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

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-1150

2014**Open to Public Inspection**Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

A For the 2014 calendar year, or tax year beginning Jan. 1, 2014, and ending Dec. 31, 2014

B Check if applicable:
☐ Address change
☐ Name change
☒ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization
DeQuincy Masonic Lodge #279
 Number and street (or P.O. box, if mail is not delivered to street address) Room/suite
P.O. BOX 382
 City or town, state or province, country, and ZIP or foreign postal code
DeQuincy, La. 70633-0382

D Employer identification number
23-7573689

E Telephone number

F Group Exemption Number ▶

G Accounting Method: ☒ Cash ☐ Accrual ☐ Other (specify) ▶

H Check ☐ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

I Website: ▶

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

K Form of organization: ☐ Corporation ☐ Trust ☒ Association ☐ Other

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$ **30325.87**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)Check if the organization used Schedule O to respond to any question in this Part I ☐

Revenue		Expenses		Net Assets	
1	Contributions, gifts, grants, and similar amounts received	1	218.00	18	Excess or (deficit) for the year (Subtract line 17 from line 9)
2	Program service revenue including government fees and contracts	2	13775.55	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)
3	Membership dues and assessments	3	7720.10	20	Other changes in net assets or fund balances (explain in Schedule O)
4	Investment income	4	9212.22	21	Net assets or fund balances at end of year. Combine lines 18 through 20
5a	Gross amount from sale of assets other than inventory	5a	0.00		
b	Less: cost or other basis and sales expenses	5b	0.00		
c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	0.00		
6	Gaming and fundraising events				
a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	0.00		
b	Gross income from fundraising events (not including \$0.00 of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	0.00		
c	Less: direct expenses from gaming and fundraising events	6c	0.00		
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	0.00		
7a	Gross sales of inventory, less returns and allowances	7a	0.00		
b	Less: cost of goods sold	7b	0.00		
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	0.00		
8	Other revenue (describe in Schedule O)	8	0.00		
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	30325.87		
10	Grants and similar amounts paid (list in Schedule O)	10	2625.00		
11	Benefits paid to or for members	11	2558.92		
12	Salaries, other compensation, and employee benefits	12	1455.82		
13	Professional fees and other payments to independent contractors	13	784.00		
14	Occupancy, rent, utilities, and maintenance	14	4721.28		
15	Printing, publications, postage, and shipping	15	556.00		
16	Other expenses (describe in Schedule O)	16	544.47		
17	Total expenses. Add lines 10 through 16	17	13245.49		

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No. 106421

Form **990-EZ** (2014)

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

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

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	15313434	22 170214.72
23	Land and buildings	250000.00	23 250000.00
24	Other assets (describe in Schedule O)	-	24 -
25	Total assets	403134.34	25 420214.72
26	Total liabilities (describe in Schedule O)	-	26 -
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	403134.34	27 420214.72

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

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

What is the organization's primary exempt purpose? charity

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

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

28 Masonry is a fraternity of men promoting peace & harmony, fellowship, brotherly love and charity.

(Grants \$) If this amount includes foreign grants, check here ☐

28a

29

[illegible]

(Grants \$) If this amount includes foreign grants, check here ☐

293

(Grants \$) If this amount includes foreign grants, check here ☐

30a

31 Other program services (describe in Schedule O)

(Grants \$) If this amount includes foreign grants, check here ► ☐

31a

[illegible]

32	13245.49
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Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated—see the instructions for Part IV)

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

[illegible]

