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Form 990-EZ

Department of the Treasury
Internal Revenue ServiceShort Form
Return of Organization Exempt From Income TaxUnder 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. 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

OMB No 1545-1150

2012

Open to Public
Inspection

A For the 2012 calendar year, or tax year beginning AUG 1, 2012 and ending JUL 31, 2013

B Check if applicable

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

C Name of organization

ANCIENT ACCEPTED SCOTTISH RITE FREE-MASONRY NMJ NASHUA VALLEY ROSE CROIX

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

196 MAIN STREET #16

Room/suite

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

NASHUA, NH 03060-2999

D Employer identification number

02-0263003

E Telephone number

603-882-4931

F Group Exemption

Number 0259

H Check ☒ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).G Accounting Method: ☒ Cash ☐ Accrual Other (specify) _____

Website: www.ScottishRiteNMJ.org

Tax-exempt status (check only one) — ☐ 501(c)(3) ☒ 501(c)(10) (insert no.) ☐ 4947(a)(1) or ☐ 527K 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

\$ 34,726.

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

☒

1	Contributions, gifts, grants, and similar amounts received	1	
2	Program service revenue including government fees and contracts	2	
3	Membership dues and assessments	3	6,993.
4	Investment income	4	1,327.
5a	Gross amount from sale of assets other than inventory	5a	25,756.
b	Less: cost or other basis and sales expenses	5b	25,405.
c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	351.
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	650.
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	9,321.
10	Grants and similar amounts paid (list in Schedule O)	10	707.
11	Benefits paid to or for members	11	
12	Salaries, other compensation, and employee benefits	12	1,672.
13	Professional fees and other payments to independent contractors	13	210.
14	Occupancy, rent, utilities, and maintenance	14	3,921.
15	Printing, publications, postage, and shipping	15	1,505.
16	Other expenses (describe in Schedule O)	16	3,781.
17	Total expenses. Add lines 10 through 16	17	11,796.
18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	<2,475.>
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	101,870.
20	Other changes in net assets or fund balances (explain in Schedule O)	20	5,561.
21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	104,956.

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

Form 990-EZ (2012)

232171
01-11-13

Part II Balance Sheets (see the instructions for Part II)

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

X

	(A) Beginning of year		(B) End of year
22 Cash, savings, and investments	77,660.	22	80,697.
23 Land and buildings		23	
24 Other assets (describe in Schedule O) SEE SCHEDULE O	24,210.	24	24,259.
25 Total assets	101,870.	25	104,956.
26 Total liabilities (describe in Schedule O)	0.	26	0.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	101,870.	27	104,956.

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

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

What is the organization's primary exempt purpose? DOMESTIC FRATERNAL ORGANIZATION

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title

Expenses (Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts; optional for others.)

28 DOMESTIC FRATERNAL ORGANIZATION	
(Gr Charitable Outreach	Includes foreign grants, check here
29 Assistance to Individuals	
(Gr Support Childrens' Learning Centers	Includes foreign grants, check here
30	
(Grants \$) If this amount includes foreign grants, check here	
31 Other program services (describe in Schedule O)	
(Grants \$) If this amount includes foreign grants, check here	
32 Total program service expenses (add lines 28a through 31a)	

Part IV List of Officers, Directors, Trustees, and Key Employees List each one even if not compensated (see the instructions for Part IV)

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

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
BRIAN J. SMITH				
MOST WISE MASTER	0.50	0.	0.	0.
JEROME T. BECKER				
JR. WARDEN	0.50	0.	0.	0.
ROBERT G. BIANCHI, M.S.A.				
SR. WARDEN	0.50	0.	0.	0.
ROBERT M. PORTER				
ORATOR, SECRETARY	2.50	0.	0.	0.
GEORGE D. VAN DYKE, M.S.A.				
TRUSTEE	0.50	0.	0.	0.
G. RAYMOND PALMER				
HOSPITALER	0.50	0.	0.	0.
ROBERT S. BEAN, III				
MASTER OF CEREMONIES	0.50	0.	0.	0.
JOHN G. SENTER, M.S.A.				
TYLER	0.50	0.	0.	0.
JOSEPH J.H. BEAUMONT				
TREASURER	0.50	300.	0.	0.
DAVID W SMITH				
ACTING TREASURER	0.50	0.	0.	0.
ROLAND N PETERSEN				
ACTING SECRETARY	0.50	0.	0.	0.
EDWARD G WIGFIELD				
CAPTAIN OF THE GUARD	0.50	0.	0.	0.

