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Form 990-PF

b Net investment income (if negative, enter -0-).

C Adjusted net income (if negative, enter -0-) . .

BAA For Paperwork Reduction Act Notice, see Instructions.

Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

2013

OMB No 1545-0052

► Do not enter Social Security numbers on this form as it may be made public. Department of the Treasury Internal Revenue Service ► Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. For calendar year 2013, or tax year beginning , 2013, and ending Jul 1 Jun 30 . 2014 Name of foundation Employer Identification number 23-7304386 NORTH DAKOTA MASONIC FOUNDATION Number and street (or P.O. box number if mail is not delivered to street address) Room/suite B Telephone number (see the instructions) 201 14TH AVE. N. (701) 235-8321 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here. **FARGO** 58102 Check all that apply. Initial return Initial Return of a former public charity 1 Foreign organizations, check here Final return Amended return Name change 2 Foreign organizations meeting the 85% test, check Address change X Section 501(c)(3) exempt private foundation Ħ Check type of organization. Other taxable private foundation If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Fair market value of all assets at end of year X Accrual Accounting method: Cash (from Part II, column (c), line 16) Other (specify) F If the foundation is in a 60-month termination (Part I, column (d) must be on cash basis) under section 507(b)(1)(B), check here . . 2,475,283. Rarta Analysis of Revenue and (a) Revenue and (b) Net investment (c) Adjusted net (d) Disbursements Expenses (The total of amounts in expenses per books income income for charitable columns (b), (c), and (d) may not neces-sanly equal the amounts in column (a) purposes (cash basis only) (see instructions)) Contributions, gifts, grants, etc, received (att sch) -8,898. X If the foundn is not req to att Sch B Interest on savings and temporary Dividends and interest from securities . . . 57,673 57,673 5 a Gross rents b Net rental income or (loss) 6 a Net gain/(loss) from sale of assets not on line 10 REVENU b Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) . . 142,143. Net short-term capital gain Income modifications . . . 10 a Gross sales less returns and allowances . . b Less Cost of goods sold . . . c Gross profit/(loss) (att sch) Other income (attach schedule) . . . 175Ø OTHER INCOME 3,750 Total. Add lines 1 through 11. 61,423 13 Compensation of officers, directors, trustees, etc . 14 Other employee salaries and wages 15 Pension plans, employee benefits . . 16 a Legal fees (attach schedule). b Accounting fees (attach sch). L-16b Stmt. 3,000. 1,500. 1,500 c Other prof fees (attach sch) OPERATING Taxes (attach schedule)(see instrs) See Line 18 Stmt 2,517. 2,145. 372 Depreciation (attach sch) and depletion . 7,750 7,750. 20 15,500. 21 Travel, conferences, and meetings . . 4,607. 2,304. 2,303 ≥22 Other expenses (attach schedule) **⊃23** 14,764. See Line 23 Stmt 12,692 2,072 Total operating and administrative expenses. Add lines 13 through 23 24 <u>40,38</u>8. 26,391 13,997 Contributions, gifts, grants paid 125 54,251. 54,251. <u>,</u> 26 94,639 26,391 13,997 54,251 Subtract line 26 from line 12: a Excess of revenue over expenses -24,318

177,175.

TEEA0301 10/18/13

47,426.

Form 990-PF (2013)