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

	Yes	No
33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O		✓
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)		✓
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?		✓
b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O		✓
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III		✓
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		✓
37a Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 0.00		
b Did the organization file Form 1120-POL for this year?		✓
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?		✓
b If "Yes," complete Schedule L, Part II and enter the total amount involved 38b 0.00		
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9 39a 0.00		
b Gross receipts, included on line 9, for public use of club facilities 39b 13775.55		
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶ 0.00		
b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		✓
c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶		
d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization ▶		
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		✓
41 List the states with which a copy of this return is filed ▶ Louisiana		
42a The organization's books are in care of ▶ Ron Fontnot Treasurer Telephone no. ▶ 337-214-5517 Located at ▶ P.O. BOX 1033, DeQuincy LA. 70633 ZIP + 4 ▶ 70633		
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: ▶ See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		✓
c At any time during the calendar year, did the organization maintain an office outside the U.S.? If "Yes," enter the name of the foreign country: ▶		✓
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43		
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		✓
b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		✓
c Did the organization receive any payments for indoor tanning services during the year?		✓
d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		✓
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		✓
b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)		✓

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

	Yes	No
46		☒

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

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

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

47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II

	Yes	No
47		☒

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

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

49a		☒
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b If "Yes," was the related organization a section 527 organization?

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

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
none				

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

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

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
none		

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

none

52 Did the organization complete Schedule A? **Note.** All section 501(c)(3) organizations must attach a completed Schedule A

☐ Yes ☐ No

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

Sign Here ▶ Jerry McCaig Signature of officer Date 4-14-15
 ▶ Jerry McCaig Finance committee Chairman 337-786-7287 / 337-207-2791 C
 ▶ Type or print name and title

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

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

☒ Yes ☐ No

DEQUINCY MASONIC Lodge #279 2014 Audit

General Fund Checking Acct (IBERIA BANK) 4500475025

beg Bal 1-1-14 (Verified by Audit & Bank Statements)	\$ 3004.68
RECIPTS & TRANSFERS IN 2014	<u>37517.10</u>
TOTAL MONIES	40521.78
LESS EXPENDITURES IN 2014	<u>- 38245.49</u>
ENDING Bal 12-31-14 (Verified by Audit & Bank Statements)	\$ 2276.29

GENERAL Fund INCOME in 2014

MEMBERSHIP DUES & DONATIONS	\$ 4394.60
PERPETUAL membership DUES from G.L.	910.50
PETITIONS, DEGREES & BACKGROUND CHECKS	151.00
PASS THE Hat for CHARITY	218.00
Grand Lodge REIMBURSEMENT	484.00
PERPETUAL membership DUES for G.L.	1180.00
REIMBURSEMENT for P.O. WATER LEAK	125.00
P.O. RENT CHECK	1054.00
MONIES TRANSFERED from Savings Acct.	<u>29000.00</u>
	\$ 37517.10

UTILITY Cost Comparison

	2013	2014
ELECTRICITY	\$ 1809.10	\$ 1268.90
GAS	477.21	464.87
WATER	<u>190.33</u>	<u>166.39</u>
	\$ 2476.64	\$ 1900.67
	\$ 575.97	DECREASE

Lodge Expenditures in 2014

UTILITIES	\$ 1900.67
INSURANCE	1600.00
PER CAPITA TAX TO G.L.	2558.92
G.L. Supplies	36.30
Lodge CLEANING & MAINTENANCE	784.00
INSTALLATION	156.40
HONESTY & INTEGRITY BANQUET	225.27
HONOR EASTERN STAR	162.80
REGULAR MEETING MEALS	494.46
SECRETARY, Supplies, Postage & Bank Ground checks	556.00
Lodge Scholarship	500.00
SHRINE CIRCUS Ad	300.00
TAXES PAID	1059.31
10 th DISTRICT DUES	25.00
OFFICERS TO G.L.	81.36
PERPETUAL MEMBERSHIPS TO G.L.	880.00
P.O. LEASORS ASSOC. DUES	100.00
DUES REIMBURSEMENT (BILL DOWERS 50YR)	89.00
DONATIONS TO CHARITY	1736.00
Pass THE HAT & MATCH DONALD Buxton	\$ 436.00
RR. OLD TIMERS DINNER	100.00
MERRYVILLE Lodge (NEW ROOF)	500.00
MEDICAL EXPENSES (DON GORE)	250.00
M.C. VALENTINE BANQUET	100.00
RAINBOW GIRLS	250.00
FUNERAL EXP. (RUSTY SMITH)	100.00
MONIES TRANSFERRED TO EDWARD JONES	25,000.00
	<u>\$ 38,245.49</u>