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 Sch. 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		X
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)		X
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)?		X
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	N/A	
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		X
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		X
37a Enter amount of political expenditures, direct or indirect, as described in the instructions	37a	0.
b Did the organization file Form 1120-POL for this year?	37b	X
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	X
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	N/A
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9	39a	N/A
b Gross receipts, included on line 9, for public use of club facilities	39b	N/A
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 <u>N/A</u> ; section 4912 <u>N/A</u> ; section 4955 <u>N/A</u>		
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	N/A
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		N/A
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization		N/A
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	X
41 List the states with which a copy of this return is filed	NONE	
42a The organization's books are in care of	JOSEPH J.H. BEAUMONT	
Located at	7 TERRELL LANE, HOLLIS, NH	
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)?	42b	X
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.		
c At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c	X
If "Yes," enter the name of the foreign country:		
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	N/A
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	X
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	X
c Did the organization receive any payments for indoor tanning services during the year?	44c	X
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	X
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		X

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 Sch. C, Part II
- 48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
- 49a Did the organization make any transfers to an exempt non-charitable related organization?
- b If "Yes," was the related organization a section 527 organization?
- 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."

	Yes	No
47		
48		
49a		
49b		

(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
N/A				

- 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." N/A

(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

JOSEPH J.H. BEAUMONT, TREASURER

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
DAVID TULLY		09/26/13		P00000857
Firm's name ▶	DAVID E. TULLY & ASSOCIATES, PA		Firm's EIN ▶	02-0330274
Firm's address ▶	20 TRAFALGAR SQUARE SUITE 202 NASHUA, NH 03063		Phone no.	603-886-8885

May the IRS discuss this return with the preparer shown above? See instructions

▶ ☒ Yes ☐ No

Form 990-EZ (2012)

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.

OMB No 1545-0047

2012

Open to Public
Inspection

Name of the organization

ANCIENT ACCEPTED SCOTTISH RITE FREE-
MASONRY NMJ NASHUA VALLEY ROSE CROIX

Employer identification number
02-0263003

FORM 990-EZ, PART I, LINE 4, OTHER INVESTMENT INCOME:

DESCRIPTION OF PROPERTY:

AMOUNT:

INTEREST INCOME - TD WEALTH INVESTMENT ACCOUNT 1,270.

INVESTMENT INCOME - NASHUA MASONIC BODIES TRUST 49.

INTEREST INCOME - CD'S AND SAVINGS 8.

TOTAL INCLUDED ON FORM 990-EZ, LINE 4 1,327.

FORM 990-EZ, PART I, LINE 8, OTHER REVENUE:

DESCRIPTION OF OTHER REVENUE:

AMOUNT:

FEES 650.

FORM 990-EZ, PART I, LINE 10, GRANTS AND ALLOCATIONS:

ACTIVITY CLASSIFICATION:

GRANTEE NAME: SUPREME COUNCIL CHARITIES

GRANTEE ADDRESS: 33 MARRETT ROAD LEXINGTON, MA 02421

PROPERTY DESCRIPTION: CASH

DATE OF GIFT: VARIOUS

AMOUNT GIVEN: 350.

ACTIVITY CLASSIFICATION:

GRANTEE NAME: NEW HAMPSHIRE COUNCIL OF DELIBERATION

GRANTEE ADDRESS: 10 HARVARD STREET CONCORD, NH 03301-2318

PROPERTY DESCRIPTION: CASH

DATE OF GIFT: 08/21/12

AMOUNT GIVEN: 357.

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.

