



Form 990

Department of the Treasury  
Internal Revenue Service

CHANGE OF ACCOUNTING PERIOD

294933421041 8

OMB No. 1545-0047

## 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.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

2017

Open to Public  
Inspection

A For the 2017 calendar year, or tax year beginning DEC 1, 2017 and ending DEC 31, 2017

B Check if applicable	C Name of organization <b>GRAND LODGE OF ANCIENT FREE AND ACCEPTED MASONS OF MARYLAND</b>		D Employer identification number <b>52-0226260</b>
<input type="checkbox"/> Address change	Doing business as		E Telephone number <b>410-527-0600</b>
<input type="checkbox"/> Name change	Number and street (or P.O. box if mail is not delivered to street address)	Room/Suite	G Gross receipts \$ <b>140,529.</b>
<input type="checkbox"/> Initial return	304 INTERNATIONAL CIRCLE		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Final return/terminated	City or town, state or province, country, and ZIP or foreign postal code <b>COCKEYSVILLE, MD 21030</b>		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Amended return	F Name and address of principal officer <b>KENNETH R. TAYLOR</b> <b>SAME AS C ABOVE</b>		If "No," attach a list (see instructions)
<input type="checkbox"/> Application pending	I Tax-exempt status <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) ( 8 ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	J Website: ► <a href="http://WWW.MDMASONS.ORG">WWW.MDMASONS.ORG</a>	K Form of organization. <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ► L Year of formation. <b>1822</b> M State of legal domicile: <b>MD</b>

## Part I Summary

1 Briefly describe the organization's mission or most significant activities	<b>FRATERNAL ORGANIZATION</b>	
2 Check this box ► <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
3 Number of voting members of the governing body (Part VI, line 1a)	3	13
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	11
5 Total number of individuals employed in calendar year 2017 (Part V, line 2a)	5	14
6 Total number of volunteers (estimate if necessary)	6	0
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, line 34	7b	0.
8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
9 Program service revenue (Part VIII, line 2g)	10,586.	0.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	261,350.	15,195.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8d, 9c, 10c, and 11e)	2,449,991.	98,669.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	436,159.	16,432.
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	3,158,086.	130,296.
14 Benefits paid to or for members (Part IX, column (A), line 4)	31,463.	4,874.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
16a Professional fundraising fees (Part IX, column (A), line 11e)	513,953.	100,362.
b Total fundraising expenses (Part IX, column (D), line 25) ► 0.	0.	0.
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,941,002.	259,460.
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	2,486,418.	364,696.
19 Revenue less expenses Subtract line 18 from line 12	671,668.	-234,400.
20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
21 Total liabilities (Part X, line 26)	24,240,765.	23,940,172.
22 Net assets or fund balances Subtract line 21 from line 20	1,350,697.	1,334,097.
	22,890,068.	22,606,075.

## Part II Signature Block

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	► <i>Kenneth R. Taylor</i>	Date <i>11/12/18</i>			
	► <b>KENNETH R. TAYLOR, GRAND SECRETARY</b>				
	Type or print name and title				
Paid	Print/Type preparer's name <b>JAMES E. CRISP</b>	Preparer's signature <i>JAMES E. CRISP</i>	Date <i>11/07/18</i>	Check <input type="checkbox"/> if self-employed	PTIN <b>P00025401</b>
Preparer	Firm's name ► <b>GROSS, MENDELSON &amp; ASSOCIATES, P.A.</b>		Firm's EIN ► <b>52-0982413</b>		
Use Only	Firm's address ► <b>36 SOUTH CHARLES ST., 18TH FLOOR BALTIMORE, MD 21201</b>		Phone no. <b>410-685-5512</b>		

May the IRS discuss this return with the preparer shown above? (see instructions)

732001 11-28-17 LHA For Paperwork Reduction Act Notice, see the separate instructions.