$\mathcal{F}^{\mathcal{I}}$	ÚII	Balance Sheets columns should be for end-of-year amounts only	(a) Book Value	(h) Book Value	`
	1 4	(See instructions)		(b) Book Value	(c) Fair Market Value
	1	Cash — non-interest-bearing	3,445.	14,939.	14,939.
	2	Savings and temporary cash investments			
	3	Less: allowance for doubtful accounts	•		
	4	Pledges receivable			
	"	Less. allowance for doubtful accounts			
	5	Grants receivable		· · · · · · · · · · · · · · · · · · ·	
	6	Receivables due from officers, directors, trustees, and other			
	"	disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach sch)			··· -
A		Less: allowance for doubtful accounts			
S	8	Inventories for sale or use			
A S S E T	9	Prepaid expenses and deferred charges			
Ś	10	a Investments – U.S. and state government obligations (attach schedule)			
		b Investments — corporate stock (attach schedule)			
		c Investments — corporate bonds (attach schedule)			
	11	Investments — land, buildings, and equipment: basis · · · · · · · · · . · ▶			
		Less accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule) L-13 Stmt	1,752,394.	1,857,304.	2,454,246.
	14	Land, buildings, and equipment: basis	;		
		Less accumulated depreciation (attach schedule)			
	15 16	Total assets (to be completed by all filers -	0.	6,098.	6,098.
	4-	see the instructions. Also, see page 1, item I)	1,755,839.	1,878,341.	2,475,283.
L	17	Accounts payable and accrued expenses	3,197.	1,772.	
A B	18	Grants payable			
Ĭ	20	Loans from officers, directors, trustees, & other disqualified persons		·	
Ļ	21	Mortgages and other notes payable (attach schedule)			
Ť	22	Other liabilities (describe L-22 Stmt)	+	6 000	
E S	23	Total liabilities (add lines 17 through 22)	3,197.	6,098. 7,870.	
		Foundations that follow SFAS 117, check here > x	3,15,,	7,070.	
		and complete lines 24 through 26 and lines 30 and 31.			
NF	24	Unrestricted	248.	8,841.	
E U T N	25	Temporarily restricted	53,004.	60,080.	
D	26	Permanently restricted	1,699,390.	1,801,550.	
A B S A L T A		Foundations that do not follow SFAS 117, check here . Find and complete lines 27 through 31.			
EL	27	Capital stock, trust principal, or current funds			
SN	28	Paid-in or capital surplus, or land, building, and equipment fund			
O E	29	Retained earnings, accumulated income, endowment, or other funds			
RS	30	Total net assets or fund balances (see instructions)	1,752,642.	1,870,471.	·
	31	Total liabilities and net assets/fund balances (see instructions)	1,755,839.	1,878,341.	
1		Analysis of Changes in Net Assets or Fund Balance	S		
1	Total end-c	net assets or fund balances at beginning of year — Part II, column (a	a), line 30 (must agree wit	h 1	1,752,642.
2	Enter	r amount from Part I, line 27a		2	-24,318.
3	Other	Increases not included in line 2 (Itemize) MARKET VALUE AD	JUSTMENT/INVESTM	ENT INCOME 3	142,147.
4		ines 1, 2, and 3			1,870,471.
		ases not included in line 2 (Itemize)		5	
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Pa	rt II, column (b), line 30	6	1,870,471.

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shares MLC Company) 1 a GAIN/LOSS ON STOCK SALE				ase	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a GAIN/LOSS ON STOCK	SALE)		01/01/13	06/30/14
p ,						
<u> </u>						<u> </u>
d						
е						
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale			(h) Gain or (e) plus (f) mi	
a 919,688.		777	,545.			142,143.
b						
С		- 12.00-1		•		
d						
е						
Complete only for assets showing	ng gain in column (h) and owned by th	e foundation on 12/31/69			(n) Gains (Col	umn (h)
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (over column (j), if any			ain minus column (k an -0-) or Losses (fr), but not less
a						142,143.
b					<u>-</u>	,
C						
d						
е						
2 Capital gain net income or (net o	capital loss). If gain, also if (loss), enter	enter in Part I, line 7 er -0- in Part I, line 7		2		142,143.
3 Net short-term capital gain or (lo	ess) as defined in sections 1222(5) an		ŀ		<u> </u>	142,143.
If gain, also enter in Part I, line 8	d, column (c) (see instructions). If (loss	s), enter -0-		3		
	r Section 4940(e) for Reduce		ent Inco	-		
If section 4940(d)(2) applies, leave this Was the foundation liable for the section If 'Yes,' the foundation does not qualify 1 Enter the appropriate amount in	on 4942 tax on the distributable amou	lete this part.			· · · Tyes	X No
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use asse		(colu	(d) Distribution mn (b) divided b	
2012	44,372.	2,013	,584.			0.022036
2011	27,579.		,613.			0.014081
2010	53,346.		,831.			0.029590
2009	48,579.		,695.			0.031882
2008	59,348.	1,636	,583.			0.036263
2 Total of line 1, column (d)				2		0.133852
3 Average distribution ratio for the number of years the foundation I	5-year base period — divide the total has been in existence if less than 5 ye	on line 2 by 5, or by the	[3		0.026770
4 Enter the net value of noncharita	ble-use assets for 2013 from Part X,	line 5		4		0.
			Ì	5		
			-	-		0.
	me (1% of Part I, line 27b)		Ī	6		1,772.
7 Add lines 5 and 6			• • • • •	7		1,772.
• • •	n Part XII, line 4		_	8		54,251.
If line 8 is equal to or greater that Part VI instructions.	n line 7. check the box in Part VI. line			*** P		
BAA		To, and complete that part u	sing a 1% 	tax i		n 990-PF (2013)

