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SCANNED DEC 2 2 2014

990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter Social Security numbers on this form as it may be made public.
▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

2013
Open to Public Inspection

$\overline{\mathbf{A}}$	For the	2013 calendar year, or tax year beginning , and ending			
_	Check if ap		-	D Emplo	yer identification number
\Box	Address ch	ange THE FRYEBURG MASONIC TRUSTEES			
Ħ.	Name chan	Doing Business As		01-	6011486
Ξ		Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Teleph	one number
\sqsubseteq	Initial return	P.O. BOX /45		207	-925-1164
Ш	Terminated	City or town, state or province, country, and ZIP or foreign postal code			
	Amended n	etum Fryeburg ME 04037		G Gross rec	eipts\$ 166,880
\exists	Application	F Name and address of principal officer			subordinates? Yes X No
Ш	тфрисации	ROBERT NEWTON	H(a) is this a gr	oup return for s	
		C/O FRYEBURG MASONIC TRUSTEES	H(b) Are all sul	oordinates inc	luded? Yes No
		PO BOX 745, FRYEBURG ME 04037	if "No.	" attach a list	(see instructions)
1	Tax-exem	opt status 501(c)(3) X 501(c) (10) ◄ (insert no) 4947(a)(1) or 527]		
J	Website.	▶ N/A	H(c) Group exe	emption numb	er >
K	Form of or	ganization Corporation X Trust Association Other ▶ L	Year of formation		M State of legal domicile ME
P	'árt∮l ⊹	Summary			
		riefly describe the organization's mission or most significant activities			
9		PROVIDE LODGE AND MAINTAIN FRATERNAL AND CHARITABLE	PROGRAMS		
a	ļ				
Activities & Governance					
Š	2 C	heck this box ▶ if the organization discontinued its operations or disposed of more than	25% of its net a	ssets	
ن مع		umber of voting members of the governing body (Part VI, line 1a)		3	13
BS	1	umber of independent voting members of the governing body (Part VI, line 1b)		4	13
Ę	1	otal number of individuals employed in calendar year 2013 (Part V, line 2a)		5	0
Ę	1	otal number of volunteers (estimate if necessary)		6	0
⋖		otal unrelated business revenue from Part VIII, column (C), line 12		7a	0
		et unrelated business taxable income from Form 990-T, line 34		7b	0
			Prior Ye		Current Year
Φ	8 C	ontributions and grants (Part VIII, line 1h)		550	1,709
Revenue	9 P	rogram service revenue (Part VIII, line 2g)			3,689
Š	10 In	ovestment income (Part VIII, column (A), lines 3, 4, and 7d)		9,119	159,329
œ	11 0	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		5,301	2,153
	12 T	otal revenue—add -lines 8 through 11 (must equ al Part VIII, column (A), line 12)	9.	4,970	166,880
		Frants and similar amounts paid (Part IX, column (A), lines 1-3)		120	2,468
	14 B	enefits paid to of for members (Part IX, column A), line 4)			0
S	1	alaries, other paragraph comployee benefits (Part IX, column (A), lines 5–10)			0
Expenses	16aP	rofessional fundaising fees (Part IX, column (A)) line 11e)			0
9	ЬТ	otal fundraising expenses (Part IX_column (1)) Ine 25) > 0		a	r, i sucti
Ω	17 C	other expenses (Part(X) (a) (I) (A), (i) (A) (11-24e)		3,881	34,054
	18 T	otal expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		4,001	36,522
	19 R	levenue less expenses Subtract line 18 from line 12		0,969	130,358
Net Assets or	200		Beginning of Cu		End of Year
88et	20 T	otal assets (Part X, line 16)	1,22	7,606	1,357,964
¥.	21 T	otal liabilities (Part X, line 26)	7 00	0	7 257 064
		let assets or fund balances Subtract line 21 from line 20	1,22	7,606	1,357,964
	art II	Signature Block			
U	Inder pen	halties of perjury, Leteclare that I have examined this return, including accompanying schedules and stated, and complete. Description of prepared (after than street) is based on all information of which prepared to the complete of the complete.	tements, and to the	he best of m	ny knowledge and belief, it is
	ue, corre	cd, and complete Despiration of preparar ratine main solution is based on all information of which preparar		rieuge.	1/11/11
۸.		1 / May 1 / May 200		Date	(/17/14
Sig		L'aprature de dent Lobert F. New to		Date	
He	ere				
_		Type or print name and title	I Bara		D . DTIN
D-1	ا ہ:	PrmI/Type preparer's name Preparer's signature	Date	Check	\smile ,
Pai	,	Thomas P. Chandel Tom Chandel		1/14 self-er	nployed P00449870
	eparer	Firm's name		Firm's EIN	
US	e Only	PO Box 7			200 640 5011
_		Firm's address Bridgton, ME 04009-0007		Phone no	207-647-5711
_		S discuss this return with the preparer shown above? (see instructions)		 	X Yes No
Fo:		ork Reduction Act Notice, see the separate instructions.			Form 990 (2013)

		RG MASONIC TRUST		36	Page 2
		ram Service Accomplis		_	
			note to any line in this Part III	<u> </u>	
	cribe the organization's		NAL AND CHARITABLE	PROGRAMS	
1101201	LODOL ILID				
		y significant program services d	luring the year which were not listed o	n the	Yes X No
	990 or 990-EZ? escribe these new service	res on Schedule O			Tes A No
			es in how it conducts, any program		
services?	•	0. 0	, ,, ,		Yes X No
	escribe these changes of				
			reach of its three largest program ser		
		ou1(c)(4) organizations are requ f any, for each program service	ired to report the amount of grants an	id allocations to others,	
the total ex	tpenses, and revenue, i	ally, for each program service	reported		
4a (Code ⁻) (Expenses \$	35,963 includ	ing grants of \$ 2,46	8) (Revenue \$)
PROVIDI	E LODGE AND	MAINTAIN FRATER	NAL AND CHARITABLE	PROGRAMS	
					•
4b (Code) (Expenses \$	includ	ing grants of \$) (Revenue \$)
4c (Code) (Expenses \$	ınclud	ling grants of \$) (Revenue \$)
				•	
		•	•		
	•				
	·	· · · · · · · · · · · · · · · · · · ·		·	
4d Other prog	gram services (Describ	e in Schedule O)			
(Expenses		including grants of \$) (Revenue S	\$)
4e Total prog	ram service expenses I	35,963			