Lodge Savings Act # 8900329703 (IBERIA BANK)

.. Beg Bal. 1-1-14 (Verified by Audit & BANK STATEMENTS)	\$ 20204.04
.. INCOME from P.O. RENT	11594.00
.. REIMBURSEMENT for LODGE TAXES	1002.55
.. INTEREST INCOME	7.17
.. TOTAL MONIES	\$ 32807.76
WITHDRAWALS IN 2014	
.. TRANSFERRED To Lodge GEN. Fund	- 29000.00
.. Ending Bal. 12-31-14 (Verified by Audit & BANK STATEMENTS)	\$ 3807.76

Lodge Edward JONES Act # 801-09195-1-5

.. Beg. Bal 1-1-14	\$ 129,925.62
.. INT, Dividends & Capital GAINS	9205.05
.. MONIES TRANSFERRED from GEN Fund	25000.00
.. Ending Bal. 12-31-14	\$ 164,130.67

2014 CONSOLIDATED 1099 STATEMENT

Recipient's Name:
DEQUINCY MASONIC LODGE

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(Includes 1099-INT, 1099-DIV, 1099-B.)

Figures are Final

Information as of February 12, 2015

Edward Jones Account Number:
801-09195-1-5

Payer's Identification Number:
43-1591643

Recipient's Identification Number:
23-7573689

This is important tax information and is being furnished to the Internal Revenue Service (except as indicated). If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1099-INT Interest Income - 2014 Statement for recipient

(Copy B)
(OMB NO. 1545-0112)

Box 1	Interest Income	0.76
Box 2	Early Withdrawal Penalty	0.00
Box 3	Interest on U.S. Savings Bonds and Treasury Obligations	0.00
Box 4	Federal Income Tax Withheld	0.00
Box 5	Investment Expenses	0.00
Box 6	Foreign Tax Paid	0.00
Box 7	Foreign country or U.S. possession	0.00
Box 8	Tax-Exempt Interest	0.00
Box 9	Specified Private Activity Bond Interest	0.00
Box 10	Market Discount	0.00
Box 11	Bond Premium	0.00
Box 12	Tax-Exempt Bond CUSIP no.	

1099-DIV Dividends and Distributions - 2014 Statement for recipient

(Copy B) (OMB NO. 1545-0110)

Box 1a	Total Ordinary Dividends	4,166.80
Box 1b	Qualified Dividends	3,667.76
Box 2a	Total Capital Gain Distributions	6,441.74
Box 2b	Unrecap. Sec. 1250 Gain	0.00
Box 2c	Section 1202 Gain	0.00
Box 2d	Collectibles (28%) Gain	0.00
Box 3	Nondividend Distributions	0.00
Box 4	Federal Income Tax Withheld	0.00
Box 5	Investment Expenses	0.00
Box 6	Foreign Tax Paid	41.02
Box 7	Foreign Country or U.S. Possession	Various
Box 8	Cash Liquidation Distributions	0.00
Box 9	Noncash Liquidation Distributions	0.00
Box 10	Exempt-Interest Dividends	0.00
Box 11	Specified Private Activity Bond Interest Dividends	0.00

2014 CONSOLIDATED 1099 STATEMENT

Recipient's Name:
DEQUINCY MASONIC LODGE

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Figures are Final

Information as of February 12, 2015

Edward Jones Account Number:
601-09195-1-5

Payer's Identification Number:
43-1591649

This is important tax information and is being furnished to the Internal Revenue Service (except as indicated). If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1099-B Proceeds From Broker and Barter Exchange Transactions - 2014 - Statement for Recipient

(Copy B) (OMB NO. 1545-0715)

Short-Term Transactions for Which Basis is Reported to the IRS; Report on Form 8949, Part I, with Box A checked.