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**Part III Statement of Program Service Accomplishments**Check if Schedule O contains a response or note to any line in this Part III 1 Briefly describe the organization's missionFRATERNAL ORGANIZATION2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code \_\_\_\_\_) (Expenses \$ \_\_\_\_\_) including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_)

MAINTENANCE AND OPERATIONS OF MASONIC TEMPLE, DIRECTION AND  
COORDINATION OF SUBORDINATE LODGE ACTIVITIES, MAINTAIN MEMBERSHIP  
RECORDS AND HOLD MEMBER MEETINGS.

4b (Code \_\_\_\_\_) (Expenses \$ \_\_\_\_\_) including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_)

4c (Code \_\_\_\_\_) (Expenses \$ \_\_\_\_\_) including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_)

4d Other program services (Describe in Schedule O)

(Expenses \$ \_\_\_\_\_) including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_)

4e Total program service expenses ►

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**Part IV Checklist of Required Schedules**

- 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?  
If "Yes," complete Schedule A
- 2 Is the organization required to complete Schedule B, *Schedule of Contributors*?
- 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
- 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
- 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
- 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
- 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
- 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III
- 9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV
- 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
- 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable
  - a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI
  - 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
  - c 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
  - 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
  - e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part 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
- 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII
  - b Was the organization included in consolidated, independent audited financial statements for the tax year?  
If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional
- 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
- 14a Did the organization maintain an office, employees, or agents outside of the United States?
  - b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV
- 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV
- 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
- 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I
- 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II
- 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

	Yes	No
1		X
2		X
3		X
4		
5		X
6		X
7		X
8	X	
9		X
10		X
11a	X	
11b		X
11c		X
11d		X
11e	X	
11f	X	
12a	X	
12b	X	
13		X
14a	X	
14b		X
15		X
16		X
17		X
18		X
19		X

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**Part IV Checklist of Required Schedules (continued)**

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? 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's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No", go to line 25a  
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  
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?  
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?

25a **Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I  
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I

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, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II

27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III

28 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  
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M

30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M

31 Did the organization liquidate, terminate, or dissolve and cease operations?  
If "Yes," complete Schedule N, Part I

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II

33 Did 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 I

34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

36 **Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2

37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  
Note. All Form 990 filers are required to complete Schedule O

	Yes	No
20a		X
20b		
21	X	
22	X	
23	X	
24a		X
24b		
24c		
24d		
25a		
25b		
26		X
27	X	
28a		X
28b		X
28c		X
29		X
30		X
31		X
32		X
33		X
34	X	
35a		X
35b		
36		
37		X
38	X	

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**Part V Statements Regarding Other IRS Filings and Tax Compliance**

Check if Schedule O contains a response or note to any line in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	4
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	14
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)</i>	2b	X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
b	If "Yes," has it filed a Form 990 T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b	
4a	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)?	4a	X
b	If "Yes," enter the name of the foreign country ► <i>See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)</i>	5a	X
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5b	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5c	
c	If "Yes," to line 5a or 5b, did the organization file Form 8886 T?	6a	X
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6b	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	7a	X
7	<b>Organizations that may receive deductible contributions under section 170(c).</b>	7b	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7c	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7d	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7e	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7f	X
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7g	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7h	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	8	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	9a	
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	9b	
9	<b>Sponsoring organizations maintaining donor advised funds.</b>		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	<b>Section 501(c)(7) organizations.</b> Enter.		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	<b>Section 501(c)(12) organizations.</b> Enter		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b	
12a	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
a	Is the organization licensed to issue qualified health plans in more than one state?	13a	
	<i>Note. See the instructions for additional information the organization must report on Schedule O</i>		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
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 Schedule O	14b	

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**Part VI Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

Check if Schedule O contains a response or note to any line in this Part VI

**Section 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 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	13	
1b	Enter the number of voting members included in line 1a, above, who are independent	11	
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?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following.		
a	The governing body?		
b	Each committee with authority to act on behalf of the governing body?		
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		X

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a	X	
b		
10b	X	
11a	X	
12a		X
12b		
12c		
13		X
14	X	
15a	X	
15b		X
16a		X
16b		