Part IV Checklist of Required Schedules	
1. 1. ditti Vi Olieckiist Oli Nequilea Ocileadies	

			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		x
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	_		
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		X
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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	_		
_	complete Schedule D, Part III	_8		X
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	ا ہ		v
10	debt negotiation services? If "Yes," complete Schedule D, Part IV	9	\dashv	X
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	ŀ	х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,		ingli rainai -	
	VII, VIII, IX, or X as applicable		t ignangi:	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes."	intertal (anscae il s	41.1431.54
_	complete Schedule D, Part VI	11a	x	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11ь		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
9	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
I2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	\rightarrow	X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	40.		v
12	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	-+	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13 14a	-	$\frac{\mathbf{x}}{\mathbf{x}}$
b		144		
-	fundraising, business, investment, and program service activities outside the United States, or aggregate		1	
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	- 1		
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on		ľ	
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on		I	
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		- [
	If "Yes," complete Schedule G, Part III	19		<u> X</u>
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u> </u>
_b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	990	
		Form	· MMI	(2013)

Del the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 19 if Yes,*, complete Schedule I, Parts I and III 20 Did the organization report more than \$5,000 of grants or other assistance to inviduals in the United States on Part IX, column (A), line 21 if Yes,*, complete Schedule I, Parts I and III 21 Did the organization free vision of the second of the organization free vision of the organization security and former officers, directors, trustees, key employees, and highest compensated employees? If Yes,* complete Schedule J 22 X 23 Did the organization have a lax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was sexied after December 31, 2002? If Yes,* answer lines 24b through 24 and complete Schedule J. 23 Did the organization mises any proceeds of lax-exempt bonds beyond a temporary period exception? 24 Did the organization mises any proceeds of lax-exempt bonds beyond a temporary period exception? 25 Did the organization mises any assistance for one organization engage in an excess benefit transaction with a disqualified person or not behild of issuer for bonds outstanding at any time during the year? 26 Did the organization aware that it engaged in an excess benefit transaction engage in an excess benefit transaction with a disqualified person in a prior year, and that the fransaction grid by early organization sprior Forms 990 e90-E27 If Yes,* complete Schedule I, Part II 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial conflictor or emported conflicts, fursion, or key employee, substantial conflictor, fursion, fursi	IIP:	Checklist of Required Schedules (continued)			_
government on Part IX, column (A), line 17 If Yes, complete Schedule I, Parts I and II 21 Did the organization rever me than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 29 If Yes, complete Schedule I, Parts I and III 22 X 23 Did the organization and yes and the parts of the assistance to midviduals in the United States on Part IX, column (A), line 29 If Yes, complete Schedule I, Parts I and III 23 Did the organization and yes and the parts of the year, that was essued after December 31, 2002? If Yes, "answer lines 24b through 24d and complete Schedule K If Yes," go to line 25a 24 Did the organization mivest any proceeds of tax-exempt bonds beyond a temporary period exception? 25 Did the organization mivest any proceeds of tax-exempt bonds beyond a temporary period exception? 26 Did the organization mivest any proceeds of tax-exempt bonds beyond a temporary period exception? 26 Did the organization mivest any proceeds of tax-exempt bonds beyond a temporary period exception? 27 Did the organization mivest any proceeds of tax-exempt bonds beyond a temporary period exception? 28 Did the organization mivest any proceeds of tax-exempt bonds beyond a temporary period exception? 29 Did the organization mivest any proceeds of tax-exempt bonds outstanding at any time during the year? 29 Did the organization and 50 (C)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction might beyear? 29 Did the organization reverse and the graph of the organization engage in any excess that the transaction might beyear? 29 Did the organization provide a grant or other assistance to an officer, director, fustee, key employees, or desqualified person in a prior year, and that the transaction might beyear? 29 Did the organization reverse organization provide a grant or other assistance to an officer, director, fustee, the prophese Schedule I, Part IV 29 Did the organization				Yes	No
22 IX 23 Old the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 27 if "Yes," complete Schedule I, Parts I and III 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule IX If "No." go to line 25a 10 Did the organization maintain an acrow account other than a refunding escrow at any time during the year to defease any trax-exempt bonds year of the service of the service of the year in the variety of the organization maintain an acrow account other than a refunding escrow at any time during the year? 24b Did the organization aware that if a grant of the service of the organization aware that if 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 I., Part II organization aware that if 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 I., Part II organization aware that if engaged in an excess benefit transaction with a disqualified person in a prior disqualified person in a prior prior of disqualified persons? If yes, complete Schedule II, Part IV II organization provide a grant or other assistance to an officer, d	21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
22 X 23 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 27 if "Yes." complete Schedule I, Part II and III 23 Did the organization answer "Yes." to Part IVI, Section A, line 3.4, or 5 about compensation of the organization answer "Yes." to Part IVI, Section A, line 3.4, or 5 about compensation of the organization answer and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes." complete Schedule IX I" No." go to line 25a 24a Did the organization have a tax-exempt bond issee with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was essued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule IX I" No." go to line 25a 25b Did the organization maintain an accrow account other than a refunding escrow at any time during the year? 26c Did the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part II Is 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 I, Part II Is If Yes," complete Schedule I, Part II Is If Yes, "Complete Schedule I, Part II Is If Yes," complete Schedule I, Part II Is If Yes, 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 I, Part II Is If Yes, "Complete Schedule I, Part II Is If Yes, "Complete Schedule I, Part II Is If Yes, "Complete Schedule I, Part II Is If Yes, Is If Yes, Is If Yes, "Complete Schedule I, Part IV Is It Yes, Is If Yes, Is If Yes, "Complete Schedule I, Part IV Is It Yes, Is If Yes, Is If Yes, I		government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