Description of Property (Box 1a) / CUSIP / Symbol										Short Term (Box 2) Covered (Box 3)	
Activity Type	Quantity Sold (Box 1e)	Date Acquired (Box 1b)	Date Sold or Disposed (Box 1c)	Proceeds (Box 1d) Gross Proceeds Reported to the IRS (Box 6) (X)	Cost or Other Basis (Box 1e)	Code, If Any (Box 1f)	Adjustments (Box 1g)	Gain/Loss	Federal Income Tax Withheld (Box 4)	Check if Loss Not Allowed Based on Amount in Box 1d (Box 7)	
FRANKLIN US GOVERNMENT SECS C / 353496862 / FRUGX											
Sale	3659.38600	Various	02/07/2014	23,742.34	23,980.72		0.00	-238.38	0.00	☐	
LORD ABBETT SHORT DUR INC FD C / 543916704 / LDLAX											
Sale	5179.24500	Various	02/07/2014	23,892.03	23,857.56		0.00	-165.53	0.00	☐	
Totals				47,434.37	47,838.28		0.00	-403.91	0.00		

2014 CONSOLIDATED 1099 STATEMENT

Recipient's Name:
DEQUINCY MASONIC LODGE

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Figures are Final

Information as of February 12, 2015

Edward Jones Account Number:
801-09195-1-5

Payer's Identification Number:
43-1591843

This is important tax information and is being furnished to the Internal Revenue Service (except as indicated). If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1099-B Proceeds From Broker and Barter Exchange Transactions - 2014 - Statement for Recipient (Copy B) (OMB NO. 1545-0715)

Long-Term Transactions for Which Basis is Reported to the IRS: Report on Form 8949, Part II, with Box D checked.

Long Term (Box 2) Covered (Box 3)										
Description of Property (Box 1a) / CUSIP / Symbol										
Activity Type	Quantity Sold (Box 1a)	Date Acquired (Box 1b)	Date Sold or Disposed (Box 1c)	Proceeds (Box 1d) Gross Proceeds Reported to the IRS (Box 6) (X)	Cost or Other Basis (Box 1e)	Code, if Any (Box 1f)	Adjustments (Box 1g)	Gain/Loss	Federal Income Tax Withheld (Box 4)	Check if Loss Not Allowed Based on Amount in Box 1d (Box 7)
FRANKLIN US GOVERNMENT SECS C / 353496862 / FRUGX										
Sale	396.15500	Various	02/07/2014	2,573.31	2,596.07		0.00	-25.76	0.00	☐
LORD ABBETT SHOR DUR INC FDC / 543916704 / LDLAX										
Sale	625.47700	Various	02/07/2014	2,861.21	2,881.18		0.00	-19.97	0.00	☐
Totals				5,431.52	5,477.25		0.00	-45.73	0.00	

2014 CONSOLIDATED 1099 STATEMENT

Recipient's Name:
DEQUINCY MASONIC LODGE

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Figures are Final

Information as of February 12, 2015

Edward Jones Account Number:
801-09-95-1-5

Payer's Identification Number:
43-1591643

This is important tax information and is being furnished to the Internal Revenue Service (except as indicated). If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1099-B Proceeds From Broker and Barter Exchange Transactions - 2014 - Statement for Recipient (Copy B) (OMB NO. 1545-0715)
Long-Term Transactions for Which Basis is not Reported to the IRS; Report on Form 8949, Part II, with Box E checked.