**Section C. Disclosure**

17	List the states with which a copy of this Form 990 is required to be filed ►	<u>NONE</u>
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	
	<input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O)	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year	
20	State the name, address, and telephone number of the person who possesses the organization's books and records ►	
	<b>GRAND SECRETARY - 410-527-0600</b>	
	<b>304 INTERNATIONAL CIRCLE, COCKEYSVILLE, MD 21030</b>	

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

Check if Schedule O contains a response or note to any line in this Part VII

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(1) KOSTAS VOURVOULAS <u>GRAND MASTER</u>	4.00	X		X			0.	0.	0.
(2) RICHARD NAEGELE <u>DEP. GR. MASTER</u>	4.00	X		X			0.	0.	0.
(3) KENNETH R. TAYLOR <u>GRAND SECRETARY</u>	40.00	X		X			37,425.	0.	10,966.
(4) RANDALL WATSON <u>GRAND TREASURER</u>	4.00	X		X			12,997.	0.	0.
(5) SAMUEL G. LANE <u>TRUSTEE</u>	4.00	X					0.	0.	0.
(6) T. SCOTT CUSHING SR. <u>TRUSTEE</u>	4.00	X					0.	0.	0.
(7) WALTER F. BURGESS <u>TRUSTEE</u>	4.00	X					0.	0.	0.
(8) PATRICK A. CURTIS <u>TRUSTEE</u>	4.00	X					0.	0.	0.
(9) THOMAS R. FULCHER <u>TRUSTEE</u>	4.00	X					0.	0.	0.
(10) ROBERT CHASE <u>TRUSTEE</u>	4.00	X					0.	0.	0.
(11) TERRY L. ROYCE <u>TRUSTEE</u>	4.00	X					0.	0.	0.
(12) THOMAS A. KELLER <u>TRUSTEE</u>	4.00	X					0.	0.	0.
(13) RICHARD E. MAINLEY, JR. <u>TRUSTEE</u>	4.00	X					0.	0.	0.

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**Part VII** **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)**

**1b Sub-total**

50,422. 0. 10,966.

**c Total from continuation sheets to Part VII, Section A**

0. 0. 0.

**d Total (add lines 1b and 1c)**

50,422. 0. 10,966.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►

0

- 3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
- 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

## Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

the organization. Report compensation for the calendar year ending with or within the organization's tax year.			
	(A) Name and business address	(B) Description of services	(C) Compensation
<b>2</b>	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►		0

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**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
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns <b>b</b> Membership dues <b>c</b> Fundraising events <b>d</b> Related organizations <b>e</b> Government grants (contributions) <b>f</b> All other contributions, gifts, grants, and similar amounts not included above <b>g</b> Noncash contributions included in lines 1a-1f \$ _____ <b>h Total.</b> Add lines 1a-1f ►	<b>1a</b> <b>1b</b> <b>1c</b> <b>1d</b> <b>1e</b> <b>1f</b>			
<b>Program Service Revenue</b>	<b>2 a</b> <b>MEMBERSHIP DUES</b> <b>b</b> <b>c</b> <b>d</b> <b>e</b> <b>f</b> All other program service revenue <b>g Total.</b> Add lines 2a-2f ►	<b>Business Code</b> <b>900099</b>	<b>15,195.</b>	<b>15,195.</b>	
	<b>3</b> Investment income (including dividends, interest, and other similar amounts) ► <b>4</b> Income from investment of tax-exempt bond proceeds ► <b>5</b> Royalties ►		<b>100,606.</b>		<b>100,606.</b>
	<b>6 a</b> Gross rents <b>b</b> Less rental expenses <b>c</b> Rental income or (loss) <b>d</b> Net rental income or (loss) <b>7 a</b> Gross amount from sales of assets other than inventory <b>b</b> Less cost or other basis and sales expenses <b>c</b> Gain or (loss) <b>d</b> Net gain or (loss) <b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 <b>b</b> Less direct expenses <b>c</b> Net income or (loss) from fundraising events <b>9 a</b> Gross income from gaming activities See Part IV, line 19 <b>b</b> Less direct expenses <b>c</b> Net income or (loss) from gaming activities <b>10 a</b> Gross sales of inventory, less returns and allowances <b>b</b> Less cost of goods sold <b>c</b> Net income or (loss) from sales of inventory	<b>(i) Real</b> <b>15,329.</b> <b>(ii) Personal</b> <b>0.</b> <b>15,329.</b>	<b>15,329.</b>	<b>15,329.</b>	
		<b>(i) Securities</b> <b>8,296.</b>			
		<b>(ii) Other</b> <b>10,233.</b>			
		<b>-1,937.</b>	<b>-1,937.</b>	<b>-1,937.</b>	
<b>Other Revenue</b>	<b>11 a</b> <b>OTHER INCOME</b> <b>b</b> <b>SPECIAL EVENTS</b> <b>c</b> <b>d</b> All other revenue <b>e</b> <b>Total.</b> Add lines 11a-11d <b>12</b> <b>Total revenue</b> See instructions	<b>Miscellaneous Revenue</b> <b>Business Code</b> <b>900099</b> <b>900099</b>	<b>688.</b>		<b>688.</b>
			<b>415.</b>		<b>415.</b>
			<b>1,103.</b>		
			<b>130,296.</b>	<b>15,195.</b>	<b>0.</b> <b>115,101.</b>