on Part IX, column (A), line 2º If "Yes," complete Schedule I, Parts I and III 2 Dd the organization aware "Yes" to Part VII, Section A, line 3, 4 of 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If I'ves," complete Schedule J 3 Dod the organization have at Law exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002º If "Yes," answer lines 24b through 24d and complete Schedule K II "No.", for to line 25a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 2 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 2 Did the organization misses and no behalf of issuer for bonds outstanding at any time during the year? 2 Did the organization and an accord social controlled than a refunding escrow at any time during the year? 2 Did the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part I I 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 950 or 950-E2? 2 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, exy employees, highest compensated employees, or disqualified person? If so, complete Schedule I, Part II 2 Did the organization proof any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, director, trustee, or key employee? If Yes, complete Schedule I, Part IV 2 Did the organization organization proof any of these persons? If "Yes, complete Schedule I, Part IV 2 Did the organization organization receive more than \$25,000 in	22		<u> </u>		
23 Dd the organization answer "Yes" to Part VII, Section A, tine 3, 4, or 5 about compensation of the organization's current and former officers, directors, fusurese, key employees, and highest compensated employees? If "Yes," complete Schedule J 24 Dd the organization have a tizx-exempt bond issue with an outstanding principal amount of more than \$10,000 as of the least day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a 25a Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tixx-exempt bonds? 26 Did the organization and 501(c)(4) organizations. Did the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a desqualified person during the year? "I" "Yes," complete Schedule L. Part II" 25 Is the organization waver that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reprinted on any of the organizations prior Forms 990 or 990-E27 (If "Yes," complete Schedule L. Part II" and the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction of year year, and that the transaction of year year, and that the transaction of year year, and year year, and year		· · · · · · · · · · · · · · · · · · ·	22		Х
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employees? If "res," complete Schedule J 24 Dd the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the test day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a D tild the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tize-exempt bonds? D tild the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tize-exempt bonds? D tild the organization maintain an escrow account other than a refunding escrow at any time during the year? D to the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? D to the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? D to the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? D to the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? D to the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? D to the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? D to the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? D to the organization act at a transpaged in an excess benefit transaction with a disqualified person in a principal that the transaction has not been reported on any of the organization sport and yarmound no Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, or disqualified persons? If so, complete Schedule L, Part II D to the organization apany to a business transaction with one of the following parties (see Schedule L, Part II) D and the organization organization receive many to a subsenses transaction with one of t		- · · · · · · · · · · · · · · · · · · ·			
\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and compilete Schedule K If "No", go to line 25a Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tize-exempt bonds? did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tize-exempt bonds? did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person onget that the transaction is the organization when a disqualified person onget that the transaction has not been reported on any of the organization's prior Forms 950 or 990-E27 if "Yes," complete Schedule L, Part I 25a Did the organization proved any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, frustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II 27b Did the organization proved a grant or other assistance to an officer, director, frustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 3% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 27b A family member of any of these persons? If "Yes," complete Schedule L, Part II 27c X 28b X Did the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV Did A family member of a current of former officer, director, frustee, or key employee? If "Yes," complete Schedule II. Part IV Did the organization receive more than \$25,000 in non-cash controlutions? If "Yes," complete Schedule II. Part		employees? If "Yes," complete Schedule J	23		X
through 24d and complete Schedule K. If "No," go to line 25a Did the organization meantain an ascrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? Did the organization maintain an ascrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? Did the organization as an an on behalf of issuer for bonds outstanding at any time during the year? 24d	24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
through 24d and complete Schedule K. If "No," go to line 25a Did the organization meantain an ascrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? Did the organization maintain an ascrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? Did the organization as an an on behalf of issuer for bonds outstanding at any time during the year? 24d		\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 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? 24d Did the organization at as an on behalf of issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I bis 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-E27 if "Yes," complete Schedule L, Part I bid the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officars, directors, trustees, key employees, injensor compensated employees, or disqualified persons? If so, complete Schedule L, Part I is provided entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 Million organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) 25a X X A current or former officar, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a X X A current or former officar, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X X A nentry of which a current or former officar, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X X A nentry of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule M 30 X X 30 Did the organization receive more than \$25,000 in non-cash contholutions? If "Yes," complete Schedule M 30 X 31 Did the organization inquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part II 32 Did the organization inquidate, terminate, or dissolve and cease operat			24a		X
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b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a pnor year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 if "Yes," complete Schedule L, Part II 25b 27b			25a		
year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ7 if "Yes," complete Schedule L, Part I	ь	· · · · · · · · · · · · · · · · · · ·			
If "Yes," complete Schedule L, Part I					
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, furstees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part III 26 X 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IIII 27 X 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 18 A family member of a politicable filing thresholds, conditions, and exceptions) 28 A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28 X 29 A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28 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 more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N 29 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part II 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 31 X 33 Did the organization wown 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-22 and 301 7701-3? If "Yes," complete Schedule R, Part II 33 X 34 Was the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part II 33 X 35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part II 34 X 36 Did			25b		
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disqualified persons? If so, complete Schedule L, Part II 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 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					
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	38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
			38	<u> </u>	X