Long Term (Box 2) Noncovered (Box 5)										
Description of Property (Box 1a) / CUSIP / Symbol										
Activity Type	Quantity Sold (Box 1a)	Date Acquired (Box 1b)	Date Sold or Disposed (Box 1c)	Proceeds (Box 1d) Gross Proceeds Reported to the IRS (Box 6) (X)	Cost or Other Basis (Box 1e)	Code, If Any (Box 1f)	Adjustments (Box 1g)	Gain/Loss	Federal Income Tax Withheld (Box 4)	Check if Loss Not Allowed Based on Amount in Box 1d (Box 7)
FRANKLIN US GOVERNMENT SECS C / 353495862 / FRUGX										
Sale	6,087.77700	Various	02/07/2014	38,497.85	40,870.69		0.00	-1,372.84	0.00	☐
LORD ABBETT SHORT DUR INC FDC / 543916704 / LDLAX										
Sale	8,470.99600	Various	02/07/2014	38,749.89	39,346.74		0.00	-596.85	0.00	☐
Totals				78,247.74	80,217.43		0.00	-1,969.69	0.00	

2014 CONSOLIDATED 1099 STATEMENT

Recipient's Name:
DEQUINCY MASON/C LODGE

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Figures are Final

Information as of February 12, 2015

Edward Jones Account Number:
801-09195-1-5

Payer's Identification Number:
43-1591643

This is important tax information and is being furnished to the Internal Revenue Service (except as indicated). If you are required to file a return, a negligence penalty or other sanction may be imposed on you. If this income is taxable and the IRS determines that it has not been reported.

1099-B Proceeds From Broker and Barter Exchange Transactions - 2014 - Statement for Recipient (Copy B) (OMB NO. 1545-0715)

1099-B Totals	Proceeds	Cost Basis	Market Discount Accretion (1f, Code D)	Wash Sale Loss Disallowed (1f, Code W)	Gain/Loss	Federal Withholding	State Withholding
Total ST Noncovered Totals	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total ST Covered Totals	47,434.37	47,838.28	0.00	0.00	-403.91	0.00	0.00
Total ST Totals	47,434.37	47,838.28	0.00	0.00	-403.91	0.00	0.00
Total LT Noncovered Totals	78,247.74	80,217.43	0.00	0.00	-1,969.69	0.00	0.00
Total LT Covered Totals	5,431.52	5,477.25	0.00	0.00	-45.73	0.00	0.00
Total LT Totals	83,679.26	85,694.68	0.00	0.00	-2,015.42	0.00	0.00
Total Uncovered Proceeds	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Net Totals	131,113.63	133,532.96	0.00	0.00	-2,419.33	0.00	0.00

Important Information Regarding Your Form 1099-B: We will report cost basis for "covered" shares to the IRS. We will not report cost basis for "noncovered" shares to the IRS. The IRS may require you to report the cost basis data and gain/loss items from your Form 1099-B onto Form 1040, Schedule D and Form 8949 (Sales and Other Dispositions of Capital Assets), as indicated on Form 1099-B. See the instructions for Form 1040, Schedule D, and Form 8949 for complete details on how to report this information on your tax return.

The average cost method is used as our default method to calculate cost basis for domestic open-end mutual funds. The FIFO (first-in, first-out) lot relief method is used for all securities unless otherwise indicated at the time of sale. If you have used any other cost basis calculation or lot relief methods for noncovered security transactions, do not rely on these figures. Also, we are required to calculate and report amortization and accretion adjustments for covered taxable bonds using "default" methods specified by IRS regulations. We do not make cost basis adjustments for discounts or premiums on non-covered taxable bonds. We do make adjustments on non-covered tax-exempt bonds purchased at a premium as specified by IRS regulations. The cost basis information for noncovered securities transactions is believed to be reliable, but its accuracy and completeness are not guaranteed. Therefore, this information should not be relied upon for tax preparation without independent verification by your qualified tax advisor. Edward Jones, its employees and financial advisors cannot provide tax or legal advice.

