ANNUAL FINANCIAL STATEMENT

OF

________________________________ Lodge No. __________

Located at ____
No. Street Town –Village – City Zip Code

For The Year

2011

TO THE

GRAND LODGE FREE AND ACCEPTED MASONS OF WISCONSIN

Received by the Grand Secretary on: ________________________

____
Grand Secretary

This report should be sent to the Grand Secretary before February 15th, otherwise a fine of two dollars per day for each day's delay will be charged.

Chapter 52.03 Masonic Code of Wisconsin

Dear Brother Secretary:

Your cooperation in completing these forms promptly and accurately will be greatly appreciated. The Annual Financial Statement is necessary for us to complete the Group 990 Tax Return. Please complete these forms and schedules returning them on or before February 15, 2012.

GENERAL INSTRUCTIONS

1. Two copies of the Annual Statement are furnished. Print or type legibly, using black ink. Please sign the original. It is permissible to make photocopies if you wish. Mail the **signed original** to the Grand Lodge Office in the envelope provided before February 15th, and retain the other copy for your files.

2. List all officers elected and appointed at your annual meeting on Page 3 and be sure to fill in the date of installation and all other information requested. Even if you use MORI this must be completed.

3. List defaults and rejections on Page 4

SUNDRY INFORMATION

1. Fee charged for degrees
   - With Petition $______
   - For E.A. Degree $______
   - For F.C. Degree $______
   - For M.M. Degree $______
   - TOTAL $______

Is the Grand Lodge fee of $10.00 on initiations and the $5.00 fee for the George Washington Memorial included in the above fees? ______

2. Amount of Annual dues (include per capita tax) per regular member $______

3. Number of Stated Communications held during year. ______

4. Number of Special Communications held during year. ______

5. Does your Lodge Rent ____Own ____Your Lodge Building.

All of the information in the box above must be completed every year, even if there was no change.

INSTRUCTIONS FOR THE

COMPLETION OF PAGES 4–8 INCLUSIVE

1. All Lodges must complete Profit and Loss and Balance Sheet on Page 5. If you have a computer printout, you may submit it as a substitute.
2. Authorization for Inclusion in Group 990 Tax Return Form & Sarbanes-Oxley Declaration.

   All Lodges must sign the Authorization for Inclusion in Group Return on Form 990, and the Sarbanes-Oxley Declaration of Compliance (Page 6). These authorizations must be signed each year.

3. Schedules which must be completed by your Lodge.
   a. Lodges with Gross Receipts less than $25,000.

      No schedules required

   b. Lodges with Gross Receipts in excess of $25,000.
      You must complete all schedules on pages 7& 8 which pertain to * items. Schedule totals **must** equal statement totals for corresponding * items.

It is recommended that the officers review the financial statements.

Brother Secretary, again please accept my thanks for your efforts and cooperation in keeping our records in good order.

If you would like advice or assistance, call the Grand Lodge office @ (262) 965-2200.

Michael A. DeWolf

Michael A. DeWolf, PGM
Grand Secretary

OFFICERS

Lodge No. ___________

Elected and Appointed for Year 2012

Installed on the ________________________day of __________________________

By __________________________________ Title ___________________________

Title	Last Name	First Name
W.M. **Address**		
S.W. **Address**		
J.W. **Address**		
Treas. **Address**		
Secy. **Address**		
S.D.		
J.D.		
Steward		
Steward		
Tiler		
Chaplain		
Organist		
Counselor		
Trustee		
Trustee		
Trustee		
Trustee		
Trustee		

LIST ALL E.A. and F.C. CANDIDATES IN DEFAULT LAST FIVE (5) YEARS

Surname	Given Name	Initiated	Passed

DEFAULTED CANDIDATES – RE-ESTABLISHED THIS YEAR

Surname	Given Name

REJECTED PETITIONS

Surname	Given Name	Date of Rejection

See Secretaries Handbook for additional instructions..

PROFIT AND LOSS STATEMENT January 1 , 2011 – December 31 , 2011 Lodge No.____

INCOME		EXPENSE	
*1. a. Sales (of Assets)	________	*12. Contributions, Scholarships and Assistance paid	________
b. Cost of Goods Sold	________	13. G. L. Assessments & Per Capita	________
c. Gross Income from Sales (Item 1a less 1b)	________	*14. Compensation of Officers	________
2. Dues Received (include Per Capita)	________	15. Other Salaries and Wages	________
3. Degree and Petition Fees	________	16. Payroll Taxes	________
*4. Contributions and Gifts Received	________	17. Supplies	________
5. Interest from Savings and Temporary Cash Investments	________	18. Telephone	________
		19. Postage and Shipping	________
6. Dividends and Interest from Investments	________	20. Rent / Real Estate Taxes	________
		21. Utilities (Heat, Light, Water)	________
7. a. Rents Received	________	22. Insurance	________
b. Rental Expenses	________	23. Equipment & Building Maintenance	________
c. Net Rents		24. Printing	________
(Item 7a less 7b)	________	*25. Depreciation (see depreciable assets)	________
8. Maintenance Reimbursement from		26. Travel & Annual Communication Exp.	________
Other Bodies	________	27. Interest Expenses	________
9. Social Reimbursement from all		28. Social	________
Sources	________	*29. Miscellaneous	________
10. Other Income	________	30. Total Expenses (Add Items 12-29)	________
11. Total Income (Add Items 1c, 2-6, 7c, & 8-10)	________	31. NET GAIN (LOSS) (Item No. 11 Less Item No. 30)	________

*Schedule on the following pages that pertains to this item must be completed for those with income of $25,000 or more.