	1990 (2013) THE FRYEBURG MASONIC TRUSTEES 01-601	<u> 1486</u>	<u>.</u>		<u> </u>	age 5
P	Statements Regarding Other IRS Filings and Tax Compliance					
	Check if Schedule O contains a response or note to any line in this Pa	art V_			T.,	
4.	Enter the number reported in Poy 2 of Form 1006. Enter 0, if not applicable	1 40	Ιo	Γ	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1a 1b	0	ᅱ		
b	Did the organization comply with backup withholding rules for reportable payments to vendors and	- 1-2		⊣	l	
С	reportable gaming (gambling) winnings to prize winners?			1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1	I	100	 	
Za	Statements, filed for the calendar year ending with or within the year covered by this return	2a	0		1	,
b	If at least one is reported on line 2a, did the organization file all required federal employment tax re			2b	447-65844	-
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction)			1	45,	<i>#</i> [[]]
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	0110,		3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedu	ıle O		3b	 	<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or oth		ontv	1 32	\vdash	
	over, a financial account in a foreign country (such as a bank account, securities account, or other				l	
	account)?			4a		x
b	If "Yes," enter the name of the foreign country			,	91 (30)	
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Finance	al Acc	counts	ł		. (4' " !"
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter tran		?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and di	d the				
	organization solicit any contributions that were not tax deductible as charitable contributions?			. 6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contrib	utions o	or			
	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).				1313	1, 1, 1, 1, 1
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly f	or good	ls		14,45,78	48446948
	and services provided to the payor?			7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it	was				1
	required to file Form 8282?	1	Ì	7c		ļ
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				الْـــُـنْكُ
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benef			7e		└
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit co			7f	<u> </u>	Ļ—
g	If the organization received a contribution of qualified intellectual property, did the organization file		•	7 <u>g</u>		├ ─
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		file a Form 1098-C?	7h	1981.1.5	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) suppor	_		r'e i		
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsor	ıng				
_	organization, have excess business holdings at any time during the year?			8	A- AVE	
9	Sponsoring organizations maintaining donor advised funds.			<u> </u>	<u> </u>	
a	Did the organization make any taxable distributions under section 4966?			9a	-	├─
40	Did the organization make a distribution to a donor, donor advisor, or related person?			9b	 	
10	Section 501(c)(7) organizations. Enter	100				
a b	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10a 10b		\dashv		
11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter	נוטט		\dashv		
''a	Gross income from members or shareholders	11a	1			
b	Gross income from other sources (Do not net amounts due or paid to other sources	11a		-		
U	against amounts due or received from them.)	116		ľ	1	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of I		1412	12a	 	<u> </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	ĺ	120	 	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	[120		_	į	
a	Is the organization licensed to issue qualified health plans in more than one state?			13a	T	\vdash
4	Note. See the instructions for additional information the organization must report on Schedule O		•	1.50	 	
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	}		'	
С	Enter the amount of reserves on hand	13c	_	7		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		·	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schee	iule O	· ·	14b		
DAA				Fon	m 990	(2013)

Form	990 (2013) THE FRYEBURG MASONIC TRUSTEES 01-6011486			Р	age 6						
Pa	rt VI: Governance, Management, and Disclosure For each "Yes" response to lines 2 throu										
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in	Schedule O.	See ir	nstruc							
	Check if Schedule O contains a response or note to any line in this Part VI		_		_X_						
<u>Sec</u>	tion A. Governing Body and Management		_								
				Yes	No						
1a	Enter the number of voting members of the governing body at the end of the tax year	13	1, 1	800 C							
	If there are material differences in voting rights among members of the governing body, or		ming safe i	i dig							
	If the governing body delegated broad authority to an executive committee or similar										
_	committee, explain in Schedule O										
	b Enter the number of voting members included in line 1a, above, who are independent 1b 13										
2	2 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		X						
3	Did the organization delegate control over management duties customarily performed by or under the direct		ا م		x						
4	supervision of officers, directors, or trustees, or key employees to a management company or other person?		4		X						
4 5	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		5		X						
6	Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders?		6		X						
7a	Did the organization have members of stockholders, or other persons who had the power to elect or appoint		┝								
, a	one or more members of the governing body?		7a		x						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,		<u>'</u> "								
-	stockholders, or persons other than the governing body?		7b		x						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	by the following		te identifi Leight für							
а	The governing body?	.,	8a	X	28082.3.4						
b	Each committee with authority to act on behalf of the governing body?		8b	X							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at										
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		_X_						
Sec	tion B. Policies (This Section B requests information about policies not required by the Inte	rnal Revenu	e Co	de.)							
				Yes	No						
10a	Did the organization have local chapters, branches, or affiliates?		10a		X						
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?		10b								
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing to	he form?	11a		X						
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		12a		X						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to conflicts?	12b		<u> </u>						
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"										
	describe in Schedule O how this was done		12c								
13	Did the organization have a written whistleblower policy?		13		X						
14	Did the organization have a written document retention and destruction policy?		14	.(મેર્મામાં મેર	编字符						
15	Did the process for determining compensation of the following persons include a review and approval by		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1							
_	Independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The propriet of CEO, Executive Director, or top management official.		450		v						
a b	The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization		15a 15b	<u> </u>	X						
b	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		1,		******						
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement		41%	4	High.						
IVa	with a taxable entity during the year?		16a		X						
ь	If "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 take steps to safeguard the										
	organization's exempt status with respect to such arrangements?		16b								
Sec	tion C. Disclosure										
17	List the states with which a copy of this Form 990 is required to be filed ▶ ME	_									
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501	(c)(3)s only)									
	available for public inspection. Indicate how you made these available. Check all that apply										
	Own website Another's website X Upon request Other (explain in Schedule O)										
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest	t policy, and									
	financial statements available to the public during the tax year										
20	State the name, physical address, and telephone number of the person who possesses the books and records of t	ne									
	organization: ► C/O FRYEBURG MASONIC TTES PO BOX 748	- 41 - 3 -									
FI	RYRBITRG MR 0 40377	04037									

	13) THE FRYEBURG MASONIC TR	RUSTEES	01-6011486	Page 7
Part VII	Compensation of Officers, Directors	, Trustees, K	ey Employees, Highest Comp	ensated Employees, an
	Independent Contractors			
	Check if Schedule O contains a respon	se or note to	any line in this Part VII	
Section A.	Officers, Directors, Trustees, Key Employees	s, and Highest C	ompensated Employees	
1a Complete organization's	this table for all persons required to be listed. Report tax year.	rt compensation	for the calendar year ending with or within	n the

- 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

Keck this box if neither the organization nor any related organizations compensated any current officer, director, or trustee

