orical Treasures,	or Other Similar As	sets (contin	nued)
3 Using the organization's acquisition, items (check all that apply)	accession, and	other records, che	ck any of the following	g that are a significant us	se of its collect	noi
a Public exhibition		d Loan	or exchange programs	S		
b Scholarly research		e Other				
c Preservation for future generation						
4 Provide a description of the organiza Part XIII					e in	
5 During the year, did the organization to be sold to raise funds rather than	solicit or receiv to be maintaine	re donations of art, d as part of the ord	historical treasures, i ganization's collection	or other similar assets	Yes	No
Part IV Escrow and Custodial Arr	angements.	Complete if the c			0, Part IV, lin	e 9, or
reported an amount on F	orm 990. Pa	irt X, line 21				
1 a Is the organization an agent, trustee, on Form 990 Part X?	custodian, or o	ther intermediary t	for contributions or other	her assets not included	Yes	No
b If 'Yes' explain the arrangement in F	Part XIII and cor	nplete the following	g table			
					Amount	
c Beginning balance				1 c		
d Additions during the year				1 d		
e Distributions during the year				1 e		
f Ending balance				1 f	· 	
2 a Did the organization include an amou		•			Yes	No
b If Yes,' explain the airangement in F	art XIII Check	here if the explant	ion has been provided	f in Part XIII		
Part V Endowment Funds. Com	plete if the o	organization ar	swered 'Yes' to f	Form 990 Part IV II	ne 10	
	(a) Current	(b) Prior yea		(d) Three years	(e) Four ye	ears
1 a Beginning of year balance						
b Contributions						
c Net investment earnings, gains, and losses						
d Grants or scholarships						
e Other expenditures for facilities and programs						
f Administrative expenses						
g End of year balance						
2 Provide the estimated percentage of	the current year	r end balance (line	1g, column (a)) held	as		
a Board designated or quasi endowmen	nt ►	 &				
b Permanent endowment						
c Temporarily restricted endowment		⁹⁶				
The percentages in lines 2a, 2b, and	2c should equa	1 100%				
3 a Are there endowment funds not in the organization by	e possession of	the organization tl	hat are held and admi	inistered for the	Yes	No
(i) unrelated organizations					3a(ı)	
(II) related organizations					3a(ii)	
b If 'Yes' to 3a(ii), are the related organ		•			3b	
4 Describe in Part XIII the intended use						
Part VI Land, Buildings, and Eq					1 (1) 0 .	
Description of property	(a) C	ost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book	value
1 a Land		77,000.			7	7,000.
b Buildings		275,000.				5,000.
c Leasehold improvements		120,710.				0,710.
d Equipment		17,600.				7,600.
e Other						
Total. Add lines 1a through 1e (Column (a	l) must equal Fo	orm 990, Part X, co	olumn (B), line 10(c))		490	0,310.
BAA				Sche	dule D (Form 9	990) 2012

TEEA3302 06/07/12

(6)(7) (8) (9) (10)(Column (b) must equal Form 990, Part X, column (B), line 15) Total 18,675

Other Liabilities. See Form 990, Part X, line 25 (a) Description of liability (b) Book value (1) Federal income taxes (2) REAL ESTATE TAXES 5,050. (3) INSURANCE 10,250 (4) (5) (6) (7)(8) (9)(10)(11)15,300. Total (Column (b) must equal Form 990, Part X, column (B) line 25)

2. FIN 48 (ASC 740) Footnote In Part XIII, 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). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2012 ANCIENT FREE & ACCEPTED MASONS OF TEXAS	23-7143666	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return	
1 Total revenue, gains, and other support per audited financial statements	1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a Net unrealized gains on investments 2 a		
b Donated services and use of facilities 2 b		
c Recoveries of prior year grants 2 c		
d Other (Describe in Part XIII)		
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1	3	
4 Amounts included on Form 990 Part VIII, line 12, but not on line 1		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII) 4b		
c Add lines 4a and 4b	4c	
	5	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses p	er Return	
1 Total expenses and losses per audited financial statements		
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		
a Donated services and use of facilities		
b Prior year adjustments 2 b		
c Other losses 2 c		
d Other (Describe in Part XIII)		
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1	3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII)		
c Add lines 4a and 4b	4 c	
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	
Part XIII Supplemental Information		<u>.</u>
Complete this part to provide the descriptions required for Part II. lines 3, 5, and 9, Part III, lines 1a and 4, Part I line 4. Part X. line 2, Part XI, lines 2d and 4b, and Part XII, lines, 2d and 4b. Also complete this part to provide at		
PAA	Schedule D (Form	2000 2012

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

OMB No 1545 0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Name of the organization Employer identification number 23-7143666 ANCIENT FREE & ACCEPTED MASONS OF TEXAS Pt V, Line 3b NOT REQUIRED TO FILE FORM 990-T Pt VI, Line 7b DOES NOT APPLY Pt V, Line 14b DOES NOT APPLY Pt VI, Line 8b THE GOVERNING BODY DOCUMENTS MEETINGS HELD. Pt_VI, Line 19 __AVAILABLE UPON REQUEST_TO THE PUBLIC Pt_VI, Line_11b__AVAILABLE_TO_THE_STATE_OF_TEXAS_UPON_REQUEST_ Pt XII, Line 3b NO FEDERAL AWARDS GRANTED. NO AUDIT REQUIRED LINE 1, PART I _ _ "TO ADMIT, MAKE AND PASS FREEMASONS ACCORDING TO THE CONSTITUTION AND LAWS, AND EDICTS OF THE GRAND LODGE. TO ADVANCE THE MORAL AND SOCIAL INTERESTS OF ITS MEMBERSHIP; TO FOSTER GOOD CITIZENSHIP, HONEST INDUSTRY AND UPRIGHT LIVING; TO CULTIVATE THE EXERCISE OF CHARITY IN ITS BEST AND BROADEST SENSE; TO ASSIST THE WIDOWS AND ORPHANS OF ITS DECEASED MEMBERS; TO STIMULATE FRIENDSHIP, HARMONY AND BROTHERLY LOVE; AND GENERALLY TO PROMOTE, INITS OWN WAY, THE HAPPINESS AND MANKIND--IT IS A FRATERNITY GOOD MEN, LINKED TOGETHER BY HONORABLE AND

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12/8/12

Schedule 0 (Form 990 or 990-EZ) 2012	Page 2
Name of the organization	Employer identification number
ANCIENT FREE & ACCEPTED MASONS OF TEXAS	23-7143666
INDISSOLUBLE BONDS, TO ACCOMPLISH THESE NOBLE	
PURPOSES ENCHEWING ALL INTEREST IN FRACTIONAL	
POLITICS AND SECTARIAN RELIGION AND FREE FROM	THE
DICTATION OF BOTH."	
PART III, LINE 1 SEE ABOVE STATEMENT	
	·
·	
	·
~	