P	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instr	uction	s)		
1	a Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1	·				
	Date of ruling or determination letter (attach copy of letter if necessary – see instrs)					
	b Domestic foundations that meet the section 4940(e) requirements in Part V,	1			1.7	72.
	check here . X and enter 1% of Part I, line 27b				_ / ·	
,	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3	Add lines 1 and 2	3			1,7	72.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	5			1,7	
6	Credits/Payments:					
;	a 2013 estimated lax pmts and 2012 overpayment credited to 2013 6 a					
	b Exempt foreign organizations – tax withheld at source					
	c Tax paid with application for extension of time to file (Form 8868) 6 c 0 .	•				
	d Backup withholding erroneously withheld					
7	Total credits and payments. Add lines 6a through 6d	7				
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8	 			0.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	├		1 7	
10		10			1,/	72.
11	Overpayment, If line 7 is more than the total of lines 5 and 8, enter the amount overpaid					0.
	Enter the amount of line 10 to be Credited to 2014 estimated tax Refunded Refunded	11				
				,	<i>•</i>	
1 :	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it				Yes	No
	participate or intervene in any political campaign?			1 a		_X_
1	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?			1 b		х
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.	1				
	Did the foundation file Form 1120-POL for this year?			1 c	T	X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	• • •				
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$					
•	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$			े स्		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		Х
	If 'Yes,' attach a detailed description of the activities.		1			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes			3		
4:	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4 a	\rightarrow	<u> X</u>
	of Yes,' has it filed a tax return on Form 990-T for this year?					<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			4 b		-,, -
•	If 'Yes,' attach the statement required by General Instruction T.	• • •		3		X
6						
U	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or					
	by language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?			6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If Yes, complete Part II, column (c), and Part XV		L	7	$\frac{\hat{x}}{x}$	
	Enter the states to which the foundation reports or with which it is registered (see instructions)				Λ	
	ND - North Dakota		-			
			-			
E.	of the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation			8 b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If 'Yes,' complete Part')(5) (IV .		9		Х
10	Did any persons become substantial contributors during the tax year? If Yes,' attach a schedule listing their names and addresses			10	Ţ	
BAA		• • •		m 990-l	X PF (2	0131

