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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

▶ **Go to *www.irs.gov/Form990* for instructions and the latest information.**

OMB No 1545-0047

2018

Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 01-01-2018 , and ending 12-31-2018

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

C Name of organization
FREE & ACCEPTED MASONS OF
PENNSYLVANIA GROUP RETURN

Doing business as

Number and street (or P O box if mail is not delivered to street address) | Room/suite
ONE NORTH BROAD STREET

City or town, state or province, country, and ZIP or foreign postal code
PHILADELPHIA, PA 19107

D Employer identification number
23-7193096

E Telephone number
(800) 462-0430

G Gross receipts $ 28,273,995

F Name and address of principal officer
MARK A HAINES
ONE NORTH BROAD STREET
PHILADELPHIA, PA 19107

H(a) Is this a group return for subordinates? ☑ Yes ☐ No

H(b) Are all subordinates included? ☑ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶ 0372

I Tax-exempt status ☐ 501(c)(3) ☑ 501(c) (10) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW PAGRANDLODGE ORG

K Form of organization ☐ Corporation ☐ Trust ☐ Association ☑ Other ▶

L Year of formation

M State of legal domicile PA

Part I Summary

1 Briefly describe the organization's mission or most significant activities
PROMOTION OF FRATERNAL ACTIVITIES IN THE HISTORY AND TRADITION OF THE MASONIC ORGANIZATION

2 Check this box ▶ ☐ 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**	0
4	Number of independent voting members of the governing body (Part VI, line 1b)	**4**	0
5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)	**5**	0
6	Total number of volunteers (estimate if necessary)	**6**	
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**	

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	8,822,559	7,435,919
9	Program service revenue (Part VIII, line 2g)		0
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	6,120,042	4,249,361
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	8,942,905	8,331,163
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	23,885,506	20,016,443
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	1,011,774	2,591,977
14	Benefits paid to or for members (Part IX, column (A), line 4)		0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	502,394	477,576
16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
b	Total fundraising expenses (Part IX, column (D), line 25) ▶0		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	13,263,087	14,798,957
18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	14,777,255	17,868,510
19	Revenue less expenses Subtract line 18 from line 12	9,108,251	2,147,933

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	112,182,412	114,330,345
21	Total liabilities (Part X, line 26)		0
22	Net assets or fund balances Subtract line 21 from line 20	112,182,412	114,330,345

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

****** 2019-11-12
Signature of officer Date

MARK A HAINES R W G S
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
		2019-11-12		P00156653

Firm's name ▶ SMITH ELLIOTT KEARNS & COMPANY LLC — Firm's EIN ▶ 52-0783935

Firm's address ▶ 19 BROOKWOOD AVE STE 101
CARLISLE, PA 17015 — Phone no (717) 243-9104

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

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 mission

PROMOTION OF FRATERNAL ACTIVITIES IN THE HISTORY AND TRADITION OF THE MASONIC ORGANIZATION

2 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 $ 2,591,977 including grants of $ 2,591,977) (Revenue $)

See Additional Data

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 ▶** 2,591,977

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1		No
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
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*	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		No
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*	11a	Yes	
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*	11b	Yes	
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*	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a		No
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*	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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*	14b		No
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*	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	16		No
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* (see instructions)	17		No
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*	18	Yes	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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*	21	Yes	
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*	22	Yes	

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
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*	**23**		No
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*	**24a**		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	**24b**		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	**24c**		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	**24d**		
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*	**25a**		
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*	**25b**		
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*	**26**		No
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*	**27**		No
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*	**28a**		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28b**		No
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*	**28c**		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	**29**		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	**30**		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	**31**		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	**32**		No
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*	**33**		No
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*	**34**		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	**35a**		No
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*	**35b**		
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*	**36**		
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*	**37**		No
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	**38**	Yes	

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**	0		
b	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**	Yes	

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**	0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			**2b**	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year? . . .			**3a**	No
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**	No
b	If "Yes," enter the name of the foreign country ▶ _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . .			**5a**	No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			**5b**	No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			**5c**	
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? . . .			**6a**	No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			**6b**	
7	**Organizations that may receive deductible contributions under section 170(c).**				
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?			**7a**	Yes
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			**7b**	Yes
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			**7c**	No
d	If "Yes," indicate the number of Forms 8282 filed during the year	**7d**			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			**7e**	No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . .			**7f**	No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			**7g**	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			**7h**	
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			**8**	
9a	Did the sponsoring organization make any taxable distributions under section 4966? . . .			**9a**	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .			**9b**	
10	**Section 501(c)(7) organizations.** 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	**Section 501(c)(12) organizations.** 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	**Section 4947(a)(1) non-exempt charitable trusts.** 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	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O			**13a**	
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**	No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* . .			**14b**	
15	Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N			**15**	No
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O			**16**	No

Part VI **Governance, Management, and Disclosure** *For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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	**1a**	0		
	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				
b	Enter the number of voting members included in line 1a, above, who are independent	**1b**	0		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		**2**		No
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?		**3**		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		**4**		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		**5**		No
6	Did the organization have members or stockholders?		**6**		No
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?		**7a**		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		**7b**		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?		**8a**	Yes	
b	Each committee with authority to act on behalf of the governing body?		**8b**		No
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*		**9**		No