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**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

Check if Schedule O contains a response or note to any line in this Part IX

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	4,874.			
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	4,202.			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	77,340.			
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	3,763.			
9 Other employee benefits	8,751.			
10 Payroll taxes	6,306.			
11 Fees for services (non-employees)				
a Management				
b Legal	18,568.			
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	375.			
12 Advertising and promotion	105,603.			
13 Office expenses	2,622.			
14 Information technology	2,287.			
15 Royalties				
16 Occupancy	26,754.			
17 Travel	1,089.			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	18,455.			
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	49,372.			
23 Insurance	4,805.			
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <b>REPAIRS &amp; MAINTENANCE</b>	20,378.			
b <b>MISCELLANEOUS</b>	5,762.			
c <b>OFFICER EXPENSES</b>	1,748.			
d <b>SPECIAL EVENTS EXPENSE</b>	1,230.			
e All other expenses	412.			
25 Total functional expenses Add lines 1 through 24e	364,696.			
26 Joint costs Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here ►  if following SOP 99-2 (ASC 958-720)

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**Part X Balance Sheet**

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	123,601.	1	42,295.
	2 Savings and temporary cash investments	389,672.	2	404,209.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	318,779.	4	183,021.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	169,536.	9	49,213.
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	21,221,684.		
	b Less accumulated depreciation	10b 13,062,219.	10c 8,208,837.	8,159,465.
	11 Investments - publicly traded securities	14,994,899.	11	15,066,528.
	12 Investments - other securities See Part IV, line 11		12	
	13 Investments - program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11	35,441.	15	35,441.
	16 Total assets. Add lines 1 through 15 (must equal line 34)	24,240,765.	16	23,940,172.
Liabilities	17 Accounts payable and accrued expenses	339,876.	17	491,436.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	1,010,821.	25	842,661.
	26 Total liabilities. Add lines 17 through 25	1,350,697.	26	1,334,097.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ► <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	22,539,752.	27	22,255,759.
	28 Temporarily restricted net assets	350,316.	28	350,316.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here ► <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	22,890,068.	33	22,606,075.
	34 Total liabilities and net assets/fund balances	24,240,765.	34	23,940,172.

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**Part XI Reconciliation of Net Assets**

Check if Schedule O contains a response or note to any line in this Part XI

1	130,296.
2	364,696.
3	-234,400.
4	22,890,068.
5	-49,595.
6	
7	
8	
9	2.
10	22,606,075.