(A) (B) Name and Title Average hours per week (list any hours for		box	c, unle	Pos heck ss pe	rson	than or is both :	an e)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) ROBERT NEWTON										
	0.00									
TREASURER	0.00	X	ļ	X		\sqcup		0	0	0
(2) ERIC BLOOMBERG										
CENTOD WINDDEN	0.00	١,,		٠,						•
SENIOR WARDEN (3) WILLIAM LEE PER	0.00	X		X	_	\vdash		0	0	0
(3) WILLIAM LEE PER	0.00									
SECRETARY	0.00	$ _{\mathbf{x}}$		x				o	0	0
(4) JACK COOMBS	0.00	1				\vdash		•		<u> </u>
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0.00									
Trustee	0.00	x				1 1		o	0	0
(5) DAVID ALDEN CHA	RLES									
	0.00					1 1				
PRESIDENT	0.00	X						0	0	0
(6) JOHN ALDEN CHAR	1									
	0.00	l							_	
Trustee	0.00	X	<u> </u>	<u> </u>	_	$\vdash \vdash$		0	0	. 0
(7) CHARLES GILMAN									li .	
	0.00	١.,								
JUNIOR WARDEN (8) TYE EDWARD ZIME	0.00	X	-	X		\vdash		0	0	0
(0) IIE EDWARD ZIME	0.00									
TRUSTEE	0.00	x						o	0	0
(9) BURTON LEWIS CH		1	\vdash	\vdash	\vdash	H				<u> </u>
(0),00111011	0.00					li				
TRUSTEE	0.00	x				Ιİ		o	0	0
	HAMMOND					П				<u>~</u> _
	0.00									
TRUSTEE	0.00	x				Ш		0	0	0
(11) JAMES EDWARD HI	•									
	0.00									
TRUSTEE	0.00	X	<u> </u>	L	L	$oxedsymbol{oxed}$		0	0	0
DAA										Form 990 (2013)

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received more than \$100,000 of compensation from the organization ▶

DAA

Pa	Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII										
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514		
Program Service Revenue Contributions, Giffis, Grants	1a b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions) All other contributions, grifts, grants, and similar amounts not included above Noncash contributions included in lines 1.	1a 1b 1c 1d 1e 1f \$		1,709						
200	h Total. Add lines 1a–1f					1,709					
se Revenu	2a b	DUES RECEIVED		Bu	isn. Code	3,689			3,689		
ram Servi	c d e										
Prog	f	All other program service reverse. Total. Add lines 2a–2f	enue	L		3 689					
	3	Investment income (including and other similar amounts) Income from investment of tax			▶ .	159,329	n-gree-ergenning	***	159,329		
	5	Royalties (i) Real		(II) Perso	onal						
	6a b c	Gross rents Less rental exps Rental inc. or (loss)									
	d	Net rental income or (loss) Gross amount from			•	AW					
	, ra	sales of assets other than inventory		(II) Othe	er						
		Less cost or other basis & sales exps. Gain or (loss)				1. 1. 1. <u>1. 1.</u> 1. 1. 1. <u>1.</u> 1.					
		Net gain or (loss)			•	COGRECATURES AND MARKET SULL.	AARTIOTSOOGSSOYSONSPINUOSOOS Jour	40086044444444444444			
Other Revenue	ва	Gross income from fundraising ev (not including \$ of contributions reported on line 16 See Part IV, line 18									
ot t		Less' direct expenses	b acia:ac	nto							
	9a	Net income or (loss) from fundamental Gross income from gaming activities See Part IV, line 19		vents			Marie o d'Arion Milliantian Pere e interne				
		Less: direct expenses Net income or (loss) from gar	b ning activit	tios		ะกรุ _{รรร} รรุก กรรมกรรมการกรรมการกรรมการกรรมการกรมการกรมการกรมการกรมการกรมการกรมการกรมการกรมการกรมการกรมการกรมกา	******************************	denser reconstrución de la constitución de la const	วาครายสายสายสายสายสายสายสายสายสายสายสายสายสา		
		Gross sales of inventory, less		uca							
		returns and allowances	a		-						
		Less cost of goods sold Net income or (loss) from sale	u es of inver	ntory	•	<u> </u>	<u> </u>	14	L		
		Miscellaneous Revenue			ısn Code		1	1			
	11a b	HALL RENTAL ADJUST CARRYFORWARD		<u>.</u>		1,200 953			1,200 953		
	C	ADOUGI CHARIFURWARD	CAUL DA	- E							
	d	All other revenue									
	е 12	Total. Add lines 11a–11d Total revenue. See instruction	ns		>	2,153 166,880	- 0	0	165,171		
_	14		,, i, j				L		Form 990 (2013)		

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)