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	**10a**	Yes	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	**10b**	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	**11a**		No
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	**12a**		No
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	**12b**		
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	**12c**		
13	Did the organization have a written whistleblower policy?	**13**		No
14	Did the organization have a written document retention and destruction policy?	**14**		No
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	**15a**		No
b	Other officers or key employees of the organization	**15b**		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	**16a**		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	**16b**		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed▶

18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply

☐ Own website ☐ Another's website ☐ Upon request ☑ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest 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
▶SUSAN RODRIGUEZ AUDITOR ONE NORTH BROAD STREET PHILADELPHIA, PA 19107 (215) 988-1900

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, or 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 dotted 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	Former			
See Additional Data Table										

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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	Former			
See Additional Data Table										

1b Sub-Total ▶			
c Total from continuation sheets to Part VII, **Section A** ▶			
d Total (add lines 1b and 1c) ▶	385,665		

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 ▶

			Yes	No
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*	**3**		No
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*	**4**		No
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*	**5**		No

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

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶

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
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns . . 1a				
	b Membership dues . . 1b	6,330,761			
	c Fundraising events . . 1c				
	d Related organizations 1d				
	e Government grants (contributions) 1e				
	f All other contributions, gifts, grants, and similar amounts not included above 1f	1,105,158			
	g Noncash contributions included in lines 1a - 1f $ _____				
	h **Total.** Add lines 1a-1f . . . . . ▶	7,435,919			
Program Service Revenue		Business Code			
	2a _____				
	b _____				
	c _____				
	d _____				
	e _____				
	f All other program service revenue				
	g **Total.** Add lines 2a–2f . . . . ▶				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) . . . . . ▶	3,281,841			3,281,841
	4 Income from investment of tax-exempt bond proceeds ▶				
	5 Royalties . . . . . ▶				
		(i) Real / (ii) Personal			
	6a Gross rents: 657,745				
	b Less rental expenses				
	c Rental income or (loss): 657,745				
	d Net rental income or (loss) . . . . . ▶	657,745			657,745
		(i) Securities / (ii) Other			
	7a Gross amount from sales of assets other than inventory: 9,216,818				
	b Less cost or other basis and sales expenses: 8,249,298				
	c Gain or (loss): 967,520				
	d Net gain or (loss) . . . . . ▶	967,520			967,520
	8a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c) See Part IV, line 18 . . . . a: 16,414				
	b Less direct expenses . . . b: 8,254				
	c Net income or (loss) from fundraising events . . ▶	8,160			8,160
	9a Gross income from gaming activities See Part IV, line 19 . . . a				
	b Less direct expenses . . . b				
	c Net income or (loss) from gaming activities . . ▶				
	10a Gross sales of inventory, less returns and allowances . . a				
	b Less cost of goods sold . . b				
	c Net income or (loss) from sales of inventory . . ▶				
	Miscellaneous Revenue / Business Code				
	11a OTHER SALES AND REVENUE 900099	7,665,258	7,665,258		
	b				
	c				
	d All other revenue				
	e **Total.** Add lines 11a–11d . . . . . ▶	7,665,258			
	12 Total revenue. See Instructions . . . . . ▶	20,016,443	7,665,258		4,915,266

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 . . . . . ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	2,554,832	2,554,832		
2 Grants and other assistance to domestic individuals See Part IV, line 22	37,145	37,145		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	385,665		385,665	
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	50,002		50,002	
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	41,909		41,909	
11 Fees for services (non-employees)				
a Management				
b Legal				
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 Schedule O)				
12 Advertising and promotion				
13 Office expenses	5,379,537		5,379,537	
14 Information technology				
15 Royalties . .				
16 Occupancy	4,248,561		4,248,561	
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings	1,058,551		1,058,551	
20 Interest				
21 Payments to affiliates	2,358,823		2,358,823	
22 Depreciation, depletion, and amortization . .				
23 Insurance . . .				
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 SPECIAL EVENTS	652,108		652,108	
b PRINTING & STATIONARY	469,394		469,394	
c POSTAGE & P O BOX RENTAL	274,740		274,740	
d REGALIA	149,961		149,961	
e All other expenses	207,282		207,282	
25 **Total functional expenses.** Add lines 1 through 24e	17,868,510	2,591,977	15,276,533	0
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 98-2 (ASC 958-720)				

Part X Balance Sheet

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

			(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing	2,631,546	1	1,912,833
	2	Savings and temporary cash investments	16,764,513	2	17,371,794
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	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 instructions) Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D — 10a: 7,929,433			
	b	Less accumulated depreciation — 10b:	7,976,464	10c	7,929,433
	11	Investments—publicly traded securities		11	
	12	Investments—other securities See Part IV, line 11	84,624,821	12	86,821,018
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	185,068	15	295,267
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	112,182,412	16	114,330,345
Liabilities	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV 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		25	
	26	**Total liabilities.** Add lines 17 through 25	0	26	0
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets		27	
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds	10,638,331	30	10,499,201
	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds	101,544,081	32	103,831,144
	33	Total net assets or fund balances	112,182,412	33	114,330,345
	34	Total liabilities and net assets/fund balances	112,182,412	34	114,330,345

Part XI Reconcilliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	20,016,443
2	Total expenses (must equal Part IX, column (A), line 25)	2	17,868,510
3	Revenue less expenses Subtract line 2 from line 1	3	2,147,933
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	112,182,412
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	114,330,345