OMB No 1545-0047

2012

Open to Public
Inspection

Name of the organization

ANCIENT ACCEPTED SCOTTISH RITE FREE-
MASONRY NMJ NASHUA VALLEY ROSE CROIX

Employer identification number
02-0263003

TOTAL INCLUDED ON FORM 990-EZ, LINE 10 707.

FORM 990-EZ, PART I, LINE 16, OTHER EXPENSES:

DESCRIPTION OF OTHER EXPENSES:	AMOUNT:
INSURANCE	379.
INVESTMENT MANAGEMENT FEES	690.
MEETINGS AND CONVOCATIONS	2,314.
PAST OFFICER'S AND OTHER JEWELS	281.
MISCELLANEOUS	12.
OFFICE SUPPLIES	105.
TOTAL TO FORM 990-EZ, LINE 16	3,781.

FORM 990-EZ, PART I, LINE 20, CHANGES IN NET ASSETS:

CHANGES IN NET ASSETS OR FUND BALANCES:	AMOUNT:
UNREALIZED INVESTMENT (GAIN)/LOSS	5,561.

FORM 990-EZ, PART II, LINE 24, OTHER ASSETS:

DESCRIPTION	BEG. OF YEAR	END OF YEAR
125 SHS MASONIC BUILDNG ASSOCIATION STOCK	6,250.	6,250.
INVESTMENT - NASHUA MASONIC BODIES TRUST	17,960.	18,009.
TOTAL TO FORM 990-EZ, LINE 24	24,210.	24,259.

FORM 990-EZ, PART V, INFORMATION REGARDING PERSONAL BENEFIT CONTRACTS:

THE ORGANIZATION DID NOT, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY,
OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT.

THE ORGANIZATION, DID NOT, DURING THE YEAR, PAY ANY PREMIUMS, DIRECTLY,

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2012)

232211
01-04-13

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.

OMB No. 1545-0047

2012

Open to Public
Inspection

Name of the organization

ANCIENT ACCEPTED SCOTTISH RITE FREE-
MASONRY NMJ NASHUA VALLEY ROSE CROIX

Employer identification number
02-0263003

OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT.