P	årt)	Balance Sheet										
		Check if Schedule O contains a response or note	to any line in this Part X									
				(A)		(B)						
_				Beginning of year	<u> </u>	End of year						
	1	Cash—non-interest bearing		9,285	1	8,546						
	2	Savings and temporary cash investments	12,450	2	12,067							
	3	Pledges and grants receivable, net		3								
	4	Accounts receivable, net										
	5	Loans and other receivables from current and former of	Constitution of the consti	AM								
		trustees, key employees, and highest compensated em	The control of the co	iadalia 1808 in								
		Complete Part II of Schedule L		5								
	6	Loans and other receivables from other disqualified per		Wij								
		4958(f)(1)), persons described in section 4958(c)(3)(B)	and contributing employers a	No control of the con								
		sponsonng organizations of section 501(c)(9) voluntary	employees' beneficiary									
ts		organizations (see instructions) Complete Part II of Sci	nedule L		6							
Assets	7	Notes and loans receivable, net			7							
⋖	8	Inventories for sale or use			8							
	9	Prepaid expenses and deferred charges			9							
	10a	Land, buildings, and equipment cost or										
		other basis Complete Part VI of Schedule D	10a 648,14°									
	b	Less accumulated depreciation	10b 110,55									
	11	Investments—publicly traded secuntres	665,729	11	799,757							
	12	Investments—other securities See Part IV, line 11			12	<u></u>						
	13	Investments—program-related See Part IV, line 11		13								
	14	Intangible assets		14								
	15	Other assets See Part IV, line 11		15								
	16	Total assets. Add lines 1 through 15 (must equal line 3	34)	1,227,606	16	1,357,964						
	17	Accounts payable and accrued expenses		17								
	18	Grants payable			18							
	19	Deferred revenue			19	· · · · · · · · · · · · · · · · · · ·						
	20	Tax-exempt bond liabilities			20							
	21	Escrow or custodial account liability Complete Part IV		Oldh yanadalibh manna athanaidh mannth mann	21	and on the annual contract of the appropriate of						
ies	22	Loans and other payables to current and former officers	·		 							
Ħ		trustees, key employees, highest compensated employe	ees, and	, assertation (170) 100 10	kie.							
Liabilities		disqualified persons Complete Part II of Schedule L			22							
_	l .	Secured mortgages and notes payable to unrelated thir	•		23							
	24	Unsecured notes and loans payable to unrelated third p			24							
	25	Other liabilities (including federal income tax, payables										
		parties, and other liabilities not included on lines 17-24)	Complete Part X									
		of Schedule D			25							
	26	Total liabilities. Add lines 17 through 25	ak hasa NV	O San Charles and and the Control of the	26	O The district of the first of the control of the c						
8		Organizations that follow SFAS 117 (ASC 958), che	CK nere PA and									
anc	27	complete lines 27 through 29, and lines 33 and 34.		1 227 606	الشنا	1 257 064						
38	27	Unrestricted net assets		1,227,606		1,357,964						
Ē	28 29	Temporarily restricted net assets			28 29							
Ē	25	Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 9)	58), check here ▶ and	ı	79							
6		complete lines 30 through 34.	oo, check here 🛌 and									
əts	30	Capital stock or trust principal, or current funds			20	<u> </u>						
88	31	Paid-in or capital surplus, or land, building, or equipmer	at fund		30 31	 						
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or			32	 						
ž	33	Total net assets or fund balances		1,227,606								
	34	Total liabilities and net assets/fund balances		1,227,606	34	1,357,964						
_	1 34	rotal habilities and het assets/fullu balances		1,221,000	1 34	1 1,331,304						

	990 (2013) THE FRYEBURG MASONIC TRUSTEES 01-6011486			Pag	je 12
Pa	Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		6,8	
2	Total expenses (must equal Part IX, column (A), line 25)	2		36,5	
3	Revenue less expenses Subtract line 2 from line 1	_3_	13	30,3	<u> 358</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,22	<u> 27,€</u>	<u> 506</u>
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			
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	1,35	<u>57,9</u>	<u> 364</u>
Pa	irt XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				
				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				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				1111111
	reviewed on a separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both				1868
	Separate basis Consolidated basis Both consolidated and separate basis		11325145 11225145 11225145	1201212 121212	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				ı
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				ı
	the Single Audit Act and OMB Circular A-133?		3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		1 1	I	_
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2013)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

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

► Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Employer identification number

Open to Public Inspection

TI	HE FRYEBURG MASONIC TRUSTEES		01-60		6
₽å	Organizations Maintaining Donor Advised	Funds or Other Similar Fund	s or Accou	unts.	
	Complete if the organization answered "Yes" t	o Form 990, Part IV, line 6.			
		(a) Donor advised funds	(b)	Funds and o	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 donor advisors in writing to	that the assets held in donor advised			
	funds are the organization's property, subject to the organization's e	xclusive legal control?			Yes N
6	Did the organization inform all grantees, donors, and donor advisors	in writing that grant funds can be used	d		
	only for charitable purposes and not for the benefit of the donor or d	onor advisor, or for any other purpose			
	conferring impermissible private benefit?				Yes N
Pä	Conservation Easements.				
	Complete if the organization answered "Yes" t	o Form 990, Part IV, line 7.			
1	Purpose(s) of conservation easements held by the organization (che	eck all that apply)			
	Preservation of land for public use (e.g., recreation or education) Preservation of an historically	y important lar	nd area	
	Protection of natural habitat	Preservation of a certified his	stonc structure)	
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualified con	servation contribution in the form of a	conservation		
	easement on the last day of the tax year		STANCE H	eld at the	End of the Tax Ye
а	Total number of conservation easements		2a		
b	Total acreage restricted by conservation easements		2b		
С	Number of conservation easements on a certified historic structure i	included in (a)	2c		
d	Number of conservation easements included in (c) acquired after 8/	17/06, and not on a			
	historic structure listed in the National Register		2d		
3	Number of conservation easements modified, transferred, released,	extinguished, or terminated by the org	anization duri	ng the	
	tax year ▶				
4	Number of states where property subject to conservation easement	is located ▶			
5	Does the organization have a written policy regarding the periodic m	ionitoring, inspection, handling of			
	violations, and enforcement of the conservation easements it holds?	•			Yes N
6	Staff and volunteer hours devoted to monitoring, inspecting, and enf	forcing conservation easements during	the year		
	>				
7	Amount of expenses incurred in monitoring, inspecting, and enforcing	ng conservation easements during the	year		
	▶ \$				
8	Does each conservation easement reported on line 2(d) above satisfied	fy the requirements of section 170(h)(4)(B)		
	(i) and section 170(h)(4)(B)(u)?	_	_		∐ Yes ∐ N
9	In Part XIII, describe how the organization reports conservation easi	·			
	balance sheet, and include, if applicable, the text of the footnote to t	ne organization's financial statements	tnat describes	tne	
i n.L	organization's accounting for conservation easements		Mhor Cimil	an Aaa	-4-
114	Organizations Maintaining Collections of A Complete if the organization answered "Yes" t	or, Historical Treasures, or C to Form 990, Part IV, line 8.	Juner Simil	ar Ass	ets.
1a	If the organization elected, as permitted under SFAS 116 (ASC 958		t and balance	sheet	
	works of art, historical treasures, or other similar assets held for pub				
	public service, provide, in Part XIII, the text of the footnote to its fina				
ь	If the organization elected, as permitted under SFAS 116 (ASC 958			et	
	works of art, historical treasures, or other similar assets held for pub	• 1			
	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 art, historical treasures	, or other similar assets for financial oa	un, provide the	•	•
-	following amounts required to be reported under SFAS 116 (ASC 95)		, p		
а	Revenues included in Form 990, Part VIII, line 1	,	•	\$	
b	Assets included in Form 990, Part X		•	\$	• •
	Paperwork Reduction Act Notice, see the Instructions for Form	990.	`	Schodu	le D (Form 990) 20