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990 ☑ Cash ☐ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	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			
b	Were the organization's financial statements audited by an independent accountant?	2b		No
	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			
c	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?	2c		
	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?	3a		No
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	3b		

Additional Data

Software ID:

Software Version:

EIN: 23-7193096

Name: FREE & ACCEPTED MASONS OF PENNSYLVANIA GROUP RETURN

Form 990 (2018)

Form 990, Part III, Line 4a:

GRANTS AND ALLOCATIONS RELATED TO ORGANIZATION'S PURPOSE

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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	Former			
NEAL GREENBERG TREASURER	1 00	X		X				1,200	0	0
PHILIP H BATULA SECRETARY	1 00	X		X				3,000	0	0
GILBERT STEIN TREASURER	1 00	X		X				800	0	0
SANDER ROBERT WAGMAN SECRETARY	1 00	X		X				3,350	0	0
DAVID CASHER TREASURER	1 00	X		X				200	0	0
TRACY BITNER SECRETARY	1 00	X		X				3,600	0	0
WILLIAM D TROUTMAN SECRETARY	1 00	X		X				1,761	0	0
WILLIAM H CARTER JR TREASURER	1 00	X		X				300	0	0
KENNETH W ROTON SECRETARY	1 00	X		X				1,000	0	0
DOUGLAS M WIKER SECRETARY	1 00	X		X				4,401	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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	Former			
JASON H LEWIS ASSISTANT SE	1 00	X		X				62	0	0
NICOLAS SMERILLI SECRETARY	1 00	X		X				3,850	0	0
JOHN WAGNER TREASURER	1 00	X		X				400	0	0
EDWARD G CLIFFORD III SECRETARY	1 00	X		X				3,500	0	0
DAVID KLEINGUENTHER SECRETARY	1 00	X		X				3,500	0	0
MITCHELL D LANDIN TREASURER	1 00	X		X				1,000	0	0
SONNY BOCCHINFUSO SECRETARY	1 00	X		X				2,000	0	0
THOMAS MINICK SECRETARY	1 00	X		X				1,400	0	0
FREDERICK WICHTERMAN TREASURER	1 00	X		X				2,400	0	0
EDWARD J ACHILLES SECRETARY	1 00	X		X				3,000	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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	Former			
STEVEN R JONES TREASURER	1 00	X		X				200	0	0
NEIL T COY SR SECRETARY	1 00	X		X				700	0	0
WILLIAM E RHYDDERCH TREASURER	1 00	X		X				426	0	0
HAYDEN W WRIGHT SECRETARY	1 00	X		X				1,598	0	0
DAVID HATOOKA TREASURER	1 00	X		X				366	0	0
PAUL VARZALY SECRETARY	1 00	X		X				1,852	0	0
CURTIS R WELTER TREASURER	1 00	X		X				2,850	0	0
GARY V HOOVER SECRETARY	1 00	X		X				5,750	0	0
HENRY A SEIGEL TREASURER	1 00	X		X				200	0	0
HARVEY L SOKOLOFF SECRETARY	1 00	X		X				1,200	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
CARL P RIGEFSKY TREASURER	1 00	X		X				250	0	0
MARK J PERLMAN SECRETARY	1 00	X		X				1,820	0	0
HARRY R FEIGEL JR TREASURER	1 00	X		X				550	0	0
CRAIG J WILSON SECRETARY	1 00	X		X				3,500	0	0
SAMUEL FRENCH TREASURER	1 00	X		X				90	0	0
ROBERT L HUGHES SECRETARY	1 00	X		X				600	0	0
CURT BEAM SECRETARY	1 00	X		X				1,260	0	0
MAX H STARKE TREASURER	1 00	X		X				2,400	0	0
THOMAS MURGITROYDE SECRETARY	1 00	X		X				6,000	0	0
DAVID SHULTZ TREASURER	1 00	X		X				300	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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	Former			
ROBERT THOMAS SECRETARY	1 00	X		X				600	0	0
TOM E RUCH TREASURER	1 00	X		X				2,500	0	0
LOUIS SATTLER SECRETARY	1 00	X		X				5,000	0	0
JOHN E BARNHART SECRETARY	1 00	X		X				1,000	0	0
JOHN WEAVER SECRETARY	1 00	X		X				2,000	0	0
JOHN DZUBAK ASSISTANT SE	1 00	X		X				525	0	0
RICHARD ROYER SECRETARY	1 00	X		X				2,370	0	0
STEWARD JOHN MEINHART TREASURER	1 00	X		X				400	0	0
JOHN TUMOLO III SECRETARY	1 00	X		X				1,200	0	0
EDWARD BURCHELL TREASURER	1 00	X		X				480	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