**Part XII Financial Statements and Reporting**

Check if Schedule O contains a response or note to any line in this Part XII

1 Accounting method used to prepare the Form 990  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?  
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both  
 Separate basis  Consolidated basis  Both consolidated and separate basis

2b Were the organization's financial statements audited by an independent accountant?  
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  
 Separate basis  Consolidated basis  Both consolidated and separate basis

2c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		
2b	X	
2c	X	
3a	X	
3b		

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**SCHEDULE D**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

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

► Attach to Form 990.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No 1545-0047

**2017**

Open to Public  
Inspection

Name of the organization **GRAND LODGE OF ANCIENT FREE AND  
ACCEPTED MASONS OF MARYLAND** Employer identification number **52-0226260**

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" on Form 990, Part IV, line 6

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

**Part II Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7

1 Purpose(s) of conservation easements held by the organization (check all that apply)	<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
	<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
	<input type="checkbox"/> Preservation of open space	
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year		<b>Held at the End of the Tax Year</b>
a Total number of conservation easements	2a	
b Total acreage restricted by conservation easements	2b	
c Number of conservation easements on a certified historic structure included in (a)	2c	
d Number of conservation easements included in (c) acquired after 7/25/06, 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 organization during 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 monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►		
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$		
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements		

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 8

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items	► \$ _____
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items	► \$ _____
(i) Revenue included on 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 gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items	► \$ _____
a Revenue included on Form 990, Part VIII, line 1	► \$ _____
b Assets included in Form 990, Part X	► \$ _____

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**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)**

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)

a  Public exhibition      d  Loan or exchange programs  
 b  Scholarly research      e  Other \_\_\_\_\_  
 c  Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

b If "Yes," explain the arrangement in Part XIII and complete the following table

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

**Part V Endowment Funds.** Complete if the organization answered "Yes" on Form 990, Part IV, line 10

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ► \_\_\_\_\_ %

b Permanent endowment ► \_\_\_\_\_ %

c Temporarily restricted endowment ► \_\_\_\_\_ %

The percentages on lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization

by

Yes	No
3a(i)	
3a(ii)	
3b	

(i) unrelated organizations

(ii) related organizations

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	77,529.			77,529.
b Buildings	17,921,231.	10,179,008.		7,742,223.
c Leasehold improvements				
d Equipment	876,926.	732,728.		144,198.
e Other	2,345,998.	2,150,483.		195,515.
<b>Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10c.)</b>			►	8,159,465.

Schedule D (Form 990) 2017

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**Part VII Investments - Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b See Form 990, Part X, line 12

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ►</b>		

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c See Form 990, Part X, line 13

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ►</b>		

**Part IX Other Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ►</b>	

**Part X Other Liabilities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f See Form 990, Part X, line 25

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DEPOSITS	158,193.
(3) RELATED PARTY PAYABLE	398,960.
(4) DEPOSITS ON LAND	200,596.
(5) CAPITAL LEASE OBLIGATION	84,912.
(6)	
(7)	
(8)	
(9)	
<b>Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ►</b>	842,661.

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2017

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Schedule D (Form 990) 2017

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**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a

1	1	2,702,275.
2	2a	-49,595.
	2b	
	2c	
	2d	2,621,574.
	2e	2,571,979.
3	3	130,296.
4	4a	
	4b	
	4c	0.
5	5	130,296.

5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a

1	1	2,826,237.
2	2a	
	2b	
	2c	
	2d	2,461,541.
	2e	2,461,541.
3	3	364,696.
4	4a	
	4b	
	4c	0.
5	5	364,696.

5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

**Part 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

**PART III, LINE 1A:**

THE ORGANIZATION HAS COLLECTIONS OF NUMEROUS ARTIFACTS OF HISTORICAL SIGNIFICANCE THAT HAVE BEEN DONATED TO THE ORGANIZATION AND ARE MAINTAINED IN ITS MUSEUM OR ON DISPLAY IN OTHER AREAS OF ITS FACILITIES. EACH OF THESE ITEMS IS CATALOGED, PRESERVED, AND CARED FOR, AND ACTIVITIES VERIFYING THEIR EXISTENCE AND ASSESSING THEIR CONDITION ARE PERFORMED CONTINUOUSLY. THESE ITEMS HAVE NOT BEEN RECOGNIZED AS ASSETS ON THE STATEMENT OF FINANCIAL POSITION, ESPECIALLY DUE TO THE DIFFICULTY OF DETERMINING THEIR FAIR VALUES.