Sche	dule D (Form 990) 2013 THE FRY						011486		Page 2
Pa	rt III : Organizations Maintain	ing Collections	of Art,	<u> Historical</u>	Treasure	<u>s, or Ot</u>	her Sim	<u>ilar Ass</u>	ets (continued)
3	3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):								
а	Public exhibition	d 🗌	Loan or e	exchange pro	grams				
b	Scholarly research	e 🗍	Other		•				
С	Preservation for future generations								
4	Provide a description of the organization's	collections and expla	ain how th	ney further the	e organizatio	n's exemp	t purpose	n Part	
	XIII	·		•	· ·	•			
5	During the year, did the organization solic	it or receive donations	s of art, hi	storical treas	sures, or othe	r sımılar			
	assets to be sold to raise funds rather tha								Yes No
Pa	rt IV: Escrow and Custodial A	Arrangements.							
	Complete if the organizat	ion answered "Ye	es" to F	orm 990, F	Part IV, line	e 9, or r	eported a	an amou	unt on Form
	990, Part X, line 21.								
1a	Is the organization an agent, trustee, custo	odian or other interme	ediary for	contributions	or other ass	ets not			
	ıncluded on Form 990, Part X?								Yes No
b	If "Yes," explain the arrangement in Part X	(III and complete the f	following	table [.]			_		
							_	_	Amount
С	Beginning balance						1.	_	
d	Additions during the year						1.	d	
е	Distributions during the year						1	_	
	Ending balance						_1	<u>f_ </u>	
	Did the organization include an amount or	•							☐ Yes ☐ No
	If "Yes," explain the arrangement in Part X	(III Check here if the	explanati	on has been	provided in F	Part XIII			
Ра	Endowment Funds.	ion oncurred "Va	" to [.	000 F	7-4 N/ Ii-	- 10			
	Complete if the organizat		ĭ				40.77		T (1) 5 b b
4.		(a) Current year	(0)	Pnor year	(c) Two year	rs back	(d) Three y	ears back	(e) Four years back
	Beginning of year balance		 					<u> </u>	
	Contributions		 		<u> </u>				
С	Net investment earnings, gains, and					!			
_	losses Create or coholombus		1						
	Grants or scholarships Other expenditures for facilities and		1			+			
•	programs				j				
f	Administrative expenses							-	
	End of year balance								
_	Provide the estimated percentage of the c	urrent vear end balan	ce (line 1	la column (a)) held as:				<u> </u>
	Board designated or quasi-endowment ▶	%		. 3, ••••• (**	,,				
	Permanent endowment ▶ %								
_	Temporanly restricted endowment ▶	%							
_	The percentages in lines 2a, 2b, and 2c s	hould equal 100%							
3a	Are there endowment funds not in the pos	•	zation tha	at are held an	nd administer	ed for the			
	organization by	•							Yes No
	(i) unrelated organizations								3a(i)
	(ii) related organizations								3a(ii)
b	If "Yes" to 3a(ii), are the related organization	ons listed as required	on Sche	dule R?					3b
4	Describe in Part XIII the intended uses of		dowment	funds					
Pa	rt VI Land, Buildings, and Ed								
	Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.								
	Description of property	(a) Cost or other		(b) Cost or o			ccumulated		(d) Book value
		(investment))	(oth		de	preciation		
	Land				25,000				25,000
	Buildings			5:	31,468		78,5	71	452,897
С	Leasehold improvements								
	Equipment								
	Other		- 4 54 - 1		91,679		31,9	82	<u>59,697</u>
Tota	 Add lines 1a through 1e. (Column (d) mu 	st equal Form 990, Pa	art X, colu	umn (B), line	1U(C))			▶	537,594

Schedule D (F	<u>orm 990) 2013 THE FRYEBURG MASONI</u>	<u>C TRUSTEES</u>	01-6011486	Page 3
Part VII	Investments—Other Securities.	" to Form 000 Post N	/ line 44h Coo Form 000 D	
	Complete if the organization answered "Yes			
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valua Cost or end-of-year mar	
1) Financial d				
-	ld equity interests			
	ac equity interests			
3) Other				
(A)				
(B)				
(C)				
(D)			-	
(E)			 	-
(F)				
(G)				
(H)			вид продистивае прикуру дана принцинциприн	annon de la company de la comp
	n (b) must equal Form 990, Part X, col. (B) line 12)			
Part VIII	Investments—Program Related.	" t- F 000 Dt N	/ line 44 - 0 - 5 000 D	V : 40
-	Complete if the organization answered "Yes		1	
	(a) Description of investment	(b) Book value	(c) Method of valua Cost or end-of-year mar	
(1)			Cook of Gild of Jean Siller	
(2)				
(3)				
(4)		·· †		
(5)			•	
(6)		=	_	
(7)			-	
(8)			_	
(9)			_	
	n (b) must equal Form 990, Part X, col (B) line 13)▶		2827-2017-28887-1-8-32-3887-1-9-3-1-9-1-9-1-9-1-9-1-9-1-9-1-9-1-9-1	
Part IX	Other Assets.		\$278 C. Ca. 1480m 28b. \$1. 5. 32 78 13B2 di lon di idandak 148 158 54 54	19 .95.1 \$4 .0846.4224.757.154.45532.051
197197701474747473741	Complete if the organization answered "Yes	" to Form 990 Part IV	line 11d See Form 990 P	art X line 15
	(a) Description	10 1 01111 000, 1 411 11	,	(b) Book value
(1)				
(2)		······································		
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				., .
	n (b) must equal Form 990, Part X, col (B) line 15)		•	
Part X	Other Liabilities.		· •	
	Complete if the organization answered "Yes	" to Form 990, Part IV	, line 11e or 11f. See Form	990, Part X.
	line 25.	,		
1.	(a) Description of liability	(b) Book value		1
(1) Federal	income taxes			
(2)				
(3)				
(4)			1	
(5)				i
(6)				
(7)			¬	1
(8)			7	1
(9)			7	1
	n (b) must equal Form 990, Part X, col (B) line 25) ▶		7	t
	uncertain tax positions. In Part XIII provide the text of the	footnote to the omanization	in's financial statements that reports	s the