DAVID ALLISON SECRETARY	1 00	X		X				4,000	0	0
KENNETH T SETTLEMYER TREASURER	1 00	X		X				60	0	0
ROBERT L GREENE SECRETARY	1 00	X		X				1,500	0	0
MARK A RAHR TREASURER	1 00	X		X				100	0	0
LESLIE D MOORE SECRETARY	1 00	X		X				1,000	0	0
LEON SASSAMAN SECRETARY	1 00	X		X				300	0	0
RAYMOND SMITH TREASURER	1 00	X		X				300	0	0
MICHAEL DREISCH SECRETARY	1 00	X		X				625	0	0
WILLIAM RUSH SECRETARY	1 00	X		X				650	0	0
ROBERT FIGHERA TREASURER	1 00	X		X				400	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
GEORGE CHIAVERINI SECRETARY	1 00	X		X				1,600	0	0
STEPHEN R BELL TREASURER	1 00	X		X				1,500	0	0
HOWARD GLICKMAN SECRETARY	1 00	X		X				6,000	0	0
RALPH A CLEMMER ASSISTANT SE	1 00	X		X				500	0	0
DALE YOUNT TREASURER	1 00	X		X				50	0	0
TIM JAMES SECRETARY	1 00	X		X				800	0	0
WILLIAM B KINGSTON TREASURER	1 00	X		X				50	0	0
JAMES E BOLLINGER SECRETARY	1 00	X		X				500	0	0
CARL CALDER SECRETARY	1 00	X		X				2,000	0	0
RODMAN RALSTON SECRETARY	1 00	X		X				1,750	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MACLEAN LUNKO TREASURER	1 00	X		X				100	0	0
SCOTT A SMELTZER TREASURER	1 00	X		X				300	0	0
H ROBERT DERRICK SECRETARY	1 00	X		X				1,200	0	0
TROY DONMOYER SECRETARY	1 00	X		X				500	0	0
WILLIAM MUSE SECRETARY	1 00	X		X				1,000	0	0
R ROBERT MCELWEE TREASURER	1 00	X		X				600	0	0
JUSTIN A BECKER SECRETARY	1 00	X		X				3,900	0	0
EDWARD P FAIR SECRETARY	1 00	X		X				1,200	0	0
EDWARD SARNACKI TREASURER	1 00	X		X				100	0	0
DANIEL T ZIDEK TREASURER	1 00	X		X				750	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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	Former			
JOSEPH A WAGUS SECRETARY	1 00	X		X				1,500	0	0
BARRY GOULD TREASURER	1 00	X		X				250	0	0
SCOTT SYPHRIT SECRETARY	1 00	X		X				1,200	0	0
KEVIN BALOG SECRETARY	1 00	X		X				400	0	0
LARRY NANA SECRETARY	1 00	X		X				400	0	0
JASON WILKINSON SECRETARY	1 00	X		X				2,000	0	0
DONALD FRACE TREASURER	1 00	X		X				200	0	0
THOMAS BOLTON SECRETARY	1 00	X		X				800	0	0
DAVID C ZEAMER TREASURER	1 00	X		X				400	0	0
MARK C ZEAMER SECRETARY	1 00	X		X				3,600	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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	Former			
EDWARD L FRY SECRETARY	1 00	X		X				800	0	0
JOHN E WARE TREASURER	1 00	X		X				321	0	0
KEVIN KUNA SECRETARY	1 00	X		X				1,603	0	0
MARK F HUTCHINSON JR SECRETARY	1 00	X		X				2,000	0	0
MARK LEE TREASURER	1 00	X		X				575	0	0
CLARENCE ENGEL SECRETARY	1 00	X		X				2,000	0	0
KENNETH W MCCLINTOCK TREASURER	1 00	X		X				1,000	0	0
MARK J PHILLIPS SECRETARY	1 00	X		X				4,000	0	0
DANIEL G CAMPBELL TREASURER	1 00	X		X				97	0	0
WILLIAM L LOOS TREASURER	1 00	X		X				100	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MICHAEL GROSSMAN TREASURER	1 00	X		X				600	0	0
BRIAN SKOFF SECRETARY	1 00	X		X				2,000	0	0
GLENN LARGE TREASURER	1 00	X		X				30	0	0
SCOTT BIEDENKAPP SECRETARY	1 00	X		X				300	0	0
EARL HOCKENBERRY SECRETARY	1 00	X		X				950	0	0
NORMAN R MCKEE SECRETARY	1 00	X		X				1,800	0	0
ROGER E MARSHALL TREASURER	1 00	X		X				100	0	0
ALAN R GUELICH SECRETARY	1 00	X		X				1,000	0	0
DAVID ANGLE TREASURER	1 00	X		X				600	0	0
WILLIAM GARDINER SECRETARY	1 00	X		X				3,000	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOE GROSS SECRETARY	1 00	X		X				600	0	0
TEVLIN TREASURER	1 00	X		X				200	0	0
WYNKOOP SECRETARY	1 00	X		X				550	0	0
ROBERT MCCONNELL TREASURER	1 00	X		X				500	0	0
JOSEPH HACKEL SECRETARY	1 00	X		X				3,000	0	0
DEREK SWEGER SECRETARY	1 00	X		X				500	0	0
DAVID E CUBBISON SECRETARY	1 00	X		X				1,050	0	0
JOSH YARNELL SECRETARY	1 00	X		X				1,500	0	0
ROBERT HOFFMAN TREASURER	1 00	X		X				100	0	0
LOU NARO SECRETARY	1 00	X		X				575	0	0