**PART X, LINE 2:**

THE ORGANIZATION HAD NO LIABILITY FOR UNCERTAIN TAX POSITIONS.

## Part XIII Supplemental Information (continued)

THE ORGANIZATION'S FEDERAL EXEMPT ORGANIZATION RETURNS ARE SUBJECT TO EXAMINATION BY THE IRS, GENERALLY FOR A PERIOD OF THREE YEARS AFTER THE RETURNS ARE FILED.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

<u>REVENUE FROM 12/1/2016 - 11/30/2017</u>	<u>3,158,086.</u>
<u>UNREALIZED GAINS / LOSSES FROM 12/1/2016 - 11/30/2017</u>	<u>-511,637.</u>
<u>INVESTMENT EXPENSES FOR THE PERIOD FROM 12/1/2016 -</u>	
<u>11/30/2017</u>	<u>-24,875.</u>
<u>TOTAL TO SCHEDULE D, PART XI, LINE 2D</u>	<u>2,621,574.</u>

PART XII, LINE 2D - OTHER ADJUSTMENTS:

<u>EXPENSES FROM 12/1/2016 - 11/30/2017</u>	<u>2,486,418.</u>
<u>INVESTMENT EXPENSES FOR THE PERIOD FROM 12/1/2016 -</u>	
<u>11/30/2017</u>	<u>-24,875.</u>
<u>ROUNDING</u>	<u>-2.</u>
<u>TOTAL TO SCHEDULE D, PART XII, LINE 2D</u>	<u>2,461,541.</u>

SCHEDULE D, PART XI, LINE 1 AND PART XII, LINE 1

THE ORGANIZATION CHANGED ITS YEAR END TO DECEMBER 31, 2017, THEREFORE ITS AUDITED FINANCIAL STATEMENTS WERE PREPARED ON A 13 MONTH PERIOD FROM DECEMBER 1, 2016 THROUGH DECEMBER 31, 2017. AS A RESULT, ADJUSTMENTS TO THE REVENUE AND EXPENSES PER THE AUDITED FINANCIAL STATEMENTS INCLUDE THE ACTIVITY OF THE TWELVE MONTH PERIOD ENDED NOVEMBER 30, 2017 TO PROPERLY REPORT THE 1 MONTH ACTIVITY ENDED DECEMBER 31, 2017 ON THIS FORM 990.

## 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.  
► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**2017**

Open to Public  
Inspection

Name of the organization

GRAND LODGE OF ANCIENT FREE AND  
ACCEPTED MASONS OF MARYLAND

Employer identification number  
52-0226260

FORM 990, PART VI, SECTION A, LINE 6:

THE ORGANIZATION IS A MEMBERSHIP ORGANIZATION.

FORM 990, PART VI, SECTION A, LINE 7A:

THE GRAND LODGE OF ANCIENT FREE AND ACCEPTED MASONS OF MARYLAND HAS A BOARD OF MANAGERS THAT ARE ELECTED AT THE SEMI-ANNUAL MEETING OF THE GRAND LODGE WHICH IS HELD IN MAY AND THE BOARD MEMBERS THAT HAVE BEEN ELECTED ARE INSTALLED AT THE ANNUAL MEETING OF THE GRAND LODGE WHICH IS HELD IN NOVEMBER. ONCE ELECTED, THE TERM OF OFFICE FOR A BOARD MEMBER IS THREE YEARS. NO BOARD MEMBER CAN SERVE MORE THAN TWO CONSECUTIVE TERMS. IF A MEMBER OF THE BOARD OF MANAGERS CANNOT FULFILL HIS TERM, THE GRAND MASTER SHALL HAVE THE AUTHORITY TO APPOINT A MEMBER TO FILL THAT VACANCY, HOWEVER THAT APPOINTMENT IS ONLY IN EFFECT UNTIL THE NEXT ELECTIONS AT THE NEXT SEMI-ANNUAL MEETING OF THE GRAND LODGE. THAT BOARD MEMBER CAN THEN STAND UP FOR ELECTION FOR THE NEXT TWO TERMS.