Sche	dule D (Form 990) 2013 THE FRYEBURG MASONIC TRUSTEE	S	01-6011486	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial State	ments \	With Revenue per R	eturn.
	Complete if the organization answered "Yes" to Form 990,	Part IV,	, line 12a.	
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.		[5 ⁻	
а	Net unrealized gains on investments	2a) () () () () () () () () () (in Carlot
b	Donated services and use of facilities	2b	15 a	
С	Recovenes of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d			2e
3	Subtract line 2e from line 1			3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1	1 45 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	() () () () () ()
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	# # # # # # # # # # # # # # # # # # #	
b	Other (Describe in Part XIII)	4b		101.600 112.600 113.600
c	Add lines 4a and 4b			lc
_5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5
Pa	TEXII Reconciliation of Expenses per Audited Financial State	ements	With Expenses per	Return.
	Complete if the organization answered "Yes" to Form 990,	Part IV	, line 12a.	
1	Total expenses and losses per audited financial statements			1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
C	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d		_2	2e
3	Subtract line 2e from line 1	, ,		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		37.465 34.765
b	Other (Describe in Part XIII)	4b		
С	Add lines 4a and 4b			lc
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5
Pa	it XIII Supplemental Information			

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b; Part V, line 4; Part X, line

2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

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 Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

Department of the Treasury Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990 Employer identification number

OMB No 1545-0047

Internal Revenue Service Name of the organization

THE FRYEBURG MASONIC TRUSTEES

01-6011486

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 TREASURER REVIEWS FORM 990 BEFORE SIGNING AND SUBMITTING.

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

Schedule O (Form 990 or 990-EZ) (2013)

Name of the organization

THE FRYEBURG MASONIC TRUSTEES

Page 2

Employer identification number

01-6011486

Depreciation and Amortization

(Including Information on Listed Property)

OMB No 1545-0172

Department of the Treasury Internal Revenue Service

(99)

► See separate instructions.

► Attach to your tax return.

Attachment Sequence No

Name	(s) shown on return		ANT	5 6		Identifyi		
	••	YEBURG MAS	ONIC TRUSTE	KS		101-0	9 O T	1486
	ess or activity to which this form relates							
	ndirect Depreciat			4: 470				
P	ert I Election To Expe					\ I		
	Note: If you have a		ty, complete Part	v before you	ı complete P	aπ I.		E00 000
1	Maximum amount (see instruction	•				ŀ	1_	500,000
2	Total cost of section 179 property	•	•			}	2	2 000 000
3	Threshold cost of section 179 pro		·	tructions)		ŀ	3_	2,000,000
4	Reduction in limitation Subtract li		· ·	. d 6b	L	. }	4_	
5	Dollar limitation for tax year. Subtract I					•	5	<u> </u>
6	(a) Description	1 or property	(B)	Cost (business use	oruy) (c) i	Elected cost		girs it see the equit
								हिंदूर इस्तान क्षेत्र कर स्था है।
_	1td	· f ! 00 '			7			alle la
7	Listed property Enter the amount		-4m! (a) (in-a-	6 4 7			_	
8	Total elected cost of section 179		• •	о апо <i>1</i>		}	<u>8</u> 9	
9	Tentative deduction Enter the sn					ŀ	10	
10	Carryover of disallowed deduction Business income limitation Enter	•			. E (000 incliminat	}	11	
11 12	Section 179 expense deduction		•	•	s 5 (see mstruct	ions)	12	
13	Carryover of disallowed deduction	-		lan iiile i i	13		. 12	
	: Do not use Part II or Part III belo				13			total. the ordered Charatan dina all d
				ciation (Do	not include	listed pro	ner	ty.) (See instructions.
14	Special depreciation allowance for					iiotea pre	<u> Jpci</u>	19.7 (OCC IIISII dOIIOIIS.
14	during the tax year (see instruction		outer than listed prope	rty) placed in S	51 1100	į	14	
15	Property subject to section 168(f)	•				ŀ	15	
16	Other depreciation (including ACI	• •				ŀ	16	17,241
	rt:III MACRS Deprecia		dude listed propert	v.) (See ins	tructions.)			
59 · B · C			Section A					
17	MACRS deductions for assets pla	aced in service in tax	vears beginning befor	e 2013			17	102
18	If you are electing to group any assets place				neck here	▶□↑	, 1881	militaria de missas per demestre.
			vice During 2013 Tax			reciation	Syste	em
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only-see instructions)		(e) Convention	(f) Metho	nd	(g) Depreciation deduction
19a	3-year property	l de color co pa au						
b	5-year property] ;						
С	7-year property	hade-archabe and behand the and the state of the						
d	10-year property	j , .						
е	15-year property	, ,,						
f	20-year property							
	25-year property	,		25 yrs		S/L		
h	Residential rental			27 5 yrs	MM	S/L		
	property			27 5 yrs	ММ	S/L		
i	Nonresidential real			39 yrs	ММ	S/L		
	property	<u> </u>		l	MM	S/L		
	Section C—Ass	ets Placed in Servi	ce During 2013 Tax Y	ear Using the	Alternative De	preciation	า Sys	tem
	Class life					S/L		
<u>b</u>	12-year			12 yrs		S/L		
	40-year	<u> </u>		40 yrs	ММ	S/L		
Pa	art IV Summary (See in							
21	Listed property Enter amount fro		•			ļ	21	
22	Total. Add amounts from line 12,					•		
	and on the appropriate lines of yo				ns .	<i>_</i>	22	17,343
23	For assets shown above and place	_	-	the				
	portion of the basis attributable to	section 263A costs			23			