LT indicates a long-term gain/(loss), ST indicates a short-term gain/(loss), and Unknown indicates that we did not have enough information to determine the cost basis and/or holding period

SUMMARY OF INVESTMENT INCOME

Recipient's Name:
DEQUINCY MASONIC LODGE

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Figures are Final

Information as of February 12, 2015

Edward Jones Account Number:
801-09195-1-5

Payer's Identification Number:
43-1591643

This is not a Form 1099. It is a summary of the income you received in your account during 2014. For a complete description of each activity, refer to your account statement for that period. If you have any questions, contact your Edward Jones financial advisor.

2014 Date	Description	CUSIP	Amount in 2014	2014 Date	Description	CUSIP	Amount in 2014
Interest Income - Taxable							
02/21	INTEREST ON CREDIT BALANCE	006990105	0.36	03/24	WASHINGTON MUTUAL INVS FD CLA	939333106	126.04
03/21	INTEREST ON CREDIT BALANCE	006990105	0.40	03/23	WASHINGTON MUTUAL INVS FD CLA	939333106	126.61
Total Taxable Interest on Bonds, CDs, etc. (Box 1 on Form 1099-INT):			0.76	03/22	WASHINGTON MUTUAL INVS FD CLA	939333106	127.16
Dividend Income - Taxable				12/22	WASHINGTON MUTUAL INVS FD CLA	939333106	233.83
03/17	CAPITAL INCOME BUILDER FUND A	140193103	388.68	Total Qualified Dividends (Box 1b on Form 1099-DIV):			
08/16	CAPITAL INCOME BUILDER FUND A	140193103	219.31	03/17	CAPITAL INCOME BUILDER FUND A	140193103	33.62
08/22	CAPITAL INCOME BUILDER FUND A	140193103	221.13	08/16	CAPITAL INCOME BUILDER FUND A	140193103	18.97
12/24	CAPITAL INCOME BUILDER FUND A	140193103	434.97	09/22	CAPITAL INCOME BUILDER FUND A	140193103	19.12
03/17	CAPITAL WORLD GRW & INC FUND A	140543109	112.48	12/24	CAPITAL INCOME BUILDER FUND A	140193103	37.62
06/16	CAPITAL WORLD GRW & INC FUND A	140543109	253.89	02/03	FRANKLIN US GOVERNMENT SECS C	353496862	164.92
09/22	CAPITAL WORLD GRW & INC FUND A	140543109	113.89	02/03	LORD ABBETT SHORT DUR INC FD C	543916704	160.17
12/15	CAPITAL WORLD GRW & INC FUND A	140543109	187.69	02/10	LORD ABBETT SHORT DUR INC FD C	543916704	52.81
03/17	FUNDAMENTAL INVESTORS FUND A	360802102	69.12	03/03	LORD ABBETT SHORT DUR INC FD C	543916704	11.81
06/13	FUNDAMENTAL INVESTORS FUND A	360802102	72.67	Total Nonqualified Dividends:			
09/18	FUNDAMENTAL INVESTORS FUND A	360802102	78.25	Total Ordinary Dividends (Box 1a on Form 1099-DIV):			
12/23	FUNDAMENTAL INVESTORS FUND A	360802102	327.47	03/17	FUNDAMENTAL INVESTORS FUND A	360802102	4,166.80
03/17	INVESTMENT CO OF AMERICA FD A	461308108	104.10	12/23	FUNDAMENTAL INVESTORS FUND A	360802102	256.85
06/16	INVESTMENT CO OF AMERICA FD A	461308108	108.23	12/24	INVESTMENT CO OF AMERICA FD A	461308108	1,824.29
09/22	INVESTMENT CO OF AMERICA FD A	461308108	108.63				
12/24	INVESTMENT CO OF AMERICA FD A	461308108	243.63				

Recipient's Name:
DEQUINCY MASONIC LODGE

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SUMMARY OF INVESTMENT INCOME