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Pa	Statements Regarding Activities (continued)				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)		. 11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualifiadvisory privileges? If 'Yes,' attach statement (see instructions)	fied person had	. 12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption Website address ▶ N / A	application?	. 13	Х	
14	The books are in care of MANAGEMENT Tele	phone no. (701)	235	 -832	1
	Located at 201 14TH AVE. N., FARGO, ND ZIP	+4 58102			
15	Website address				
16				Yes	No X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If 'Yes,' enter the na foreign country				
Pa	Statements Regarding Activities for Which Form 4720 May Be Requi	ired			
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.			Yes	No
1 a	During the year did the foundation (either directly or ındırectly):				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	· · Yes X No	1		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?				
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			i	:
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No	;		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes XNo	!		
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	Yes XNo			
b	If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)		. 1b		:
	Organizations relying on a current notice regarding disaster assistance check here	▶ ∐			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2013?		. 1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):				
а	At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2013?	Yes XNo			
	If 'Yes,' list the years 20 , 20 , 20		;		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942((relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a all years listed, answer 'No' and attach statement — see instructions.)	a)(2) to	. 2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years he				
-	► 20 , 20 , 20 .		j		
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes X No		į	
b	If 'Yes,' did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approve by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2013)	ed .	. 3b		
<i>1</i> =	Did the foundation invest during the year any amount in a manner that would jeopardize its		. 30		
4 4	charitable purposes?		. 4a		Х
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013?		. 4b		Х
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Form 990-PF (2013) NORTH DAKOTA MASO	NIC FOUNDATION		23-730	04386 Page
Part VIIIB Statements Regarding Activit		n 4720 May Be Rec		
5 a During the year did the foundation pay or incur a	•			
(1) Carry on propaganda, or otherwise attempt	to influence legislation (se	ection 4945(e))?	···· Yes X	No
(2) Influence the outcome of any specific public on, directly or indirectly, any voter registration	n drive? `			No
(3) Provide a grant to an individual for travel, stu			Yes X	No
(4) Provide a grant to an organization other than in section 509(a)(1), (2), or (3), or section 49	40(d)(2)? (see instruction	ns)	Yes X	No
(5) Provide for any purpose other than religious educational purposes, or for the prevention	, charitable, scientific, lite of cruelty to children or a	erary, or nimals?	Yes X	No
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53.4945 or in a (see instructions)?	current notice regarding	disaster assistance		5 b
Organizations relying on a current notice regardi	ng disaster assistance cl	heck here	▶ _	
c If the answer is "Yes' to question 5a(4), does the tax because it maintained expenditure responsib	ility for the grant?		Yes]No
If 'Yes,' attach the statement required by Regula 6 a Did the foundation, during the year, receive any on a personal benefit contract?	funds, directly or indirectl	ly, to pay premiums	···· Tyes 🔯	
b Did the foundation, during the year, pay premiun				No 6b X
If 'Yes' to 6b, file Form 8870.	no, andday or mandday, d	m a porocina, bomoni con		A A
7 a At any time during the tax year, was the foundati	on a party to a prohibited	I tax shelter transaction?	· · · · · Yes X	No
b If 'Yes,' did the foundation receive any proceeds				
Information About Officers, D	irectors, Trustees,	Foundation Manag	gers, Highly Paid I	imployees,
List all officers, directors, trustees, foundation	n managers and their c	compensation (see inst	ructions).	
	(b) Title, and average	(c)Compensation	(d)Contributions to	(e) Expense account,
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allowances
DAVID BICKEL				
613 AVE C WEST	GRAND MASTER			
BISMARCK ND 58501 CURT MUNDAHL	1.00	0.	0.	0.
	GRAND SECRETARY/TREASURER			
PO BOX 443	1.00	0.	0.	0.
TONY TELKEN				
2642 AUGUSTA DRIVE	DEPT GRAND MASTER			
GRAND FORKS ND 58201	1.00	0.	0.	0.
See Information about Officers, Directors, Trustees, Etc.				
2 Compensation of five highest-paid employee	s (other than those inc	luded on line 1 – see ir	nstructions). If none, e	ter 'NONE.'
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
N/A	-			
		· · · · · · ·		
			<u> </u>	
Total number of other employees paid over \$50,000 .				None
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Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued) 3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'	mployees,
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
N/A (b) Type of service	(c) compensation
N/A	
Total number of others receiving over \$50,000 for professional services	None
PantxA Summary of Direct Charitable Activities	
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1	
	
2	
3	
4	
Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
2	
All other program-related investments. See instructions	

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seę instructions.)	orolgn lound	idiono,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes. a Average monthly fair market value of securities	1a	
b Average of monthly cash balances		
Fair market value of all other assets (see instructions)		
d Total (add lines 1a, b, and c)	1d	
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation)		
2 Acquisition indebtedness applicable to line 1 assets	2	•
3 Subtract line 2 from line 1d	3	0.
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	0.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4		0.
6 Minimum Investment return. Enter 5% of line 5		0.
Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private op and certain foreign organizations check here	erating founda	
1 Minimum investment return from Part X, line 6	1	0.
2 a Tax on investment income for 2013 from Part VI, line 5	,772.	
b Income tax for 2013. (This does not include the tax from Part VI.)		
c Add lines 2a and 2b	2 c	1,772.
3 Distributable amount before adjustments. Subtract line 2c from line 1		0.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	0.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	0.
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: a Expenses, contributions, gifts, etc – total from Part I, column (d), line 26	1a	54,251.
b Program-related investments — total from Part IX-B		34/231.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes		
		
3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)		
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4		54,251.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
Enter 1% of Part I, line 27b (see instructions)		1,772.
6 Adjusted qualifying distributions. Subtract line 5 from line 4		52,479.
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth qualifies for the section 4940(e) reduction of tax in those years.	er the foundation	

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Undistributed Income (see instructions)

