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Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2018

Open to Public Inspection

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.

A For the 2019 calendar year, or tax year beginning 11-01-2018 , and ending 10-31-2019

B Check if applicable

Address change

Name change

Initial return

Final return/terminated

Amended return

Application pending

C Name of organization

GRAND LODGE OF FREE AND ACCEPTED MASONS OF CALIFORNIA

Doing business as

Number and street (or P O box if mail is not delivered to street address)

Room/suite

1111 CALIFORNIA ST

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

SAN FRANCISCO, CA 94108

D Employer identification number

94-0487790

E Telephone number

(415) 776-7000

G Gross receipts \$ 13,855,613

F Name and address of principal officer

STUART A WRIGHT

1111 CALIFORNIA ST

SAN FRANCISCO, CA 94108

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

0214

I Tax-exempt status

501(c)(3)

501(c)(10)

(insert no)

4947(a)(1) or

527

J Website:

HTTP //WWW.FREEMASON.ORG

K Form of organization

Corporation

Trust

Association

Other

FRATERNAL ORGANIZATION

L Year of formation

1936

M State of legal domicile

CA

Part I

Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities

THE MISSION OF THE MASONS OF CA IS TO FOSTER PERSONAL GROWTH AND IMPROVE THE LIVES OF OTHERS

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)

4 Number of independent voting members of the governing body (Part VI, line 1b)

5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)

6 Total number of volunteers (estimate if necessary)

7a Total unrelated business revenue from Part VIII, column (C), line 12

7b Net unrelated business taxable income from Form 990-T, line 34

Revenue

8 Contributions and grants (Part VIII, line 1h)

9 Program service revenue (Part VIII, line 2g)

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)

14 Benefits paid to or for members (Part IX, column (A), line 4)

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)

16a Professional fundraising fees (Part IX, column (A), line 11e)

b Total fundraising expenses (Part IX, column (D), line 25)

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)

18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)

19 Revenue less expenses Subtract line 18 from line 12

Net Assets or Fund Balances

20 Total assets (Part X, line 16)

21 Total liabilities (Part X, line 26)

22 Net assets or fund balances Subtract line 21 from line 20

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

Signature of officer

2020-08-13

Date

THOMAS BOYER CFO

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name

Preparer's signature

Date

2020-08-13

Check if self-employed

PTIN

P00366884

Firm's name

MOSS ADAMS LLP

Firm's EIN

91-0189318

Firm's address

3121 W MARCH LANE SUITE 200

STOCKTON, CA 95219

Phone no

(209) 955-6100

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

Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2018)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒**1** Briefly describe the organization's mission

A MAN WHO STRIVES TO IMPROVE HIMSELF CAN ALSO IMPROVE HIS COMMUNITY AND THE WORLD AT LARGE THIS IS THE MISSION OF THE MASONS OF CALIFORNIA THROUGH MASONIC PRINCIPLES AND TRADITION, WE FOSTER PERSONAL GROWTH AND IMPROVE THE LIVES OF OTHERS MASONRY IN CALIFORNIA IS A RELEVANT AND RESPECTED ORGANIZATION - BOTH INSIDE AND OUTSIDE OF THE FRATERNITY WE MAKE A PROFOUND DIFFERENCE IN THE LIVES OF OUR MEMBERS AND IN CALIFORNIA COMMUNITIES WE ARE ENGAGED IN THE WORLDWIDE PRINCIPLES AND FELLOWSHIP OF FREEMASONRY

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 \$ including grants of \$) (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 ▶

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 Yes	
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 Yes	
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	No
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 Yes	
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 Yes	
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	No
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	No

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? <i>If "Yes," complete Schedule J</i>	23	Yes	
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part II</i>	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? <i>If "Yes," complete Schedule L, Part III</i>	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? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	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? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	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? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	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? <i>If "Yes," complete Schedule R, Part VI</i>	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 ComplianceCheck 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	56	
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	82			
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	Yes	
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		No
b If "Yes," did the organization notify the donor of the value of the goods or services provided?				7b		
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?						
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		
	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		
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?		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?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?	Yes	
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?	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	The governing body?	Yes	
b	Each committee with authority to act on behalf of the governing body?	Yes	
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		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?	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?	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	Yes	
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	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	Yes	
13	Did the organization have a written whistleblower policy?	Yes	
14	Did the organization have a written document retention and destruction policy?	Yes	
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	Yes	
b	Other officers or key employees of the organization	Yes	
	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?		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?		