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(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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	Former			
FRANK LIGUORI TREASURER	1 00	X		X				300	0	0
LIN BASTIAN JR SECRETARY	1 00	X		X				1,600	0	0
EDWARD KELLEY SECRETARY	1 00	X		X				2,500	0	0
RICHARD MCGEARY TREASURER	1 00	X		X				250	0	0
GREGORY KASERMAN SECRETARY	1 00	X		X				800	0	0
GERALD FRANCIS TREASURER	1 00	X		X				48	0	0
RICHARD KARR SECRETARY	1 00	X		X				675	0	0
BRUCE MCMURTRIE ASSISTANT SE	1 00	X		X				38	0	0
STEVE ERWAY TREASURER	1 00	X		X				600	0	0
NEIL MILLER SECRETARY	1 00	X		X				600	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ROBERT TSCHUDY TREASURER	1 00	X		X				180	0	0
JOHN CAMPO SECRETARY	1 00	X		X				550	0	0
KENNETH L BROOKS TREASURER	1 00	X		X				85	0	0
MARTIN L MILLER SECRETARY	1 00	X		X				1,200	0	0
SCOTT PAYNE SECRETARY	1 00	X		X				500	0	0
KEVIN B SPANGLER TREASURER	1 00	X		X				1,000	0	0
ROBERT L NOLAN JR SECRETARY	1 00	X		X				1,500	0	0
DAVE KRENTZ SECRETARY	1 00	X		X				3,000	0	0
KENDALL LEHMAN SECRETARY	1 00	X		X				500	0	0
JAMES H RICHARDSON JR TREASURER	1 00	X		X				400	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MICHAEL J STAFFORD SECRETARY	1 00	X		X				2,500	0	0
DENNIS W BUTLER TREASURER	1 00	X		X				100	0	0
TAD MOORE SECRETARY	1 00	X		X				2,400	0	0
RONALD KOLVA TREASURER	1 00	X		X				300	0	0
KEN RHINE SECRETARY	1 00	X		X				1,200	0	0
ALAN D MUCH SECRETARY	1 00	X		X				300	0	0
REIS CALFAYAN TREASURER	1 00	X		X				2,000	0	0
MIKE JONER SECRETARY	1 00	X		X				2,875	0	0
ROB ABEL TREASURER	1 00	X		X				100	0	0
DAVE LOVELAND SECRETARY	1 00	X		X				300	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
CHARLES BROWN TREASURER	1 00	X		X				100	0	0
DAVID HINERMAN SECRETARY	1 00	X		X				1,405	0	0
RUSSEL G HOTTENSTEIN TREASURER	1 00	X		X				200	0	0
RANDY A HOFFMAN SECRETARY	1 00	X		X				1,200	0	0
WILLIAM JAMIESON SECRETARY	1 00	X		X				1,620	0	0
CHARLE R WELCH TREASURER	1 00	X		X				100	0	0
ROBERT C SISCO SECRETARY	1 00	X		X				1,200	0	0
DAVID L LANGDON SECRETARY	1 00	X		X				3,000	0	0
WILLIAM LOUGHLIN TREASURER	1 00	X		X				200	0	0
WILLIAM BLANNETT SECRETARY	1 00	X		X				1,400	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
DOUGLAS J KENDZIOR SECRETARY	1 00	X		X				500	0	0
JOHN FREED TREASURER	1 00	X		X				400	0	0
CARL WADE SECRETARY	1 00	X		X				3,000	0	0
DAVID C WALIZE SECRETARY	1 00	X		X				2,400	0	0
KEN RUCH IV SECRETARY	1 00	X		X				600	0	0
CHARLES I WALKER TREASURER	1 00	X		X				150	0	0
J RICHARD EBY SECRETARY	1 00	X		X				200	0	0
MARK TODERO II TREASURER	1 00	X		X				70	0	0
DUSTIN SHADLER SECRETARY	1 00	X		X				500	0	0
ROBERT W HOWARD TREASURER	1 00	X		X				250	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ERIC A CARLSON SECRETARY	1 00	X		X				2,500	0	0
ARTHUR SMALTZ TREASURER	1 00	X		X				200	0	0
RICHARD PARKER SECRETARY	1 00	X		X				800	0	0
WILLIAM H BROWN SECRETARY	1 00	X		X				1,000	0	0
WAYNE E HANNA TREASURER	1 00	X		X				800	0	0
DANIEL J WELLMAN SECRETARY	1 00	X		X				2,500	0	0
ANTHONY LEER TREASURER	1 00	X		X				200	0	0
MICHAEL HUCK SECRETARY	1 00	X		X				1,400	0	0
STEVEN A MILLER TREASURER	1 00	X		X				200	0	0
RONALD R FULTON SECRETARY	1 00	X		X				600	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ROBIN DISTLER SECRETARY	1 00	X		X				1,200	0	0
BERNARD S GOLUBIEWSKI SECRETARY	1 00	X		X				1,500	0	0
ADAM W HOLTZAPPLE SECRETARY/TR	1 00	X		X				3,000	0	0
RICHARD B SCHROEDER II TREASURER	1 00	X		X				1,000	0	0
DAVID M MCCORMICK TREASURER	1 00	X		X				538	0	0
ROBERT C CASSIDY SECRETARY	1 00	X		X				538	0	0
JOHN R THOMAS TREASURER	1 00	X		X				300	0	0
ROBERT ASUTCLIFFE SECRETARY	1 00	X		X				1,800	0	0
RANDY L RICHARDS SECRETARY	1 00	X		X				2,400	0	0
MICHAEL P MCGINNIS TREASURER	1 00	X		X				100	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
DAVID L WEISER SECRETARY	1 00	X		X				3,600	0	0
DAVID SNOPECK TREASURER	1 00	X		X				250	0	0
RAY MURDOCH SECRETARY	1 00	X		X				1,200	0	0