ST GEORGE CHAPTER ROSE CROIX IMA

02-0263003

GAIN/LOSS SCHEDULE

08/01/2012 THRU 07/31/2013

DATE	SOLD	QTY	DESCRIPTION	GROSS SALES PRICE	TOTAL COST	GAIN (LOSS)
VARIOUS	7,266.860	UNITS	TD ASSET MGMT US GOVT INSTL #6	7,266.86	7,266.86	-
11/23/2012	CAPITAL GAIN DIST		HARTFORD MUT FDS INC MIDCAP FD CL Y FD #229	89.19	-	89.19
12/10/2012	CAPITAL GAIN DIST		ROYCE SPECIAL EQUITY FD #327	39.66	-	39.66
12/11/2012	16.041	SHS	ASTON FDS MONTAG & CALDWELL GROWTH FUND CL I	417.23	380.01	37.22
12/11/2012	10.281	SHS	INVESTCO INTERNATIONAL GROWTH FUND INSTITUTIONAL CLASS	296.20	283.42	12.78
12/11/2012	7.468	SHS	BUFFALO SMALL CAP FD #1444	215.01	179.95	35.06
12/11/2012	6.687	SHS	DODGE & COX STK FD #145	806.90	670.44	136.46
12/11/2012	11.116	SHS	FIDELITY SELECT PORTFOLIOS SELECT GOLD PT FUND #41	413.74	601.92	(188.18)
12/11/2012	7.212	SHS	HARBOR INTERNATIONAL FD-INST CL FUND #11	446.28	436.16	10.12
12/11/2012	7.718	SHS	HARTFORD MUT FDS INC MIDCAP FD CL Y FD #229	168.80	162.22	6.58
12/11/2012	5.860	SHS	PERKINS MID CAP VALUE FUND INSTITUTIONAL CLASS	128.92	125.90	3.02
12/11/2012	3.992	SHS	ROYCE SPECIAL EQUITY FD #327	82.91	78.20	4.71
12/11/2012	30.782	SHS	VIRTUS EMERGING MKTS OPPORTUNITU FUND I CLASS	316.75	295.82	20.93
12/20/2012	CAPITAL GAIN DIST		BUFFALO SMALL CAP FD #1444	12.35	-	12.35
12/20/2012	CAPITAL GAIN DIST		BUFFALO SMALL CAP FD #1444	67.68	-	67.68
12/21/2012	50.342	SHS	ASTON FDS MONTAG & CALDWELL GROWTH FUND CL I	1,321.49	1,192.60	128.89
12/21/2012	12.803	SHS	INVESTCO INTERNATIONAL GROWTH FUND INSTITUTIONAL CLASS	375.25	350.42	24.83
12/21/2012	28.311	SHS	FIDELITY SELECT PORTFOLIOS SELECT GOLD PT FUND #41	1,016.35	1,434.11	(417.76)
12/21/2012	5.208	SHS	HARBOR INTERNATIONAL FD-INST CL FUND #11	324.39	311.28	13.11
12/12/2011	CAPITAL GAIN DIST		VIRTUS EMERGING MKTS OPPORTUNITU FUND I CLASS	3.91	-	3.91
12/24/2012	CAPITAL GAIN DIST		PERKINS MID CAP VALUE FUND INSTITUTIONAL CLASS	43.57	-	43.57
12/31/2012	CAPITAL GAIN DIST		ASTON FDS MONTAG & CALDWELL GROWTH FUND CL I	26.55	-	26.55
12/31/2012	CAPITAL GAIN DIST		ASTON FDS MONTAG & CALDWELL GROWTH FUND CL I	684.84	-	684.84
3/18/2013	2.506	SHS	BUFFALO SMALL CAP FD #1444	77.25	70.44	6.81
3/18/2013	5.054	SHS	DODGE & COX STK FD #145	686.96	506.71	180.25
3/18/2013	0.183	SHS	HARBOR INTERNATIONAL FD-INST CL FUND #11	11.84	10.94	0.90
3/18/2013	4.650	SHS	HARTFORD MUT FDS INC MIDCAP FD CL Y FD #229	115.37	103.51	11.86
3/18/2013	2.278	SHS	PERKINS MID CAP VALUE FUND INSTITUTIONAL CLASS	53.85	49.00	4.85