•	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI, line 7		,		0.
2 Undistributed income, if any, as of the end of 2013		1.		والمورع في
a Enter amount for 2012 only		· · · · · · · · · · · · · · · · · · ·	97,482.	
b Total for prior years 20 , 20 , 20			<u> </u>	
3 Excess distributions carryover, if any, to 2013		i d		.,
a From 2008 0			, ,	
b From 2009 48,579		N	Ĭ,	•
c From 2010 53, 346		٠.		- <u>-</u>
d From 2011		11		
e From 2012		, 3,4		*
f Total of lines 3a through e	174,091.	* *	• • •	
4 Qualifying distributions for 2013 from Part		÷ ·	, <i>.</i>	•
XII, line 4: \$ 54,251.				. * -
a Applied to 2012, but not more than line 2a				
b Applied to undistributed income of prior years (Election required — see instructions)				٠,
c Treated as distributions out of corpus (Election required – see instructions)		,	,	
d Applied to 2013 distributable amount				
e Remaining amount distributed out of corpus .	• 54,251.		·	** **
5 Excess distributions carryover applied to 2013				
(If an amount appears in column (d), the same amount must be shown in column (a).)		,	- ,	. :
.,,		ŕ		ļ
6 Enter the net total of each column as				,
indicated below:		` .		
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	228,342.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut- ed income for which a notice of deficiency				.]
has been issued, or on which the section				,
4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable			*	,
amount – see instructions	•	0.		
e Undistributed income for 2012 Subtract line 4a from				* 1
line 2a Taxable amount — see instructions		<u>'</u>	97,482.	
f Undistributed income for 2013. Subtract lines		,	_	
4d and 5 from line 1. This amount must be				^
distributed in 2014	•			0.
corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				i
,	·			
8 Excess distributions carryover from 2008 not applied on line 5 or line 7 (see instructions).	. 0.			j
, ,	<u> </u>			
9 Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a	. 228,342.			,
10 Analysis of line 9:		:	,]
a Excess from 2009 48,579.				
b Excess from 2010				1
c Excess from 2011 27, 794.	, M,			-
d Excess from 2012 44, 372.				
e Excess from 2013 54, 251.				

Form 990-PF (2013) NORTH DAKOTA MASONIC FOUNDATION

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

3 Grants and Contributions Paid During the Year or Approved for Future Payment								
Recipient		Foundation status of	Purpose of grant or contribution	Amount				
Name and address (home or business)	substantial contributor	recipient	<u> </u>	<u> </u>				
a Paid during the year								
RAINBOW FOR GIRLS		i	TEENAGE					
201 14TH AVE N.								
FARGO ND 5810		N/A	GUIDANCE	11,500.				
ND COUNCIL OF EDUCATIONAL LEADER	S		CHILD					
121 E ROSSER			SPELLING BEE					
BISMARCK ND 5850	<u> </u>	N\A	EVENT	1,500.				
STUDENT ASSISTANCE PROGRAM			EDUCATIONAL					
VARIOUS ND CITIES								
	2 www	N\A	EVENT	15,962.				
KNOW YOUR STATE CONTEST			CHILD					
VARIOUS			EDUCATION					
FARGO ND 5810	2	N/A	EVENT	7,789.				
VARIOUS ND COMMUNITIES			CHILDHOOD					
1405 3RD ST N			SAFTEY, EDUCATION	40				
FARGO ND 5810	2	N/A	COMMUNITY WELL BEING	13,500.				
BIMARCK HELP CENTER			CHILDHOOD					
1009 BASIN AVE			LANGUAGE DISORDER					
BISMARCK ND 5850	1	N/A	ASSISTANCE	1,500.				
GRAND LODGE AF & AM OF ND			WEB SITE					
201 14TH AVE N		N / P	DEVELOPMENT	0.500				
FARGO ND 5810	4	N/A		2,500.				
			•					
Total		<u> </u>	<u> </u> 3a	54,251.				
b Approved for future payment	T	<u> </u>		34,231.				
		L						
Total			<i>.</i>					

Pant XVI-A Analysis of Income-Producing Activities

er gross amounts unless otherwise indicated.	Unrelate	a basinoos income	LACIDUCE D	section 512, 513, or 514	(e)
Program contine revenue	(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exemp function income (See instructions
Program service revenue.			code		
a	_				
b	$\overline{}$				
c	1				
d					
e				·	 _
<u> </u>					
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash investments \dots					
Dividends and interest from securities			14	57,673.	
Net rental income or (loss) from real estate:			4		
a Debt-financed property					
Not debt-financed property					
Net rental income or (loss) from personal property		• •			
Other investment income					
Gain or (loss) from sales of assets other than inventory			- 		
Net income or (loss) from special events			- 		7
Gross profit or (loss) from sales of inventory					
Other revenue:					
			· · 		
	 				