JOHN M GREGORY TREASURER	1 00	X		X				100	0	0
SCOTT STRAWDINGER SECRETARY	1 00	X		X				1,200	0	0
PETER OSBORN TREASURER	1 00	X		X				50	0	0
KEITH FOSTER SECRETARY	1 00	X		X				300	0	0
F PHILLIP RIGHT SECRETARY	1 00	X		X				500	0	0
WILLIAM HAGENBAUGH TREASURER	1 00	X		X				300	0	0
WILLIAM L HOWATT SECRETARY	1 00	X		X				500	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ROBERT MONCAK SECRETARY	1 00	X		X				3,000	0	0
RICHARD DARRENKAMP TREASURER	1 00	X		X				158	0	0
KEVIN KULISH SECRETARY	1 00	X		X				550	0	0
WILLIAM HERZ TREASURER	1 00	X		X				200	0	0
STEVE ROWE SECRETARY	1 00	X		X				550	0	0
CURTIS LIZENBAUM TREASURER	1 00	X		X				800	0	0
ARTHUR HAYES SECRETARY	1 00	X		X				750	0	0
ROBERT DIPISA SECRETARY	1 00	X		X				1,250	0	0
DAVID PEARLMAN TREASURER	1 00	X		X				50	0	0
TODD WILKINS JR SECRETARY	1 00	X		X				1,200	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
BRUCE H JACKSON SECRETARY	1 00	X		X				1,000	0	0
EDWARD E FERRIS SECRETARY	1 00	X		X				300	0	0
ALAN MELLNER TREASURER	1 00	X		X				400	0	0
CHARLES THOMAS SECRETARY	1 00	X		X				1,200	0	0
PATRICK LYONS SECRETARY	1 00	X		X				2,040	0	0
RICK SNYDER SECRETARY	1 00	X		X				400	0	0
ROBERT L JOHNSON TREASURER	1 00	X		X				1,500	0	0
JOSEPH W CALABRESE SECRETARY	1 00	X		X				2,400	0	0
CRAIG KERN TREASURER	1 00	X		X				500	0	0
LEE PHILLIPS SECRETARY	1 00	X		X				2,500	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ERIC MANSFELD TREASURER	1 00	X		X				300	0	0
KEVIN MCKEE SECRETARY	1 00	X		X				1,800	0	0
THOMAS LUCAS TREASURER	1 00	X		X				400	0	0
RANDY HAGOFSKY SECRETARY	1 00	X		X				500	0	0
RICHARD BUSH SECRETARY	1 00	X		X				1,200	0	0
DONALD BURD SECRETARY	1 00	X		X				1,500	0	0
RICHARD FOOR SECRETARY	1 00	X		X				1,500	0	0
JOSEPH A FLETCHER III TREASURER	1 00	X		X				400	0	0
JAMES T CLANCY SECRETARY	1 00	X		X				3,000	0	0
ROBERT SHAFFER TREASURER	1 00	X		X				600	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
BARRY WAGNER SECRETARY	1 00	X		X				3,000	0	0
GREGORY SMITH SECRETARY	1 00	X		X				822	0	0
TIM MCKIERNAN SECRETARY	1 00	X		X				2,000	0	0
JOHN SNYDER TREASURER	1 00	X		X				600	0	0
GEORGE WILLIAMS SECRETARY	1 00	X		X				5,000	0	0
ROBERT K BRICKER TREASURER	1 00	X		X				200	0	0
CAREY KAUCHER SECRETARY	1 00	X		X				1,200	0	0
SCOTT BAKER TREASURER	1 00	X		X				100	0	0
JAY V SMITH SECRETARY	1 00	X		X				500	0	0
JOSEPH CRAWFORD ASSISTANT SE	1 00	X		X				220	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ROBERT FAIDLEY SECRETARY	1 00	X		X				1,627	0	0
DONALD W ZIMMERMAN TREASURER	1 00	X		X				100	0	0
GARY K MAGEE SECRETARY	1 00	X		X				2,000	0	0
RICK SHERER TREASURER	1 00	X		X				400	0	0
ANTHONY PIRRELLO SECRETARY	1 00	X		X				3,600	0	0
DENNIS J RISING TREASURER	1 00	X		X				100	0	0
FRED D GOODMAN SECRETARY	1 00	X		X				500	0	0
JAMES A SMITH SECRETARY	1 00	X		X				150	0	0
EDWARD C GOSHORN SECRETARY	1 00	X		X				872	0	0
RALPH E NATALE TREASURER	1 00	X		X				200	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
SCOTT KOVALY SECRETARY	1 00	X		X				500	0	0
MICHAEL MAY SECRETARY	1 00	X		X				3,150	0	0
HARRY TARHAN TREASURER	1 00	X		X				100	0	0
THOMAS MUSSO SECRETARY	1 00	X		X				750	0	0
GUY BENACK TREASURER	1 00	X		X				400	0	0
EDWARD ESTOCHIN JR SECRETARY	1 00	X		X				2,400	0	0
JEFFREY B GEESAMAN TREASURER	1 00	X		X				100	0	0
ROBERT W NELSON JR SECRETARY	1 00	X		X				500	0	0
HARRY M SCHWARTZ TREASURER	1 00	X		X				300	0	0
ANDREW B SCHURE SECRETARY	1 00	X		X				2,500	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
PERRY S ECKSEL SECRETARY	1 00	X		X				938	0	0
MARK MIDDLETON TREASURER	1 00	X		X				100	0	0
ROBERT HORN SECRETARY	1 00	X		X				500	0	0
DAVID HYDE TREASURER	1 00	X		X				57	0	0
JOHN REES SECRETARY	1 00	X		X				500	0	0
KRIS M DOUGLAS SECRETARY	1 00	X		X				1,500	0	0
JOHN E STAHLMAN SECRETARY	1 00	X		X				1,275	0	0
ROBERT ZISCHKAU TREASURER	1 00	X		X				250	0	0
ROBERT RUFF SECRETARY	1 00	X		X				1,300	0	0
STEVEN M MYERS TREASURER	1 00	X		X				200	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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	Former			
MARK A PINE SECRETARY	1 00	X		X				1,600	0	0
RICHARD ERDMAN SECRETARY	1 00	X		X				600	0	0
CRAIG R KEYSER TREASURER	1 00	X		X				200	0	0
JOHN R DAVIDSON SECRETARY	1 00	X		X				900	0	0
THOMAS JACKSON TREASURER	1 00	X		X				200	0	0
HM BAUMAN JR SECRETARY	1 00	X		X				750	0	0
JAMES ZERFOSS TREASURER	1 00	X		X				150	0	0
JON DEPOE SECRETARY	1 00	X		X				1,500	0	0
RICHARD HENSHEY TREASURER	1 00	X		X				100	0	0
WILLIAM J SHAW SECRETARY	1 00	X		X				1,800	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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	Former			
AARON N DYM TREASURER	1 00	X		X				300	0	0
ARTHUR L DINGER SECRETARY	1 00	X		X				1,500	0	0
TERRY MINNICH SECRETARY	1 00	X		X				500	0	0
MICHAEL J KEENER SECRETARY	1 00	X		X				1,000	0	0
MATT M BROCKMAN SECRETARY	1 00	X		X				1,000	0	0
MATT AUSTIN SECRETARY	1 00	X		X				750	0	0
RAYMOND STOCKER TREASURER	1 00	X		X				200	0	0
DENNIS SNOKE SECRETARY	1 00	X		X				1,200	0	0
JOSEPH BACKHAUS TREASURER	1 00	X		X				200	0	0
TIMOTHY HALLER TREASURER	1 00	X		X				100	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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	Former			
FRANK WYATT SECRETARY	1 00	X		X				1,000	0	0
AL HAUSER TREASURER	1 00	X		X				400	0	0
TIM SUMNER SECRETARY	1 00	X		X				2,500	0	0
RAY WEAVER ASSISTANT SE	1 00	X		X				500	0	0
O KARL SCHILL TREASURER	1 00	X		X				200	0	0
SHAWN S HENTZ SECRETARY	1 00	X		X				2,000	0	0
STEPHEN FLINN SECRETARY	1 00	X		X				3,100	0	0
ROBERT B KEHM JR SECRETARY	1 00	X		X				3,600	0	0
FREDERICK WUESTNER JR TREASURER	1 00	X		X				548	0	0
ROBERT BLACKWOOD SECRETARY	1 00	X		X				2,222	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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	Former			
PAUL M KRINER TREASURER	1 00	X		X				74	0	0
KEVIN P HENSLER SECRETARY	1 00	X		X				2,265	0	0
DONALD L ALLMAN TREASURER	1 00	X		X				200	0	0
WILLIAM R MCCOY JR SECRETARY	1 00	X		X				1,100	0	0
WAYNE M BAGGET TREASURER	1 00	X		X				150	0	0
SEAN F HOWARD SECRETARY	1 00	X		X				1,200	0	0
NIGEL FOUNDLING TREASURER	1 00	X		X				180	0	0
RONNIE SMITH SECRETARY	1 00	X		X				1,200	0	0
DAVID ROBERTS SR TREASURER	1 00	X		X				200	0	0
ROBERT S CLEAVER SECRETARY	1 00	X		X				2,100	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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	Former			
ROBERT MEIR SECRETARY	1 00	X		X				3,000	0	0
ROBERT J WERNER TREASURER	1 00	X		X				200	0	0
DAVID E HAY SECRETARY	1 00	X		X				4,000	0	0
TED WERKHEISER TREASURER	1 00	X		X				100	0	0
THOMAS J RIEGER SECRETARY	1 00	X		X				1,200	0	0
BRIAN M FOLEY TREASURER	1 00	X		X				60	0	0
RICHARD G AUFMAN SECRETARY	1 00	X		X				2,400	0	0
RICHARD J GALLAGHER SR TREASURER	1 00	X		X				200	0	0
MARK WOLFE SECRETARY	1 00	X		X				2,200	0	0
DALE SCHIMPF SECRETARY	1 00	X		X				600	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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	Former			
DAVID B DITTER SECRETARY	1 00	X		X				750	0	0
W RICHARD DILLON SECRETARY	1 00	X		X				250	0	0
JAMES A JENKINS TREASURER	1 00	X		X				600	0	0
RAYMOND HOLMES SECRETARY	1 00	X		X				3,000	0	0
GEORGE V DAVIC TREASURER	1 00	X		X				448	0	0
ROBERT R STONE JR SECRETARY	1 00	X		X				2,240	0	0
KEITH SINGLEY TREASURER	1 00	X		X				300	0	0
MILTON S GOUSE SECRETARY	1 00	X		X				2,000	0	0
ROBERT YUSKO TREASURER	1 00	X		X				200	0	0
REED ROBBINS SECRETARY	1 00	X		X				1,600	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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	Former			
ROBERT CATALANO TREASURER	1 00	X		X				700	0	0
HECTOR CABRERA SECRETARY	1 00	X		X				1,500	0	0
HAROLD LEKSELL TREASURER	1 00	X		X				500	0	0
DAVID POZEK SECRETARY	1 00	X		X				2,000	0	0
FRANK FEINBERG SECRETARY	1 00	X		X				900	0	0
AARON WHITE TREASURER	1 00	X		X				50	0	0
DANIEL TARAFAS SECRETARY	1 00	X		X				500	0	0
JOHN RIES TREASURER	1 00	X		X				200	0	0
RICHARD BACON SECRETARY	1 00	X		X				500	0	0

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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 for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
FREE & ACCEPTED MASONS OF PENNSYLVANIA GROUP RETURN

Employer identification number
23-7193096

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? ☐ Yes ☐ 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? ☐ Yes ☐ 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)

☐ Preservation of land for public use (e g , recreation or education)
☐ Preservation of an historically important land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ 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

		Held at the End of the Year
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? ☐ Yes ☐ 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)? ☐ Yes ☐ 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 ▶ $ _____

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
- b ☐ Scholarly research
- c ☐ Preservation for future generations
- d ☐ Loan or exchange programs
- e ☐ Other

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
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	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 in 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
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	
b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?	3b	

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				
b Buildings		7,493,490		7,493,490
c Leasehold improvements				
d Equipment		435,943		435,943
e Other				
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c))* . . ▶				7,929,433

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) OTHER SECURITIES	86,821,018	C
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶	86,821,018	

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)		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13)* ▶		

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)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 15)* ▶	

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.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	

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 ☐

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	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total revenue Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12)			5	

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	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			5	

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

Return Reference	Explanation	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

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SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a

▶ **Attach to Form 990 or Form 990-EZ.**

▶ **Go to *www irs gov/Form990* for instructions and the latest information**

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
FREE & ACCEPTED MASONS OF
PENNSYLVANIA GROUP RETURN

Employer identification number
23-7193096

Part I **Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities Check all that apply

a ☐ Mail solicitations
b ☐ Internet and email solicitations
c ☐ Phone solicitations
d ☐ In-person solicitations
e ☐ Solicitation of non-government grants
f ☐ Solicitation of government grants
g ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ **Yes** ☐ **No**

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization

(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions? **Yes**	**No**	**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col **(i)**	**(vi)** Amount paid to (or retained by) organization
Total ▶						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

Part II **Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

		(a) Event #1 HOLIDAY BREAKFA (event type)	(b) Event #2 (event type)	(c) Other events (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts	16,414			16,414
	2 Less Contributions				
	3 Gross income (line 1 minus line 2)	16,414			16,414
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	8,254			8,254
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				8,254
	11 Net income summary Subtract line 10 from line 3, column (d) ▶				8,160

Part III **Gaming.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes % ☐ No	☐ Yes % ☐ No	☐ Yes % ☐ No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities _____

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain _____

11 Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity conducted in

a The organization's facility	**13a**	%
b An outside facility	**13b**	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶ ----------

Address ▶ ----------

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ _____ and the amount of gaming revenue retained by the third party ▶ $ _____

c If "Yes," enter name and address of the third party

Name ▶ ----------

Address ▶

----

16 Gaming manager information

Name ▶ ----------

Gaming manager compensation ▶ $----------

Description of services provided ▶ ----------

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Return Reference	Explanation

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Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

▶ **Go to *www.irs.gov/Form990* for the latest information.**

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
FREE & ACCEPTED MASONS OF PENNSYLVANIA GROUP RETURN

Employer identification number
23-7193096

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☐ Yes ☑ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000 Part II can be duplicated if additional space is needed

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) VARIOUS			184,015				BLDGS & ENDOW FUNDS
(2) VARIOUS			2,370,817				GEN OPERATIONS

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22
Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) HOME ASSISTANCE DIRECT		37,145			
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ **Attach to Form 990 or 990-EZ.**
▶ **Go to *www.irs.gov/Form990* for the latest information.**

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization	Employer identification number
FREE & ACCEPTED MASONS OF PENNSYLVANIA GROUP RETURN	23-7193096

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 8B	NOT ALL COMMITTEES MAINTAIN WRITTEN DOCUMENTATION

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 11B	THIS IS A GROUP RETURN FOR MULTIPLE ENTITIES AND IT WAS NOT POSSIBLE TO MAKE THE RETURN AV AILABLE TO THE GOVERNING BOARD OF EACH ENTITY BEFORE FILING

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 18	COPIES OF THE 990 ARE AVAILABLE FOR PUBLIC INSPECTION UPON REQUEST TO THE LODGE AUDITOR

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 19	THIS IS A GROUP RETURN FOR MULTIPLE ENTITIES EACH ENTITY HAS ITS OWN METHOD OF MAKING THIS INFORMATION AVAILABLE TO THE PUBLIC