<u>DATE</u>	<u>QTY</u>	<u>DESCRIPTION</u>	<u>GROSS SALES PRICE</u>	<u>TOTAL COST</u>	<u>GAIN (LOSS)</u>
3/18/2013	2.941 SHS	ROYCE SPECIAL EQUITY FD #327	67.46	58.91	8.55
4/19/2013	8.559 SHS	ASTON FDS MONTAG & CALDWELL GROWTH FUND CL I	223.98	202.76	21.22
4/19/2013	1.130 SHS	BUFFALO SMALL CAP FD #1444	33.59	31.76	1.83
4/19/2013	0.108 SHS	DODGE & COX STK FD #145	14.39	10.83	3.56
4/19/2013	1.223 SHS	HARTFORD MUT FDS INC MIDCAP FD CL Y FD #229	29.40	27.22	2.18
4/19/2013	1.422 SHS	PERKINS MID CAP VALUE FUND INSTITUTIONAL CLASS	32.63	30.25	2.38
4/19/2013	0.680 SHS	ROYCE SPECIAL EQUITY FD #327	14.92	13.13	1.79
4/19/2013	151.053 SHS	VIRTUS EMERGING MKTS OPPORTUNITU FUND I CLASS	1,575.48	1,464.93	110.55
5/23/2013	3.405 SHS	INVESCO INTERNATIONAL GROWTH FUND INSTITUTIONAL CLASS	106.68	94.29	12.39
5/23/2013	3.522 SHS	BUFFALO SMALL CAP FD #1444	115.85	99.00	16.85
5/23/2013	100.771 SHS	FIDELITY SELECT PORTFOLIOS SELECT GOLD PT FUND #41	2,241.15	3,578.81	(1,337.66)
5/23/2013	2.617 SHS	HARBOR INTERNATIONAL FD-INST CL FUND #11	176.09	156.42	19.67
5/23/2013	3.927 SHS	HARTFORD MUT FDS INC MIDCAP FD CL Y FD #229	103.48	87.41	16.07
5/23/2013	2.601 SHS	PERKINS MID CAP VALUE FUND INSTITUTIONAL CLASS	63.77	55.56	8.21
5/23/2013	3.109 SHS	ROYCE SPECIAL EQUITY FD #327	73.88	60.57	13.31
12/10/2012	CAPITAL GAIN DIST	FIDELITY HIGH INCOME FUND #455	26.88	-	26.88
12/11/2012	11.396 SHS	FIDELITY HIGH INCOME FUND #455	106.22	103.58	2.64
12/21/2012	149.639 SHS	FIDELITY HIGH INCOME FUND #455	1,399.12	1,342.73	56.39
3/18/2013	219.866 SHS	FIDELITY HIGH INCOME FUND #455	2,084.33	1,972.55	111.78
12/11/2012	31.826 SHS	PIMCO INVESTMENT GRADE CORP BOND FUND CLASS I	363.44	379.68	(16.24)
12/11/2012	CAPITAL GAIN DIST	PIMCO INVESTMENT GRADE CORP BOND FUND CLASS I	83.65	-	83.65
12/14/2012	CAPITAL GAIN DIST	PIMCO INVESTMENT GRADE CORP BOND FUND CLASS I	75.63	-	75.63
1/31/2013	CAPITAL GAIN DIST	PIMCO INVESTMENT GRADE CORP BOND FUND CLASS I	0.05	-	0.05
1/31/2013	CAPITAL GAIN DIST	PIMCO INVESTMENT GRADE CORP BOND FUND CLASS I	0.20	-	0.20
4/19/2013	30.595 SHS	PIMCO INVESTMENT GRADE CORP BOND FUND CLASS I	344.50	365.00	(20.50)
12/14/2012	CAPITAL GAIN DIST	TD ASSET MGMT SHORT TERM BOND #4	3.77	-	3.77
12/21/2012	18.758 SHS	TD ASSET MGMT SHORT TERM BOND #4	192.46	193.39	(0.93)
4/2/2013	CAPITAL GAIN DIST	VANGUARD INFLTN PROCTD SEC FD #5119	12.14	-	12.14
4/2/2013	CAPITAL GAIN DIST	VANGUARD INFLTN PROCTD SEC FD #5119	0.88	-	0.88
4/19/2013	6.019 SHS	VANGUARD INFLTN PROCTD SEC FD #5119	170.45	169.91	0.54
12/21/2012	4.019 SHS	VANGUARD INTERMEDIATE TERM TREASURY FUND #35	47.22	48.27	(1.05)
12/31/2012	CAPITAL GAIN DIST	VANGUARD INTERMEDIATE TERM TREASURY FUND #35	37.62	-	37.62
12/31/2012	CAPITAL GAIN DIST	VANGUARD INTERMEDIATE TERM TREASURY FUND #35	6.18	-	6.18
4/2/2013	CAPITAL GAIN DIST	VANGUARD INTERMEDIATE TERM TREASURY FUND #35	4.75	-	4.75

<u>DATE</u>	<u>QTY</u>	<u>DESCRIPTION</u>	<u>GROSS</u>	<u>SALES</u>	<u>PRICE</u>	<u>TOTAL</u>	<u>GAIN</u>
<u>SOLD</u>						<u>COST</u>	<u>(LOSS)</u>
4/19/2013	9.140 SHS	VANGUARD INTERMEDIATE TERM TREASURY FUND #35		107.21		109.77	(2.56)
12/11/2012	17.333 SHS	VANGUARD INFLATION PROTECTED SEC 119		262.42		238.59	23.83
12/20/2012	CAPITAL GAIN DIST	VANGUARD INFLATION PROTECTED SEC 119		37.40		-	37.40
12/20/2012	CAPITAL GAIN DIST	VANGUARD INFLATION PROTECTED SEC 119		6.90		-	6.90
TOTALS			25,756.27	25,405.23			351.04