Section C. Disclosure

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

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.
 ► MARIBEL PASAMIC 1111 CALIFORNIA ST SAN FRANCISCO, CA 94108 (415) 292-9126

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			
(1) STUART A WRIGHT GRAND MASTER	1 00 0 00	X		X				0	0	0
(2) JOHN E TRAUNER DEPUTY GRAND MASTER	1 00 1 00	X						0	0	0
(3) ARTHUR H WEISS SENIOR GRAND WARDEN	1 00 4 00	X						0	0	0
(4) JEFFREY M WILKINS JUNIOR GRAND WARDEN	1 00 2 00	X						0	0	0
(5) ARTHUR L SALAZAR JR GRAND TREASURER	1 00 5 00			X				0	0	0
(6) ALLAN L CASALOU GRAND SECRETARY	6 70 33 30			X				296,357	0	39,125
(7) THOMAS J BOYER VP & CHIEF FINANCIAL OFFICER	12 70 27 30			X				273,015	0	52,565
(8) ANDREW D CAMERON GENERAL COUNSEL	2 20 37 80			X				228,248	0	56,449
(9) DOUGLAS ISMAIL CHIEF PHILANTHROPY OFFICER	1 00 40 00			X				233,563	0	32,204
(10) ANDREW R UEHLING CHIEF HUMAN RESOURCES OFFI	2 30 37 70			X				192,077	0	22,419
(11) BRIAN FIELD VP OF TECHNOLOGY	1 80 38 20			X				173,959	0	52,476
(12) KHALIL SWEIDY DIRECTOR OF FINANCIAL PLAN	40 00					X		194,980	0	22,723
(13) BRENT MARKWOOD DIRECTOR OF SOFTWARE DEVEL	40 00					X		187,555	0	27,779
(14) EMILY LIMON VP COMMUNICATIONS	40 00					X		169,315	0	36,170
(15) MARIBEL PASAMIC CONTROLLER	40 00					X		155,776	0	34,808
(16) CANDLER M GIBSON DIR OF MASONIC PHILANTROPY	40 00					X		145,060	0	35,851

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

[illegible]

1b Sub-Total			
c Total from continuation sheets to Part VII, Section A			
d Total (add lines 1b and 1c)	2,249,905	0	412,569

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 ▶ 24

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	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? <i>If "Yes," complete Schedule J for such individual</i>	4 Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	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
MOSS ADAM LLP P O BOX 101822 PASADENA, CA 91189	AUDIT SERVICES	181,182
DIGITEK P O BOX 880430 SAN FRANCISCO, CA 94188	PRINTING SERVICES	178,478
QUAD GRAPHICS INC P O BOX 644840 PITTSBURG, PA 15264	PRINTING SERVICES	124,683
CHEN DESIGN ASSOCIATES 1753 BROADWAY OAKLAND, CA 94612	DESIGN SERVICES	106,750

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 ► 4

Part VIII		Statement of Revenue			
Check if Schedule O contains a response or note to any line in this Part VIII ☐					
		(A)	(B)	(C)	(D)
		Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a			
	b Membership dues	1b			
	c Fundraising events	1c			
	d Related organizations	1d	130,516		
	e Government grants (contributions)	1e			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	12,049		
	g Noncash contributions included in lines 1a - 1f \$				
	h Total. Add lines 1a-1f		142,565		
Program Service Revenue	2a MEMBERSHIP DUES	Business Code			
		900099	2,204,650	2,204,650	
	b WARDEN'S RETREAT	900099	284,379	284,379	
	c SECRETARIES RETREAT	900099	128,890	128,890	
	d				
	e				
	f All other program service revenue				
	g Total. Add lines 2a-2f		2,617,919		
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		517,549		517,549
	4 Income from investment of tax-exempt bond proceeds				
	5 Royalties				
	6a Gross rents	(i) Real	(ii) Personal		
	b Less rental expenses				
	c Rental income or (loss)				
	d Net rental income or (loss)				
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other		
	b Less cost or other basis and sales expenses				
	c Gain or (loss)				
	d Net gain or (loss)			152,857	152,857
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18	a			
	b Less direct expenses	b			
	c Net income or (loss) from fundraising events				
	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	10,289		
	b Less cost of goods sold	b	10,289		
	c Net income or (loss) from sales of inventory		0		
Miscellaneous Revenue		Business Code			
11a REIMB TO MANAGE INVESTMENTS	900099	398,060			398,060
b MISCELLANEOUS INCOME	900099	14,081			14,081
c					
d All other revenue					
e Total. Add lines 11a-11d		412,141			
12 Total revenue. See Instructions		3,843,031	2,617,919	0	1,082,547

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 ☐

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	54,978			
2 Grants and other assistance to domestic individuals. See Part IV, line 22.	434			
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.	201,026			
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.	992,386			
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	62,879			
9 Other employee benefits.	136,953			
10 Payroll taxes.	76,539			
11 Fees for services (non-employees):				
a Management.				
b Legal.	5,168			
c Accounting.	29,535			
d Lobbying.				
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees.	25,493			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	188,058			
12 Advertising and promotion.	153,305			
13 Office expenses.	83,361			
14 Information technology.	117,561			
15 Royalties.				
16 Occupancy.	41,957			
17 Travel.	37,111			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.	511,509			
20 Interest.				
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	19,246			
23 Insurance.	58,441			
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 SUPPORT AND DEVELOPMENT	627,854			
b OFFICER & INSPECTOR EXP	331,592			
c HALL SUBSIDY	16,622			
d REGALIA	2,737			
e All other expenses	14,436			
25 Total functional expenses. Add lines 1 through 24e.	3,789,181			
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 SheetCheck 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	948,613	1	484,517
	2 Savings and temporary cash investments	4,098,887	2	975,340
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	69,179	4	121,676
	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	665,115	7	665,115
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	705,630	9	474,118
	10a Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D	10a 2,620,729		
	b Less: accumulated depreciation	10b 2,321,237	331,765	10c 299,492
	11 Investments—publicly traded securities	9,631,211	11	18,503,301
	12 Investments—other securities. See Part IV, line 11	939,580	12	791,058
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	468,349	15	421,211
16 Total assets. Add lines 1 through 15 (must equal line 34)	17,858,329	16	22,735,828	
Liabilities	17 Accounts payable and accrued expenses	1,551,868	17	1,740,539
	18 Grants payable		18	
	19 Deferred revenue	2,095,161	19	2,104,922
	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	8,241,771	25	12,545,949
	26 Total liabilities. Add lines 17 through 25	11,888,800	26	16,391,410
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	5,743,964	27	6,119,327
	28 Temporarily restricted net assets	225,565	28	225,091
	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		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	5,969,529	33	6,344,418	
34 Total liabilities and net assets/fund balances	17,858,329	34	22,735,828	

Part XI Reconciliation of Net AssetsCheck 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	3,843,031
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,789,181
3	Revenue less expenses Subtract line 2 from line 1	3	53,850
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	5,969,529
5	Net unrealized gains (losses) on investments	5	321,039
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	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	6,344,418

Part XII Financial Statements and ReportingCheck 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? 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		No
b Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis	Yes	
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	Yes	
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?		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		

Additional Data

Software ID:

Software Version:

EIN: 94-0487790

Name: GRAND LODGE OF FREE AND ACCEPTED MASONS
OF CALIFORNIA

Form 990 (2018)

Form 990, Part III, Line 4a:

CURRENTLY, THERE ARE MORE THAN 330 LODGES THROUGHOUT CALIFORNIA WITH MORE THAN 50,000 MEMBERS. THE GRAND LODGE PROVIDES PROGRAMS, EDUCATION, TRAINING AND SUPPORT SERVICES TO THE LODGES, THEIR OFFICERS AND INDIVIDUAL MASONS. THESE SERVICES INCLUDE INSURANCE COVERAGE FOR LODGES, CERTIFICATION PROGRAMS FOR LODGE OFFICERS, MASONIC EDUCATION FOR MEMBERS, AND NUMEROUS OTHER SERVICES AND EDUCATION OPPORTUNITIES. THE GRAND LODGE ALSO PROVIDES DIRECT MONETARY SUPPORT IN THE FORM OF GRANTS TO AFFILIATED YOUTH ORGANIZATIONS, INCLUDING DEMOLAY, JOB'S DAUGHTERS AND RAINBOW GIRLS AND TO OTHER MASONIC ORGANIZATIONS AND INDIVIDUAL MASONS IN TIME OF NEED. FINALLY, THE GRAND LODGE PROVIDES SUPPORT, EDUCATION, AND ADMINISTRATIVE SERVICES TO ITS RELATED ENTITIES.

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
GRAND LODGE OF FREE AND ACCEPTED MASONS
OF CALIFORNIA

Employer identification number
94-0487790

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

► \$ 0

(ii) Assets included in Form 990, Part X

► \$ 28,368

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

► \$ 0

b Assets included in Form 990, Part X

► \$ 0

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

USED IN LODGE CEREMONIES

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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided 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	2,389,398	2,435,953	2,171,315	2,200,564	2,283,106
b	Contributions					
c	Net investment earnings, gains, and losses	230,125	-4,648	363,841	69,146	10,548
d	Grants or scholarships					
e	Other expenditures for facilities and programs	104,356	41,907	99,203	98,395	93,090
f	Administrative expenses					
g	End of year balance	2,515,167	2,389,398	2,435,953	2,171,315	2,200,564

2

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

a

Board designated or quasi-endowment

100 000 %

b

Permanent endowment

0 %

c

Temporarily restricted endowment

0 %

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

(i)

unrelated organizations

3a(i)

No

(ii)

related organizations

3a(ii)

No

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			
c	Leasehold improvements	209,993	173,897	36,096
d	Equipment	2,157,825	2,006,541	151,284
e	Other	252,911	140,799	112,112
Total.	Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))			299,492

Part VII

Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

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

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	
DUE TO GEORGE WASHINGTON MEMORIAL FUND	15,300
ADVANCED DEPOSITS	42,414
ASSETS HELD FOR LODGE LIFE MEMBERSHIP	12,488,235
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	12,545,949

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
See Additional Data Table	

Part XIII **Supplemental Information** *(continued)*

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 94-0487790
Name: GRAND LODGE OF FREE AND ACCEPTED MASONS
OF CALIFORNIA

Supplemental Information

Return Reference	Explanation
PART III, LINE 4	GRAND MASTER JEWEL AND ALTAR JEWELS

Supplemental Information

Return Reference	Explanation
PART V, LINE 4	TO SUPPORT MASONIC FRATERNAL ACTIVITIES OF CALIFORNIA MASONS

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
GRAND LODGE OF FREE AND ACCEPTED MASONS
OF CALIFORNIA

Employer identification number
94-0487790

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) GEORGE WASHINGTON NATIONAL MASONIC MEMORIAL ASSOCIATION 101 CALLAHAN DRIVE ALEXANDRIA, VA 22301	54-0545202	501(C)(3)	42,978				LODGE PER CAPITA

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

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)					
(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
PART I, LINE 2	GRANTS ARE MONITORED AND APPROVED BY THE APPROPRIATE GRAND LODGE COMMITTEE AND ARE PROPERLY DOCUMENTED GRANT TO GEORGE WASHINGTON MASONIC NATIONAL MEMORIAL IS BASED ON THE \$1 PER CAPITA ASSESSMENT AS APPROVED BY THE GRAND LODGE EXECUTIVE COMMITTEE AND ITS MEMBERS

Schedule J (Form 990)	Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990. ▶ Go to <u>www.irs.gov/Form990</u> for instructions and the latest information.	OMB No 1545-0047 2018 Open to Public Inspection
	Department of the Treasury Internal Revenue Service	
	Name of the organization GRAND LODGE OF FREE AND ACCEPTED MASONS OF CALIFORNIA Employer identification number 94-0487790	

Part I Questions Regarding Compensation		Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
☐ First-class or charter travel ☐ Travel for companions ☐ Tax indemnification and gross-up payments ☐ Discretionary spending account ☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ Personal services (e g , maid, chauffeur, chef)			
b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
☒ Compensation committee ☒ Independent compensation consultant ☒ Form 990 of other organizations ☐ Written employment contract ☒ Compensation survey or study ☒ Approval by the board or compensation committee			
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization			
a Receive a severance payment or change-of-control payment?	4a		No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		No
c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	4c		No
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a The organization?	5a		
b Any related organization? If "Yes," on line 5a or 5b, describe in Part III	5b		
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a The organization?	6a		
b Any related organization? If "Yes," on line 6a or 6b, describe in Part III	6b		
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

See Additional Data Table**Schedule J (Form 990) 2018**

Part III **Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Additional Data

Software ID:
Software Version:
EIN: 94-0487790
Name: GRAND LODGE OF FREE AND ACCEPTED MASONS
OF CALIFORNIA

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
ALLAN L CASALOU GRAND SECRETARY	(i)	292,302	0	4,055	21,253	17,872	335,482	0
	(ii)	0	0	0	0	0	0	0
THOMAS J BOYER VP & CHIEF FINANCIAL OFFICER	(i)	267,015	0	6,000	27,502	25,063	325,580	0
	(ii)	0	0	0	0	0	0	0
ANDREW D CAMERON GENERAL COUNSEL	(i)	222,248	0	6,000	18,700	37,749	284,697	0
	(ii)	0	0	0	0	0	0	0
DOUGLAS ISMAIL CHIEF PHILANTHROPY OFFICER	(i)	227,563	0	6,000	19,266	12,938	265,767	0
	(ii)	0	0	0	0	0	0	0
ANDREW R UEHLING CHIEF HUMAN RESOURCES OFFI	(i)	192,077	0	0	13,458	8,961	214,496	0
	(ii)	0	0	0	0	0	0	0
BRIAN FIELD VP OF TECHNOLOGY	(i)	173,959	0	0	14,727	37,749	226,435	0
	(ii)	0	0	0	0	0	0	0
KHALIL SWEIDY DIRECTOR OF FINANCIAL PLAN	(i)	194,980	0	0	13,762	8,961	217,703	0
	(ii)	0	0	0	0	0	0	0
BRENT MARKWOOD DIRECTOR OF SOFTWARE DEVEL	(i)	187,555	0	0	13,193	14,586	215,334	0
	(ii)	0	0	0	0	0	0	0
EMILY LIMON VP COMMUNICATIONS	(i)	169,315	0	0	12,092	24,078	205,485	0
	(ii)	0	0	0	0	0	0	0
MARIBEL PASAMIC CONTROLLER	(i)	155,776	0	0	11,278	23,530	190,584	0
	(ii)	0	0	0	0	0	0	0
CANDLER M GIBSON DIR OF MASONIC PHILANTROPY	(i)	145,060	0	0	10,709	25,142	180,911	0
	(ii)	0	0	0	0	0	0	0

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

GRAND LODGE OF FREE AND ACCEPTED MASONS
OF CALIFORNIA

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**

Employer identification number

94-0487790

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	VOTING MEMBERS INCLUDE ELECTIVE AND APPOINTIVE GRAND LODGE OFFICERS EXCEPT THE GRAND TILER AND THE ASSISTANT GRAND TILER, PAST GRAND OFFICERS, MASTERS, SENIOR WARDENS AND JUNIOR WARDENS OF CHARTERED LODGES, AND PAST MASTERS COLLECTIVELY OF EACH CHARTERED LODGE MEMBERS OF GRAND LODGE SHALL MEET IN COMMUNICATIONS TO CONDUCT WHATEVER BUSINESS MAY PROPERLY COME BEFORE THEM

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	ELECTED OFFICERS SHALL BE ELECTED BY WRITTEN BALLOT AS THE FINAL ITEM OF BUSINESS BEFORE THE INSTALLATION OF SAID OFFICERS AT EACH ANNUAL COMMUNICATION

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B	MEMBERS OF GRAND LODGE SHALL MEET IN ANNUAL COMMUNICATIONS TO CONDUCT WHATEVER BUSINESS MAY PROPERLY COME BEFORE THEM THE OFFICERS OR REPRESENTATIVES OF AT LEAST 20% OF THE LODGES CHARTERED AND CONSTITUTED BY THIS GRAND LODGE SHALL BE PRESENT IN ORDER TO TRANSACT ANY BUSINESS IN GRAND LODGE AT AN ANNUAL OR SPECIAL COMMUNICATION EXCEPT AS PROVIDED IN SECTION 50 000 OF THE CONSTITUTION REGARDING THE VOTE REQUIRED TO AMEND THE CONSTITUTION OF GRAND LODGE, IN SECTION 402 020 REGARDING THE VOTE REQUIRED TO AMEND THE RITUAL OR IN SECTION 1500 000 REGARDING THE VOTE REQUIRED TO AMEND THESE ORDINANCES, THE TRANSACTION OF BUSINESS SHALL BE DECIDED BY A MAJORITY OF THE VOTES CAST PROPOSED AMENDMENTS TO THE CONSTITUTION OF THE GRAND LODGE OF CALIFORNIA MUST BE ADOPTED AT AN ANNUAL OR SPECIAL COMMUNICATION OF GRAND LODGE BY FIVE-SIXTHS OF THE VOTES CAST

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE ACCOUNTING SENIOR MANAGER PREPARE THE FORM 990 SUPPORTING SCHEDULES/DATA, THEN THE CONTROLLER REVIEWS THE SCHEDULES/DATA AND SUBMITS TO THE TAX CONSULTANT FOR PREPARATION OF THE FORM 990 THE TAX CONSULTANT SUBMITS THE COMPLETED 990 TO THE CONTROLLER AND CFO FOR REVIEW AND APPROVAL CFO AND TAX CONSULTANT PRESENTED THE FORM 990 TO THE AUDIT COMMITTEE FOR FINAL APPROVAL THE FORM IS THEN POSTED TO AN INTERNAL WEBSITE ACCESSIBLE TO ALL VOTING MEMBERS OF THE BOARD ONCE APPROVED, THE CFO SIGNS THE FORM 990 AND FILES WITH THE IRS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	AS REQUIRED, ANNUALLY, EACH MEMBER OF THE EXECUTIVE COMMITTEE OF THE GRAND LODGE SIGNS A CONFLICT OF INTEREST DISCLOSURE STATEMENT IN THIS STATEMENT, THE EXECUTIVE COMMITTEE AND MEMBERS OF OTHER GRAND LODGE COMMITTEES DISCLOSE KNOWN, EXISTING, POTENTIAL AND POSSIBLE CONFLICTS OF INTEREST IF NO SUCH INTERESTS OR ACTIVITIES EXIST, THE PARTY WRITES THE WORD "NONE" IN THE SPACE PROVIDED IN ADDITION, THESE STATEMENTS ARE UPDATED WHEN AN INTERESTED PARTY SUBSEQUENTLY BECOMES A MATTER OF EXECUTIVE COMMITTEE ACTION THE INTERESTED PARTY DISCLOSES THE CIRCUMSTANCES TO THE GRAND MASTER IN THE EVENT THE INTERESTED PARTY IN QUESTION IS THE GRAND MASTER, THE POTENTIAL CONFLICT IS DISCLOSED TO THE FULL EXECUTIVE COMMITTEE THE CONFLICT OF INTEREST DISCLOSURE STATEMENT FOR EXECUTIVE COMMITTEE MEMBERS AND OTHER COMMITTEE MEMBERS ARE SUBMITTED TO THE GRAND MASTER FOR REVIEW THE PLAN FOR MITIGATION OF ANY CONFLICT OF AN EXECUTIVE COMMITTEE MEMBER IS PRESENTED BY THE GRAND MASTER TO THE EXECUTIVE COMMITTEE FOLLOWING THEIR REVIEW, ALL CONFLICT OF INTEREST DISCLOSURE STATEMENTS ARE KEPT ON FILE WITH THE GRAND SECRETARY

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	BENCHMARKING IS COMPLETED ON ALL POSITIONS BY AN INDEPENDENT THIRD PARTY COMPENSATION CONSULTANT REVIEW IS DONE BY THE INDEPENDENT VOLUNTEER LEADERSHIP BOARD OF TRUSTEES AND APPROVED BY THE PRESIDENT OF THE BOARD SALARY BENCHMARKING IS CONDUCTED BY AN INDEPENDENT THIRD PARTY COMPENSATION CONSULTANT UTILIZING NUMEROUS PUBLISHED SALARY SURVEYS FOR EACH POSITION BASED ON TITLE AND JOB DESCRIPTION

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE AUDITED FINANCIAL STATEMENTS, CONFLICT OF INTEREST POLICY, AND GOVERNING/ORGANIZING DOCUMENTS ARE AVAILABLE TO THE PUBLIC AT THE CORPORATE OFFICE

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.
▶ 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
GRAND LODGE OF FREE AND ACCEPTED MASONS
OF CALIFORNIA

Employer identification number
94-0487790

Part I

Identification of Disregarded Entities

Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II

Identification of Related Tax-Exempt Organizations

Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

See Additional Data Table

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No
(1) NOB HILL MASONIC CENTER INC 1111 CALIFORNIA STREET SAN FRANCISCO, CA 94108 61-1511651	OPERATION OF MASONIC TEMPLE PARKING FACILITY	CA	GRAND LODGE OF THE FREE & ACCEPTED MASONS OF CALIFORNIA	C	2,246,663	2,029,904	100 000 %	Yes	

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		Yes	No
a	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		No
b	Gift, grant, or capital contribution to related organization(s)	1b		No
c	Gift, grant, or capital contribution from related organization(s)	1c	Yes	
d	Loans or loan guarantees to or for related organization(s)	1d	Yes	
e	Loans or loan guarantees by related organization(s)	1e		No
f	Dividends from related organization(s)	1f		No
g	Sale of assets to related organization(s)	1g		No
h	Purchase of assets from related organization(s)	1h		No
i	Exchange of assets with related organization(s)	1i		No
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k	Lease of facilities, equipment, or other assets from related organization(s)	1k	Yes	
l	Performance of services or membership or fundraising solicitations for related organization(s)	1l	Yes	
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No
o	Sharing of paid employees with related organization(s)	1o	Yes	
p	Reimbursement paid to related organization(s) for expenses	1p	Yes	
q	Reimbursement paid by related organization(s) for expenses	1q	Yes	
r	Other transfer of cash or property to related organization(s)	1r		No
s	Other transfer of cash or property from related organization(s)	1s		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

See Additional Data Table

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

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

[illegible]

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 94-0487790
Name: GRAND LODGE OF FREE AND ACCEPTED MASONS
OF CALIFORNIA

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c) (3))	(f) Direct controlling entity	(g) Section 512 (b)(13) controlled entity?	
						Yes	No
1111 CALIFORNIA STREET SAN FRANCISCO, CA 94108 94-1156564	CONTINUING CARE AND RETIREMENT ACTIVITY	CA	501(C)(3)	7	GRAND LODGE OF THE FREE & ACCEPTED MASONS OF CALIFORNIA	Yes	
1111 CALIFORNIA STREET SAN FRANCISCO, CA 94108 94-1266937	SUPPORTING ORGANIZATION	CA	501(C)(3)	12-II	GRAND LODGE OF THE FREE & ACCEPTED MASONS OF CALIFORNIA	Yes	
1111 CALIFORNIA STREET SAN FRANCISCO, CA 94108 23-7013074	A CHARITABLE FOUNDATION SUPPORTING EDUCATIONAL AND COMMUNITY-BASED PROGRAMS	CA	501(C)(3)	7	GRAND LODGE OF THE FREE & ACCEPTED MASONS OF CALIFORNIA	Yes	
34400 MISSION BLVD UNION CITY, CA 94587 20-4688615	CONTINUING CARE AND RETIREMENT ACTIVITY	CA	501(C)(3)	9	MASONIC HOMES OF CALIFORNIA	Yes	
1111 CALIFORNIA STREET SAN FRANCISCO, CA 94108 68-0073350	HALL ASSOCIATION	CA	501(C)(2)		GRAND LODGE OF THE FREE & ACCEPTED MASONS OF CALIFORNIA	Yes	
1111 CALIFORNIA STREET SAN FRANCISCO, CA 94108 68-0452812	HALL ASSOCIATION	CA	501(C)(2)		GRAND LODGE OF THE FREE & ACCEPTED MASONS OF CALIFORNIA	Yes	
1111 CALIFORNIA STREET SAN FRANCISCO, CA 94108 95-0980442	HALL ASSOCIATION	CA	501(C)(2)		GRAND LODGE OF THE FREE & ACCEPTED MASONS OF CALIFORNIA	Yes	
24740 SUNNYMEAD BLVD MORENO VALLEY, CA 92553 51-0154987	HALL ASSOCIATION	CA	501(C)(2)		GRAND LODGE OF THE FREE & ACCEPTED MASONS OF CALIFORNIA	Yes	
1111 CALIFORNIA STREET SAN FRANCISCO, CA 94108	HALL ASSOCIATION	CA	501(C)(2)		GRAND LODGE OF THE FREE & ACCEPTED MASONS OF CALIFORNIA	Yes	

Form 990, Schedule R, Part V - Transactions With Related Organizations

(a) Name of related organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
(1) CALIFORNIA MASONIC FOUNDATION	C	130,516	BOOK/ACTUAL VALUE
(1) CALIFORNIA MASONIC MEMORIAL TEMPLE	D	665,115	BOOK/ACTUAL VALUE
(2) CALIFORNIA MASONIC MEMORIAL TEMPLE	K	62,657	BOOK/ACTUAL VALUE
(3) CALIFORNIA MASONIC HOMES	L	555,457	BOOK/ACTUAL VALUE
(4) CALIFORNIA MASONIC FOUNDATION	L	374,403	BOOK/ACTUAL VALUE
(5) CALIFORNIA MASONIC HOMES	O	5,270,273	BOOK/ACTUAL VALUE
(6) ACACIA CREEK A MASONIC SENIOR LIVING COMMUNITY AT UNION CITY	O	882,399	BOOK/ACTUAL VALUE
(7) CALIFORNIA MASONIC FOUNDATION	O	361,804	BOOK/ACTUAL VALUE
(8) ACACIA CREEK A MASONIC SENIOR LIVING COMMUNITY AT UNION CITY	Q	190,418	BOOK/ACTUAL VALUE
(9) CALIFORNIA MASONIC HOMES	Q	1,212,270	BOOK/ACTUAL VALUE
(10) CALIFORNIA MASONIC MEMORIAL TEMPLE	O	394,733	BOOK/ACTUAL VALUE
(11) NOB HILL MASONIC CENTER	O	237,111	BOOK/ACTUAL VALUE