BALANCE SHEET AS OF DECEMBER 31, 2011

ASSETS		LIABILITIES	
32. Cash:		40. Accounts Payable	________
a. Savings and Temporary Cash		41. Bonds and Notes Payable	________
Investments	________	42. Mortgages Payable	________
b. Non-Interest Bearing Accounts	________	*43. Other Liabilities	________
33. Accounts Receivable		44. TOTAL LIABILITIES	
(include unpaid dues & Per Capita	________	(Add Items 40-43)	________
34. Notes Receivable	________		
35. Inventories	________	45. NET WORTH	
*36. Investments (Stocks, Bonds, etc.)	________	(Item 39 less item 44)	________
37. Land at Cost	________		
*38. a. Depreciable Assets at Cost Building, Furnishings, Machinery, Equipment, etc.)	________		
b. Accumulated Depreciation	________		
c. Total Depreciable Assets (Item 38a less 38b)	________		
39. TOTAL ASSETS (Add items 32a, 32b, 33-37, & 38c)	________		

*Schedule on the following pages that pertain to this item must be completed for those with income of $25,000 or more.

AUTHORIZATION FOR INCLUSION
IN GROUP RETURN ON FORM 990
FOR TAXABLE YEAR ENDING DECEMBER 31, 2011
OF

____________________________________LODGE; NUMBER ________

EMPLOYER IDENTIFICATION NUMBER (EIN-Listed in MORI):____________________

The above named lodge was a constituted lodge of, and subject to the general control of, the Grand Lodge Free and Accepted Masons of Wisconsin (hereinafter termed the ("Central Organization") as of December 31, 2011. The above named lodge hereby authorizes the Central Organization to include it in a Group Return to be filed on Form 990 for taxable year ending December 31, 2011. The above named lodge has filed statements with the Central Organization, which statements specifically state its items of gross income, receipts, disbursements, and such other information relating to it as is required to be stated in said Group Return.

I am signing this Authorization in my official capacity as a duly authorized officer of the above named lodge and that this Authorization (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is true, correct and complete and made in good faith for the taxable year stated.

BY:____

Signature

____

Print Name & Title of Officer Signing Authorization

SARBANES-OXLEY DECLARATION OF COMPLIANCE

As Worshipful Master and Secretary of ____ Lodge No. __________, a Constituent Lodge of the Grand Lodge F&AM of WI, we do certify and declare that we have complied with the Grand Master's Decision issued on December 21st, 2009; and do have on file and maintain the following:

1. Whistleblower Policy
2. Document Retention & Destruction Policy
3. Code of Ethics of the Grand Lodge of WI
4. Conflict of Interest Policy
5. Conflict of Interest Disclosure Form.

FURTHER, the above named material has been distributed to the appropriate brethren in our lodge and FURTHER, a Conflict if Interest Disclosure Form is on file with our Secretary for each Elected Lodge Officer, Board Member (if applicable) and each Trustee of our lodge.

This information is to be maintained and readily available for review by a Grand Lodge Officer at the direction of the Most Worshipful Grand Master, Auditors for the Grand Lodge F&AM of WI, or if requested an agent for the Internal Revenue Service.

Signed this ______________ day of ______________________ 20 ______

____

Worshipful Master - Signature

____

Print Name

____

Secretary - Signature

____

Print Name

See Secretaries Handbook for additional instructions.

SCHEDULES FOR ITEMS IN PROFIT AND LOSS STATEMENT

Must be completed if Item No. 11 (Total Income) on page 5 is $25,000 or more.

Item No. 1 – Sale of Assets

Other than Securities

Sale Date	Description	Gross Sales	Cost of Goods Sold	Gross Income from Sales
	Sub-Totals			

Securities

Sale Date	Description	Gross Sales	Original Cost Or Basis	Net Gain (Loss)
	Sub-Total			
	Totals			
	Carry Forward to	*Line item 1a*	*Line item 1b*	*Line item 1c*

Item No. 4 - Contributions & Gifts Received

Date Received	Name of Donor	Amount of Contribution
	Total	

Item No. 12 – Contributions, Scholarships and Assistance Paid

Date	Name of Recipient	Purpose of Payment	Amount of Contribution
	Total		

SCHEDULES FOR ITEMS IN PROFIT AND LOSS STATEMENT
-Continued-

Item No. 14 – Compensation of Officers

Position	Name	Compensation
Worshipful Master		
Senior Warden		
Junior Warden		
Treasurer		
Secretary		
Tiler		
	Total	

Item No. 29 – Miscellaneous Expenses

Expense	Amount	Purpose of Payment	
	Total must equal line No. 29		

SCHEDULES FOR ITEMS IN BALANCE SHEET
For Lodges with Income of $25,000 or more.

Item No. 36 – Investments

Type	Market Value
Mutual Funds	
Stocks	
Bonds	
Certificate of Deposit (1 year or more)	
Total	

Item No. 38 – Depreciable Assets

Date Acquired	Description	Original Cost	Accumulated Depreciation	Current Year Depreciation
	Totals			
	Carry forward to	*Line item 38a*	*Line item 38b*	*Line item 25*

Item No. 43 – Other Liabilities

Description	Amount
Total	