	+		- -	-	
				52.672	
Subtotal. Add columns (b), (d), and (e)				57,673.	
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)				57,673.	57,67
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)				57,673. 13	57,67
Subtotal. Add columns (b), (d), and (e)	ns.)			13	57,67
Subtotal. Add columns (b), (d), and (e)	ns.) ne Accompl	ishment of Exer	npt Purpos	13	
Subtotal. Add columns (b), (d), and (e)	ns.) ne Accompl	ishment of Exer	mpt Purpos	ses	:he
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation Relationship of Activities to the No. Explain below how each activity for which in	ns.) ne Accompl	ishment of Exer	mpt Purpos	ses	:he
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation. Relationship of Activities to the No. Explain below how each activity for which in	ns.) ne Accompl	ishment of Exer	mpt Purpos	ses	:he
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation. Relationship of Activities to the No. Explain below how each activity for which in	ns.) ne Accompl	ishment of Exer	mpt Purpos	ses	:he
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation. Relationship of Activities to the No. Explain below how each activity for which in	ns.) ne Accompl	ishment of Exer	mpt Purpos	ses	:he
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation. Relationship of Activities to the No. Explain below how each activity for which in	ns.) ne Accompl	ishment of Exer	mpt Purpos	ses	:he
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation. Relationship of Activities to the No. Explain below how each activity for which in	ns.) ne Accompl	ishment of Exer	mpt Purpos	ses	:he
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation. Relationship of Activities to the No. Explain below how each activity for which in	ns.) ne Accompl	ishment of Exer	mpt Purpos	ses	:he
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Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation. Relationship of Activities to the No. Explain below how each activity for which in	ns.) ne Accompl	ishment of Exer	mpt Purpos	ses	:he
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation. Relationship of Activities to the No. Explain below how each activity for which in	ns.) ne Accompl	ishment of Exer	mpt Purpos	ses	:he
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation. Relationship of Activities to the No. Explain below how each activity for which in	ns.) ne Accompl	ishment of Exer	mpt Purpos	ses	:he
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Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation. Relationship of Activities to the No. Explain below how each activity for which in	ns.) ne Accompl	ishment of Exer	mpt Purpos	ses	:he
Subtotal. Add columns (b), (d), and (e)	ns.) ne Accompl	ishment of Exer	mpt Purpos	ses	:he
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation. Relationship of Activities to the No. Explain below how each activity for which in	ns.) ne Accompl	ishment of Exer	mpt Purpos	ses	:he
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation. Relationship of Activities to the No. Explain below how each activity for which in	ns.) ne Accompl	ishment of Exer	mpt Purpos	ses	:he
Subtotal. Add columns (b), (d), and (e)	ns.) ne Accompl	ishment of Exer	mpt Purpos	ses	:he
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation. Relationship of Activities to the No. Explain below how each activity for which in	ns.) ne Accompl	ishment of Exer	mpt Purpos	ses	:he
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation. Relationship of Activities to the No. Explain below how each activity for which in	ns.) ne Accompl	ishment of Exer	mpt Purpos	ses	:he
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Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation. Relationship of Activities to the No. Explain below how each activity for which in	ns.) ne Accompl	ishment of Exer	mpt Purpos	ses	:he