FORM 990, PART VI, SECTION A, LINE 7B:

GRAND LODGE HAS A BOARD OF MANAGERS (13 MEMBERS) THAT MEET AND VOTE ON DAY TO DAY OPERATIONS. GRAND LODGE HAS A LARGER MEMBERSHIP THAT MEETS TWO TIMES A YEAR TO APPROVE PROPERTY TRANSACTIONS, CHANGES TO CONSTITUTION, SPECIAL PROJECTS AND REPRESENTATION TO THE BOARDS.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 IS REVIEWED BY THE ORGANIZATION'S EXECUTIVE COMMITTEE BEFORE FILING.

Name of the organization	GRAND LODGE OF ANCIENT FREE AND ACCEPTED MASONS OF MARYLAND	Employer identification number 52-0226260
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FORM 990, PART VI, SECTION B, LINE 15A:

THE BOARD OF MANAGERS DETERMINES THE COMPENSATION OF THE ONE PAID OFFICER POSITION BASED ON DUTIES PERFORMED AND HOURS WORKED. THE AMOUNT PAID IS LESS THAN COMPARABLE DATA FOR THIS POSITION. ALL OTHER OFFICER POSITIONS AND MANAGEMENT POSITIONS ARE UNPAID AND PROVIDED ON A VOLUNTEER BASIS.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION'S GOVERNING DOCUMENTS AND FORM 990 ARE AVAILABLE UPON RECEIPT OF A WRITTEN REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:ROUNDING

2.

FORM 990, PART XII, LINE 2C:

BOARD OF MANAGERS ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF THE INDEPENDENT ACCOUNTANT.



**Part III** **Identification of Related Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year

**Identification of Related Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year

**Part IV Identification of Related Organizations Taxable as a Corporation or Trust.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

GRAND LODGE OF ANCIENT FREE AND  
ACCEPTED MASONSON OF MARYLAND

1. Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule			
1. During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a. Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	X	
b. Gift, grant, or capital contribution to related organization(s)	1b	X	
c. Gift, grant, or capital contribution from related organization(s)	1c	X	
d. Loans or loan guarantees to or for related organization(s)	1d	X	
e. Loans or loan guarantees by related organization(s)	1e	X	
f. Dividends from related organization(s)	1f	X	
g. Sale of assets to related organization(s)	1g	X	
h. Purchase of assets from related organization(s)	1h	X	
i. Exchange of assets with related organization(s)	1i	X	
j. Lease of facilities, equipment, or other assets to related organization(s)	1j	X	
k. Lease of facilities, equipment, or other assets from related organization(s)	1k	X	
l. Performance of services or membership or fundraising solicitations for related organization(s)	1l	X	
m. Performance of services or membership or fundraising solicitations by related organization(s)	1m	X	
n. Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X	
o. Sharing of paid employees with related organization(s)	1o	X	
p. Reimbursement paid to related organization(s) for expenses	1p	X	
q. Reimbursement paid by related organization(s) for expenses	1q	X	
r. Other transfer of cash or property to related organization(s)	1r	X	
s. Other transfer of cash or property from related organization(s)	1s	X	
2. If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) GRAND LODGE - MARYLAND MASONIC HOMES	0	14,100.	
(2) GRAND LODGE - MARYLAND MASONIC HOMES	0	14,100.	
(3)			
(4)			
(5)			
(6)			

GRAND LODGE OF ANCIENT FREE AND  
ACCEPTED MASONS OF MARYLAND

**Part VI** **Unrelated Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 37

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

**Part VII** Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions