Form	. 9 9	. 00	Return of O	rganization	Exempt	Fro	om Inco	ome Ta	ЭX	OMB No 15	45-0047
				•	-					201	18 '
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.											Public
Department of the Treasury Internal Revenue Service Service Go to www.irs.gov/Form990 for instructions and the latest information.											tion
A	For the	2018 cale	endar year, or tax year beginn				nd ending		cember	, 20 18	
В	Check if	applicable	C Name of organization Most Wo	rshipful Grand Lod	ge of F&AM of	Alaska	a		D Employe	r identification i	number
	Address	change	Doing business as Grand Loc	 					_	92-0082478	<u> </u>
	Name cl	nange	Number and street (or P O box	f mail is not delivered	to street address)	Room/suite		E Telephon	e number 907-561-1477	
Final return/terminated City or town, state or province, country, and ZIP or foreign postal code											131,001
\exists	Amende		Anchorage, Alaska 99501 F Name and address of principal of	fficer	·			Man le this a s	G Gross re	<u> </u>	
Application pending F Name and address of principal officer Jerome P Wasson 518 E 14th Avenue Anchorage Alaska 99501 H(a) Is this a group return for subordinates? H(b) Are all subordinates included? Y											_
$\overline{}$	Tax-exe	mpt status	☐ 501(c)(3)	<u></u>	no) 4947(a)(1	1) or		4 ''		list (see instructi	
J	Website				1		,	H(c) Group	exemption i	number >	4111
K	Form of	organization	✓ Corporation ☐ Trust ☐ Ass	ociation ☐ Other ►	\	L Yea	ar of formation	1982	M State	of legal domicile	AK
Р	art I	Summ			b						
	1		escribe the organization's m	ission or most sig	gnificant activ	rities:	Provides	day to day	services to	19 Member	
Activities & Governance		Lodges a	nd other Grand Lodges								
E		Chook th	nis box ▶☐ if the organizati	on discontinued i	ta anaratiana				250/ of .	to not occato	
OV6	3	Number	of voting members of the g	werning body (Pa	art VI line 1ale			ITIO/E (Flar	3	is net assets	6
∞ ∞	4	Number	of independent voting mem	bers of the gover	ning body (Pa	art VI.	REC	FIVE	U 100		0
ies	5	Total nur	mber of individuals employe	d ın calendar yea	r 2018 (Part V	, line	2a) .		33		1
ξ	6	Total nur	mber of volunteers (estimate	if necessary)		181		3 0 201	9		85
Ac	7a	Total unr	related business revenue fro	m Part VIII, colun	nn (C), line 12				9 6		131,001
	b	Net unre	lated business taxable inco	me from Form 99	0-T, line 38	Į l			76		1,220
	_					۱ _	OGU	ENON		Current \	
Ģ	8		itions and grants (Part VIII, I	•					49,630		58,260 0
Revenue	9 10	_	i service revenue (Part VIII, li ent income (Part VIII, columi	<u>-</u> .	 nd 7d)	•	·		47,807		45,796
æ	11		venue (Part VIII, column (A),	• • •		 1e)	· ·		25,960		26,945
	12		enue-add lines 8 through 1			-	ne 12)	 	123,397		131,001
_	13		and similar amounts paid (Pa						2,568		2,598
	14	Benefits	paid to or for members (Pai	t IX, column (A), l	ine 4)				0		0
S	15	Salaries,	other compensation, employ	ee benefits (Part I)	K, column (A), l	lines :	5–10)		14 279	279	
Expenses	16a		onal fundraising fees (Part I)	. , ,.	•		<u> </u>		0		0
Ä	b		ndraising expenses (Part IX,						400.407		442.400
_	17		(penses (Part IX, column (A), penses. Add lines 13–17 (mi		'*'	no 25	. ⊢		100,167 126,514		113,122
	19		e less expenses. Subtract lin	•		116 23	" ' ├─		3,117		4,627
	1.	riovorido	S 1000 CAPOLICOS CODITACE III	0 10 110111 11110 12		•	Be	ginning of Ci		End of Y	
Net Assets or	20	Total ass	sets (Part X, line 16) .						1,476,715		1,412,802
A Ass	21	Total liab	bilities (Part X, line 26)				🗀		13,054		19,319
_			ets or fund balances Subtra	ct line 21 from lin	e 20				1,463,661		1,393,483
_	art II		ture Block								
			ury, I declare that I have examined to blete Declaration of preparer (other							ny knowledge ar	id belief, it is
		y ≥ \	Janes D X	gardin.				1	4/2	2/10	
Sig	an 2	S	nature of officer	Turko			•		ate	7'7	
'	re IT		JAMES D. G	RUBBS	GRAND	TA	LEASUR	EL			
	ö		e or print name and title								
Pa	aid ,	Print/Ty	ype preparer's name	Preparer's signat	ture		Date		Check [] if PTIN	
Preparer self-employ							loyed				
Use Only Firm's name ► Firm's EIN ►											
<u> </u>	Ne tho I		address >	or chouge chouse	(coo instrict	1000		Pho	оле по		ng [7] Na
			ss this return with the prepar uction Act Notice, see the sep			ioris)	· C-+ N-	11000	• •		es 🗌 No 990 (2018)
70	Ö	work Real	uction Act Notice, see the sep	arate mstructions	•		Cat No	112021		rum	(2010)
	19										

Form 99	0 (2018)	Page 2
Part I	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 To provide member services to 19 member Lodges. Assist other Grand Lodges in North and South America as well as individual mass and affiliated bodies. Provide guidance and education as required and promote fraternal relations world wide.	sons
2	Did the organization undertake any significant program services during the year which were not listed on the	
	-	s 🗹 No
3	If "Yes," describe these new services on Schedule O Did the organization cease conducting, or make significant changes in how it conducts, any program services?	s ☑No
	If "Yes," describe these changes on Schedule O	
	Describe the organization's program service accomplishments for each of its three largest program services, as me expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations the total expenses, and revenue, if any, for each program service reported.	
4a	(Code) (Expenses \$ including grants of \$) (Revenue \$)
	, (and a second	′
		· · · · · · · · · · · · · · · · · · ·
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	······································	
	••••••	
	······	
4c	(Code.) (Expenses \$ including grants of \$) (Revenue \$	<u> </u>
	<u> </u>	
	Other pregram and the Checkberry Cahadula (C)	
4d	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ►	



art I	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		,
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		1
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		1
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		1
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		1
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		√
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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		1
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		√
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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	√	
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		√
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
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		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		✓
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		1
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
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		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		√
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		1
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		1
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		1
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		1
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		1
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		1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
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		1

Part	Checklist of Required Schedules (continued)			
		·	Yes	No
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		√
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		✓
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		~
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		√
c	Did the organization minest any proceeds of tax-exempt boilds beyond a temporary period exception:	240		<u> </u>
	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		>
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		√
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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		✓
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		/
С	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		√
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		<u> </u>
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		1
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		1
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		√
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓
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		1
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		1
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		✓
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	√	
Part				_
	Check if Schedule O contains a response or note to any line in this Part V	•		Į Į
٠.	Fatouth a sumb assume and as Day 0 of Farms 1000. Fatour 0 of Fatour 1000 for the same and sa		Yes	No
1a b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and			<u> </u>
	reportable gaming (gambling) winnings to prize winners?	1c		1
		For	n 990	(2018)

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
	•		Yes	No
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 1			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	>	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	√	
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		✓
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		✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	_5c		1
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		İ	
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		✓
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).			
а	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		√ √
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? .	7b		'
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	70		1
d	If "Yes," indicate the number of Forms 8282 filed during the year	7c		١,
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		7
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7f		7
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		7
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		7
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		-
9	Sponsoring organizations maintaining donor advised funds.			<u> </u>
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		7
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		1
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b · N/A			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			لب
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 .			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	is the organization licensed to issue qualified health plans in more than one state?	13a		✓ ,
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
С	the organization is licensed to issue qualified health plans			
14a	Enter the amount of reserves on hand	140	-	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14a 14b		√
15		140		_
	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?	15		✓
	If "Yes," see instructions and file Form 4720, Schedule N.	.,		 -7
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		-
-	If "Yes," complete Form 4720, Schedule O.			

Form 99	90 (2018)			Page 6
Part				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S	See in:	struct	_
Sooti	Check if Schedule O contains a response or note to any line in this Part VI	• •	-	<u>. ଏ</u>
Secti	on 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.	; <u> </u>	103	1.0
	If there are material differences in voting rights among members of the governing body, or	1		Ì
	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	j		
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		1
3	Did the organization delegate control over management duties customarily performed by or under the direct	_		١,
4	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3	<u> </u>	✓
4 5	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets?	5		1
6	Did the organization become aware during the year of a significant diversion of the organization is assets?	6	1	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint		<u> </u>	
	one or more members of the governing body?	7a	✓	
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	✓	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			1
	the year by the following			.
a	The governing body?	8a	✓	<u> </u>
р	Each committee with authority to act on behalf of the governing body?	8b	1	
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.	٩		1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.)	1
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	✓	
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	✓	<u> </u>
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		V
b 120	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	100		-,-
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b	ļ ——	1
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120		+
·	describe in Schedule O how this was done	12c		V
13	Did the organization have a written whistleblower policy?	13		1
14	Did the organization have a written document retention and destruction policy?	14		1
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	 	1
b	Other officers or key employees of the organization	15b	<u> </u>	1
40-	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		1
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	102		 `
U	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			1
	organization's exempt status with respect to such arrangements?	16b		
Secti	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ Alaska			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-	T (Sec	tion !	501(c)
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
40	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 int financial statements available to the public during the tax year	erest	policy	y, and
20	State the name, address, and telephone number of the person who possesses the organization's books and re	corde	•	
	lames D Grubbs 514 F 14th Ave #6 Anchorage Alaska 99501	JU143	-	

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Compensated employees, and former such pers											
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	box,	(do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation	(E) Reportable compensation from	(F) Estimated amount of	
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations	
(1) Keith Herve Grand Master	20			1				0	0	0	
(2) John May	20		1								
Deputy Grand Master			L	✓	<u> </u>			0	0	0	
(3) Norman Gutcher	15										
Senior Grand Warden	ļ	<u> </u>		✓			_	0	0	0	
(4) Joe Damell	15	!				1		ļ			
Junior Grand Warden				1	L		<u></u>	0	0	0	
(5) James Grubbs	20			}					•		
Grand Treasurer	ļ			1			<u> </u>	0	0	0	
(6) Jerome Wasson	20	ļ] .				_			
Grand Secretary			ļ	뽇				0	0	0	
(7) Thomas Schram	20	ļ			١.				_	_	
Office Manager			_	<u> </u>	1	1	<u> </u>	13,104	0	0	
(8)	1										
(9)											
(10)											
(11)				-						···-	
(12)								-			
(13)											
(14)											

(A) Name and title .		(B) Average hours per week (list any	box,	(C) Position (do not check more that box, unless person is biofficer and a director/tri				an tee)	Reportable compensation	(E) Reportable compensation f	n from	amo	mated ount of ther	
		hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizatio (W-2/1099-N		from organ and	ensatio m the nization related rization:	1
(15)														
(16)											•			
(17)					-									
(18)	······································													
(19)				-	_	_	-				-			
(20)			·			-					_			
					_									
							<u> </u>	-						
(24)														
(25)		<u> </u>												
1b c d	Sub-total	VII, Sectio						> > >	13,104 13,104 13,104		0			0
2	Total number of individuals (including but reportable compensation from the organic	t not limited						_	·	ore than \$1		of		
								•••					Yes	No
3	Did the organization list any former of employee on line 1a? If "Yes," complete							emp	oloyee, or nigr	est compe	ensated 	3		1
4	For any individual listed on line 1a, is the organization and related organizations													
	ındıvıdual		•	•	•							4		√
5	Did any person listed on line 1a receive of for services rendered to the organization											5		1
	on B. Independent Contractors													
1	Complete this table for your five highest compensation from the organization. Repyear													ax
	(A) Name and business add	fress							(B) Description of s	ervices	C	(C) Compens	ation	
								\vdash						
2	Total number of independent contractor received more than \$100,000 of compens							o th	nose listed ab	ove) who				

Part VIII		Statement of Reve						
		Check if Schedule C	contains a resp	ponse or note to				<u> </u>
	_				(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	s 1a					
ts, Grants Amounts	b	Membership dues .	1b	54,985				
s, C Am	Ç	Fundraising events	. 1c	0				
a F	d	Related organizations	s 1d	0				
š, E	е	Government grants (cor		0				
tior sr.S	f	All other contributions, g						
tributions, Giff Other Similar		and similar amounts not inc	,	3,275				
Contr and C	g	Noncash contributions include		0				
	h	Total. Add lines 1a-1	<u>f</u>	▶	58,260			
ᇐ				Business Code				·
eve	2a							<u>. </u>
e E	b	••••						
Ž.	C							
သို့	d				 -			-
Program Service Revenue	e	All other program ser						
Ď	g	Total. Add lines 2a-2						
	3	Investment income						
	ŀ	and other similar amo		. •	45,796	45,796		
	4	Income from investmen	it of tax-exempt be	ond proceeds ▶	0	0		
	5	Royalties .		. •	0	0		
			(i) Real	(ii) Personal				
	6a	Gross rents	6,600					
	b	Less rental expenses	5,380			<u> </u>		
	С	Rental income or (loss)	1,220					
	d	Net rental income or	<u></u>	▶	1,220		1,220	
	7a	Gross amount from sales of	(i) Securities	(ii) Other			1	
		assets other than inventory	0	0		ŀ		
	b	Less: cost or other basis	0	o				
	С	and sales expenses Gain or (loss)	0	-				
	ď	Net gain or (loss) .	L	. •	0			
4								
her Revenue	8a	Gross income from fu	undraising					
Š		events (not including \$	0				Ì	
œ		of contributions report						
Ę	١.	See Part IV, line 18 .	_	2,670				
ō	b	Less: direct expenses			2,670			
		Net income or (loss) f Gross income from ga		events .	2,070			
	"	See Part IV, line 19	arming activities	o				
	ь	Less direct expenses		0		}		
	Į.	Net income or (loss) f		vities . ▶	0			
		Gross sales of in						
	İ	returns and allowance	es a	3,015		į	i	
	b	Less: cost of goods s	sold . b	987				
	С	Net income or (loss) f		entory▶	2,028			
		Miscellaneous P	Revenue	Business Code				
	11a				19,266		-	19,266
	ь	George Washington Me	monal		1,761			1,761
	C	A () - ()			0			
	d				21 027			
	12	Total. Add lines 11a- Total revenue. See ii		▶	21,027 131,001	45,796	1,220	21,027
		. J.u evenue. Jee II		<u> </u>	131,001	73,730	1,220	21,027

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Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (D) Fundraising expenses (B) Program service Do not include amounts reported on lines 6b, 7b, (A) Total expenses Management and general expenses 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 2 individuals. See Part IV, line 22 2,598 2,598 Grants and other assistance to foreign 3 organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 n 0 Benefits paid to or for members . Compensation of current officers, directors, trustees, and key employees . . 0 13,104 13,104 0 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 0 0 n 7 Other salaries and wages 0 n n Ó Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 0 n 0 0 9 Other employee benefits Λ 0 0 10 Payroll taxes 1,175 0 1,175 0 Fees for services (non-employees): 11 Management . 0 0 b Legal . . 0 0 9,000 0 9,000 0 C Accounting Lobbying 0 0 Professional fundraising services See Part IV, line 17 0 ō Investment management fees 14,747 14,747 0 Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . 0 12 Advertising and promotion 0 0 0 13 Office expenses . 2.945 2.945 0 1.060 1.060 0 14 information technology O 0 15 Rovalties 0 0 16 Occupancy 5,400 0 5,400 0 28,059 28,059 ō 17 Travel . 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 0 0 31,479 31,479 ō 19 Conferences, conventions, and meetings 0 20 Interest 0 0 Payments to affiliates 0 0 0 21 0 Depreciation, depletion, and amortization . 613 0 613 0 22 7.687 23 O 7,687 0 Other expenses Itemize expenses not covered 24 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.) Research & Education 1.316 1,316 0 Equipment & Rental 0 492 492 0 b Equipment & Rental
George Washington Memonal
Dues & Subscriptions, GM Expenses 0 1,761 1,761 0 5,058 5,058 0 0 e All other expenses Bank Fees Etc 3,501 3,501 0 0 Total functional expenses. Add lines 1 through 24e 129,999 93,016 36,983 0 25 Joint costs. Complete this line only if the 26 organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here

☐ if following SOP 98-2 (ASC 958-720)

P	art X	Balance Sheet			_
		Check if Schedule O contains a response or note to any line in this Par	tX		
			(A) Beginning of year		(B) End of year
•	1	Cash-non-interest-bearing	18,304	1	26,282
	2	Savings and temporary cash investments	0	2	0
	3	Pledges and grants receivable, net	0	-	0
	4	Accounts receivable, net	765	4	691
	٠ 5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees		1 [
		Complete Part II of Schedule L	0	5	0
	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 sponsoning organizations of section 501(c)(9) voluntary employees' beneficiary			
र		organizations (see instructions). Complete Part II of Schedule L	0	6	0
Assets	7	Notes and loans receivable, net	0		0
As	8	Inventories for sale or use	11,643	8	19,299
	9	Prepaid expenses and deferred charges	0		0
	10a	Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D 10a 33,857	<u> </u>		
	ь	Less. accumulated depreciation . 10b 1,550	10,725	100	12,307
	11	Investments—publicly traded securities	1,447,686	_	1,354,223
	12	Investments—other securities See Part IV, line 11	1,447,000		1,334,223
	13	Investments—program-related See Part IV, line 11	0		0
	14	Intangible assets	0	14	0
	15	Other assets See Part IV, line 11	. 0		0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,489,123		1,412,802
Liabilities	17	Accounts payable and accrued expenses	13,054		19,319
	18	Grants payable	15,034	-	19,519
	19	Deferred revenue	0	1.01	0
	20	Tax-exempt bond liabilities		·•	
	21	· · · · · · · · · · · · · · · · · · ·	0		0
	22	Escrow or custodial account liability Complete Part IV of Schedule D .	···	21	U
	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			
<u>.</u>	00	· · · · · · · · · · · · · · · · · · ·	0		0
_	23	Secured mortgages and notes payable to unrelated third parties .	0	 -+	0
	24	Unsecured notes and loans payable to unrelated third parties		24	0
	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			
	ne		0	25	10.010
	26	Total liabilities. Add lines 17 through 25	13,054	26	19,319
lances		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.			
	27	Unrestricted net assets	1,476,069	27	1,393,483
Ba	28	Temporarily restricted net assets	0	28	0
ᅙ	29	Permanently restricted net assets	0	29	0
Net Assets or Fund Balance		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	0	30	0
	31	Paid-in or capital surplus, or land, building, or equipment fund	0		0
	32	Retained earnings, endowment, accumulated income, or other funds	0		0
é	33	Total net assets or fund balances	1,476,069		1,393,483
_	34	Total liabilities and net assets/fund balances	1,489,123		1,412,802

Page 12				
<u> L</u>				
131,001				
129,999				
1,002				
1,476,069				
(98,335)				
0				
14,747				
0				
0				

1,393,483

Form **990** (2018)

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Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line Part XII Financial Statements and Reporting

Investment expenses

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI Total revenue (must equal Part VIII, column (A), line 12)

Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . .

Total expenses (must equal Part IX, column (A), line 25) . . .

Revenue less expenses. Subtract line 2 from line 1

Donated services and use of facilities

Other changes in net assets or fund balances (explain in Schedule O) .

Prior period adjustments

Form 990 (2018)

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	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		✓
	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 Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b		V
,	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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	2c		✓
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		<i></i>
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		y -

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ.

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

Name of the organization **Employer identification number** Most Worshipful Grand Lodge of F&AM of Alaska 92-0082478 Part III (1) Provide day to day services to 19 member lodges and other Grand Lodges in North and South America as well as individual masons and affiliated bodies. Provide council, guidance and education as required and promote fraternal relations Part V 3(a) Cell Phone Tower Lease Part V 14(b) We did not receive any indoor tanning services Part VI 1(a) There are no differences in officers voting rights, they all have one vote Part VI 6 All members of the MW Grand Lodge of F&AM of Alaska are members of this organization Part VI 7 (a) Board Members are elected by the members of the Grand Lodge Part VI 7(b) Members are informed of the boards decisions and are voted on at the annual meeting Part VI 11(b) Copies of the Tax Returns are kept in the organizations office for review up request Part VI 19 All copies, documents are available for review in the office upon request Part VII No officers are compensated for their duties, they are volunteers