Form 990-PF (2013) NORTH DAKOTA MASONIC FOUNDATION 23-7304386 Part XVIII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did the	organization directly o	r indirectly eng	age in any of	the following with a	ny other organization			Yes	No
describ relating	ed in section 501(c) of to political organizatio	the Code (others)	er than section	n 501(c)(3) organiza	ations) or in section 527,				
•	ers from the reporting for		noncharitable	e exempt organization	n of				
(1) Ca	sh						1 a (1)		Х
(2) Oth	ner assets					<i>.</i>	1 a (2)		X
b Other to	ransactions:								
• •							1 b (1)		Х
(2) Pui	rchases of assets from	a noncharitab	le exempt orç	ganization			1 b (2)		<u>X</u>
, ,	• • •	-					1 b (3)	_X	
					• • • • • • • • • • • • •		1 b (4)		<u> </u>
• •	•						1 b (5)		X
• •		•		-			1 b (6)		<u> </u>
c Sharing	or racilities, equipmen	it, mailing lists,	otner assets	, or paid employees			1 c	X	
the goo	ds, other assets, or se	rvices given by	the reporting	a foundation. If the fo	olumn (b) should always oundation received less joods, other assets, or s	than fair market value i	alue of in		
(a) Line no	(b) Amount involved	(c) Name	of noncharitable	exempt organization	(d) Description of tr	ansfers, transactions, and s	haring arrang	jements	3
1b(3)	15,500.	ND GRAND	LODGE -	MASONS	RENT OF OFFICE	E FACILITY			
				·					
1c	0.	ND GRAND	LODGE -	MASONS	USE OF OFFICE				
					_				
	 	-							
	··								
					····				
		 			<u></u>				—
	=	 			 		 		
·····						<u> </u>	,		
								-	
				-	• • • • • • • • • • • • • • • • • • • •				
							_		
describe	oundation directly or inc ed in section 501(c) of complete the following	the Code (other	d with, or rela er than sectio	ated to, one or more n 501(c)(3)) or in se	tax-exempt organization tax-exempt organization 527?	15	. XYes		No
(a) Name of organization	n	(b)	Type of organization		(c) Description of relati	ionship		
ND GRAND	MASONIC LODG	E	FRATERNA	\L	<u> </u>	OF FOUNDATION	J ARE M	<u>ASON</u>	<u>1S</u>
Under	penalties of penury. I declare t	that I have examine	d this return, incli	iding accompanying sched	ules and statements, and to the	best of my knowledge and be	lief, it is true.		
Sign Here	auton by	preparer (other that	n taxpayer) is ba	11-20-2	ules and statements, and to the nich preparer has any knowledge \$155\$	Se hear.	May the IF this return preparer s (see instru	hown be	elow
Signa	ature of officer or trustee Print/Type preparer's name	9	Proper	Date rer's signature	Title Date		PTIN X	Yes	No
			Frieba	A A -	_1	Checkif	İ	40-	
Paid	Bryce Anders				- 4/1/0 1/09/1!		P00395	437	
Preparer		ryce Ande	-	Associates P	LLC	Firm's EIN 26-14	134404		
Jse Only	_	461 Broad argo	way Ste		ND 58102		1 202-5	דכרו	
BAA		argo_			MD 20105	Tribue (701)	293-7 Form 990		013)
W									

Form 990-PF, Page 1, Part I, Line 18 Line 18 Stmt

Taxes	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb_
PROVISION FOR INCOME TAX	1,772.	1,772.		
REAL ESTATE TAXES	745.	373.	372.	

Total <u>2,517.</u> <u>2,145.</u> <u>372.</u>

Form 990-PF, Page 1, Part I, Line 23 Line 23 Stmt

Other expenses:	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
AGENT & BANK FEES	11,907.	11,907.	0.	
FOUNDATION SITES-MTNCE	1,289.		1,289.	
SUPPLIES	444.	222.	222.	
OFFICE EXPENSE	31.	16.	15.	
MISCELLANEOUS	593.	297.	296.	
PROMOTION	500.	250.	250.	

Total 14,764. 12,692. 2,072.

Form 990-PF, Page 6, Part VIII, Line 1 Information about Officers, Directors, Trustees, Etc.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not pald, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Person . X Business .				
Person Business				
Person				
Person Business				
Person				
Person . X Business .				,

Form 990-PF, Page 6, Part VIII, Line 1 Information about Officers, Directors, Trustees, Etc.

Continued

(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
	Title, and average hours per week devoted to	Title, and Compensation average hours per week devoted to	Title, and Compensation Contributions average hours per week devoted to Compensation (If not paid, enter -0-) to employee benefit plans and deferred

Total

Form 990-PF, Page 1, Part I Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PROFESSIONAL SERVICES PROFESSIONAL SERVICES	ANNUAL FINANCIAL STATMENT TUTLAND SCHOLARSHIP FEE	1,500. 1,500.	750. 750.	750. 750.	

Total 3,000. 1,500. 1,500.

Form 990-PF, Page 2, Part II, Line 13 L-13 Stmt

	End o	End of Year		
Line 13 - Investments - Other:	Book Value	Fair Market Value		
INVESTMENTS - TUTLAND	87,413.	114,658.		
INVESTMENTS - BB	60,080.	81,070.		
INVESTMENTS - MILLER	1,709,811.	2,258,518.		

Total <u>1,857,304.</u> <u>2,454,246.</u>

Form 990-PF, Page 2, Part II, Line 15 Other Assets Stmt

	Beginning	End of Year		
Line 15 - Other Assets:	Year Book Value	Book Value	Fair Market Value	
DUE FROM OPERATING TO BB	0.	6,098.	6,098.	
Total	0	6.098	6.098	

Form 990-PF, Page 2, Part II, Line 22 Other Llab Stmt

Line 22 - Other Liabilities:	Beginning Year Book Value	Ending Year Book Value	
DUE TO BB FROM OPERATING		6,098.	
Total		6,098.	