Figures are Final

Information as of February 12, 2015

Edward Jones Account Number:
801-09195-1-5

Payer's Identification Number:
43-1591643

2014 Date	Description	CUSIP	Amount In 2014
Dividend Income - Taxable (continued)			
12/22	WASHINGTON MUTUAL INVS FD CL A	939330106	1,593.18
Total Long-Term Capital Gains:			8,441.74
Total Capital Gains (Box 2a on Form 1099-DIV):			8,441.74
03/17	CAPITAL WORLD GRW & INC FUND A	140543109	10.17
08/16	CAPITAL WORLD GRW & INC FUND A	140543109	10.21
09/22	CAPITAL WORLD GRW & INC FUND A	140543109	10.30
12/15	CAPITAL WORLD GRW & INC FUND A	140543109	10.34
Total Foreign Tax Paid (Box 6 on Form 1099-DIV):			41.02

2014 ADDITIONAL TAX INFORMATION

Recipient's Name:
DEQUINCY MASONIC LODGE

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Figures are Final

Information as of February 12, 2015

Edward Jones Account Number:
801-09195-1-5

Payer's Identification Number:
43-1591643

This is not a Form 1099. The supplemental information below may contain foreign source income or state exclusions. You may be able to claim as a deduction on your tax return a portion of your foreign tax paid. If you have state exclusions that report the amount of income derived from federal, municipal and U.S. territory obligations, a portion of this amount may be excludable from state taxable income based upon the state's law. The information includes the state of issuance of the municipal bond or the state from which income is derived. This state is presumed to be your state of residency. Consult your tax professional as to how this information may impact your tax return.

Foreign Source Income Security Name	CUSIP	Source	Qualified Dividends	Foreign Tax Paid	Foreign Source Percent	Income From Foreign Source Obligations
CAPITAL WORLD GRW & INC FUND A	140543109	VARIOUS	\$677.93	\$41.02	73.85906%	\$480.37

Total Foreign Source Income:

\$480.37

Potential State Tax Exclusions from Governmental Obligations

Security Name	CUSIP	Income	Federal Obligations Percent of Income	Exclusion Amount	Federal Home Loan Banks Percent of Income	Exclusion Amount	Federal Farm Credit Banks Percent of Income	Exclusion Amount
CAPITAL INCOME BUILDER FUND A	140193103	\$1,373.42	3.45000%	\$47.38		0.00		0.00
CAPITAL WORLD GRW & INC FUND A	140543109	\$677.93	0.04000%	\$0.27		0.00		0.00
FUNDAMENTAL INVESTORS FUND A	360802102	\$547.51	0.05000%	\$0.27		0.00		0.00
INVESTMENT CO OF AMERICA FD A	461308108	\$564.59	0.05000%	\$0.51		0.00		0.00
WASHINGTON MUTUAL INVS FD CL A	939330106	\$613.64	0.03000%	\$0.18		0.00		0.00

Recipient's Name:
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2014 ADDITIONAL TAX INFORMATION

Figures are Final

Information as of February 12, 2015

Edward Jones Account Number:
801-09195-1-5

Payer's Identification Number:
43-1591643

Potential State Tax Exclusions from Governmental Obligations

LORD ABBETT SHORT DUR INC FD C	543918764	\$224.79	0.42000%	\$0.94	0.00	0.00
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Totals

\$49.55

Total income from exempt governmental obligations owned by you indirectly:

\$49.55

This additional tax information has been supplied to Edward Jones by outside sources. While we cannot assure the accuracy of this information, we believe it to be correct. This information is intended as a general guide and does not constitute tax advice. You should consult your tax professional or state tax authority to determine how this information may apply to your specific situation.

Thank you for doing business with Edward Jones. This is the end of your 2014 tax reporting information. If you have any questions concerning any matter, especially errors or omissions, contact your branch team at 337-527-4774 immediately or the Edward Jones Tax Hotline at 1-800-282-0829.