Client:

GRAND LO	DOGE OF ND		
Account #	31469	Ad#	2068293
Phone:	(701) 235-8321		
Fax:			
Address:	201 14TH AVE N	1	
	FARGO, ND 58	102	
Sales Rep.:			
0135 Forun	n Legal AdTaker		
Phone:	(701) 241-5595		
Fax:	(701) 241-5540		
Email:	legals@forumco	mm.com	
Class.:	9950 NORTH I	DAKOTA LEGALS	<u> </u>
Requested By	<i>r</i> :		
Start Date:	01/19/2015		
End Date:	02/02/2015		
Nb. of Inserts:	18		
Dimensions:	1 col. x 10.00 6.5	5 PT LINES	
Publications:	inforum.com		
	The Forum		
Total Price:	\$20.79		
Paid Amount.	\$0.00	-	
Balance.	\$20.79	· · · · · · · · · · · · · · · · · · ·	
Page 1 of 1			

ND MASONIC FOUNDATION FUND
The 2013-2014 report of the Masonic Foundation is available for inspection at 201 14th Ave North, Fargo, North Dakota, during regular business hours by any citizen, within 80 days of this publication. The principal Manager of this Foundation is James Savaloja PGM, 5452 Highway 2, Leeds, ND 58436
(Jan 19, 26, Feb. 2, 2015) 2068293

Form **8868**

(Rev January 2014)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No 1545-1709

A If you are	e filing for an Automatic 3-Month Extension, comp	loto only D	aut Lond shock this bay		• 5
• •	e filing for an Additional (Not Automatic) 3-Month	_			► 🗓
•	plete Part II unless you have already been granted	•		•	
•	iling (e-file). You can electronically file Form 8868 if				
corporation request an ex Associated V	equired to file Form 990-T), or an additional (not aut xtension of time to file any of the forms listed in Part Vith Certain Personal Benefit Contracts, which must ng of this form, visit www.irs.gov/efile and click on e-	omatic) 3-m I or Part II v be sent to t	ionth extension of time. You can electronical with the exception of Form 8870, Information he IRS in paper format (see instructions). F	ally file Form 8868 to on Return for Transfe	ers
Parki	Automatic 3-Month Extension of Time	. Only sub	omit original (no copies needed)		
	n required to file Form 990-T and requesting an auto			te Part Lonly	
	porations (including 1120-C filers), partnerships, REI				
income tax re		viics, and ti		fying number, see	
	Name of exempt organization or other filer, see instructions	<u> </u>	Litter their 3 identi	Employer identification in	
Type or					• •
print	NORTH DAKOTA MASONIC FOUNDATION	NC		23-7304386	
File by the	Number, street, and room or suite number. If a P O box, see instru			Social security number (SSN)
due date for filing your	201 14TH AVE. N.			\	
return See	City, town or post office, state, and ZIP code. For a foreign address	s, see instructio	ns	····	
ınstructions	FARGO			ND 5810)2
Enter the Re	turn code for the return that this application is for (file	e a separate	e application for each return)		04
Application Is For		Return Code	Application Is For		Return Code
Form 990 or	Form 990-EZ	01	Form 990-T (corporation)		07
Form 990-BL		02	Form 1041-A		08
Form 4720 (ı	ndıvıdual)	03	Form 4720 (other than individual)		09
Form 990-PF	:	04	Form 5227		10
Form 990-T (section 401(a) or 408(a) trust)	05	Form 6069		11
Form 990-T ((trust other than above)	06	Form 8870		12
Telephon If the orga If this is for check this the exten I requesion until graph and the exten I frequesion until graph and the exten I graph and the exten and the e	te No ► (701) _235-8321 anization does not have an office or place of busines or a Group Return, enter the organization's four digits box ► If it is for part of the group, che ision is for. It is an automatic 3-month (6 months for a corporation or a corpora	Fax No ss in the Un t Group Exect this box. required to ization return, and endin	ited States, check this box	this is for the whole	group,
3 a If this a	ange in accounting period pplication is for Forms 990-BL, 990-PF, 990-T, 4720				
b If this a	undable credits See instructions	9, enter any	refundable credits and estimated	3 a \$	0.
c Balanc	e due. Subtract line 3b from line 3a. Include your pa (Electronic Federal Tax Payment System). See ins	ayment with	this form, if required, by using	3 c \$	0.
Caution. If yo payment instr	ou are going to make an electronic funds withdrawa	l (direct deb	it) with this Form 8868, see Form 8453-EC	and Form 8879-EO	