230846855 07/09/2003 3 49 PM

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047

2002

A For the 2002 calendar year, or tax year beginning , and ending

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

Please use IRS label or print or type See Specific Instructions.

C Name of organization
MASONIC HOME OF PENNSYLVANIA

Number and street (or P O box if mail is not delivered to street address) Room/suite
801 RIDGE PIKE

City or town, state or country, and ZIP + 4
LAFAYETTE HILL PA 19444-1799

D Employer ID number
23-0846955

E Telephone number
610-825-6100

F Accounting method ☐ Cash ☒ Accrual ☐ Other (specify)

● Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)

H and I are not applicable to section 527 organizations

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) If "Yes," enter no of affiliates ▶

H(c) Are all affiliates included? ☐ Yes ☐ No
(If "No," att a list See instr)

H(d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☐ No

G Web site. ▶ WWW.MHOPA.COM

J Organization type (check only one) ▶ ☒ 501(c) (3) ◂ (insert no) ☐ 4947(a)(1) or ☐ 527

K Check here ▶ ☐ If the organization's gross receipts are normally not more than $25,000 The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data Some states require a complete return

I Enter 4-digit GEN ▶

M Check ▶ ☒ If the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF)

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 12,737,702

Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 17 of the instructions.)

1	Contributions, gifts, grants, and similar amounts received				
a	Direct public support	1a	587,077		
b	Indirect public support	1b			
c	Government contributions (grants)	1c			
d	Total (add lines 1a through 1c) (cash $ 587,077 noncash $)			1d	587,077
2	Program service revenue including government fees and contracts (from Part VII, line 93)			2	8,421,217
3	Membership dues and assessments			3	1,470
4	Interest on savings and temporary cash investments			4	2,461
5	Dividends and interest from securities			5	443,941
6a	Gross rents	6a			
b	Less rental expenses	6b			
c	Net rental income or (loss) (subtract line 6b from line 6a)			6c	
7	Other investment income (describe ▶ SEE STMT 1)			7	45,190
8a	Gross amount from sales of assets other than inventory	(A) Securities 3,115,519	8a	(B) Other	
b	Less cost or other basis and sales expenses	5,083,866	8b		
c	Gain or (loss) (attach schedule)	-1,968,347	8c		
d	Net gain or (loss) (combine line 8c, columns (A) and (B)) SEE STMT 2			8d	-1,968,347
9	Special events and activities (attach schedule)				
a	Gross revenue (not including $ of contributions reported on line 1a)	9a			
b	Less direct expenses other than fundraising expenses	9b			
c	Net income or (loss) from special events (subtract line 9b from line 9a)			9c	
10a	Gross sales of inventory, less returns and allowances	10a			
b	Less cost of goods sold	10b			
c	Gross profit or (loss) from sales of inventory (att sch) (subtract line 10b from line 10a)			10c	
11	Other revenue (from Part VII, line 103)			11	120,827
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)			12	7,653,836
13	Program services (from line 44, column (B))			13	9,159,507
14	Management and general (from line 44, column (C))			14	2,060,308
15	Fundraising (from line 44, column (D))			15	26,813
16	Payments to affiliates (attach schedule)			16	
17	Total expenses (add lines 16 and 44, column (A))			17	11,246,628
18	Excess or (deficit) for the year (subtract line 17 from line 12)			18	-3,592,792
19	Net assets or fund balances at beginning of year (from line 73, column (A))			19	20,993,966
20	Other changes in net assets or fund balances (attach explanation) SEE STMT 3			20	697,498
21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)			21	18,098,672

FILMED JUL 29 2003

RECEIVED
1315 JUL 20 2003 IRS-OSC
OGDEN, UT

For Paperwork Reduction Act Notice, see the separate Instructions.

DAA

Form **990** (2002)

Part II Statement of Functional Expenses All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others (See page 21 of the instructions)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) (cash $ non-cash $)	22				
23 Specific assistance to individuals	23				
24 Benefits paid to or for members STMT 4	24	33,319	33,319		
25 Compensation of officers, directors, etc	25	85,981		85,981	
26 Other salaries and wages	26	4,467,116	4,068,204	379,142	19,770
27 Pension plan contributions	27				
28 Other employee benefits	28	1,290,116	1,181,099	106,278	2,739
29 Payroll taxes	29	343,797	306,984	35,301	1,512
30 Professional fundraising fees	30				
31 Accounting fees	31	27,985		27,985	
32 Legal fees	32	29,944		29,944	
33 Supplies	33	365,762	338,958	24,012	2,792
34 Telephone	34	28,801	2,661	26,140	
35 Postage and shipping	35	20,265		20,265	
36 Occupancy	36				
37 Equipment rental and maintenance	37	9,767	6,876	2,891	
38 Printing and publications	38				
39 Travel	39	9,388	9,388		
40 Conferences, conventions, and meetings	40	32,383	14,693	17,690	
41 Interest	41	186,293		186,293	
42 Depreciation, depletion, etc (attach schedule)	42	702,957		702,957	
43 Other expenses not covered above (Itemize) a	43a				
b SEE STATEMENT 5	43b	3,612,754	3,197,325	415,429	
c	43c				
d	43d				
e	43e				
44 Total functional expenses (add lines 22 - 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44	11,246,628	9,159,507	2,060,308	26,813

Joint Costs Check ▶ ☐ if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ▶ ☐ Yes ☒ No

If "Yes," enter (i) the aggregate amount of these joint costs $, (ii) the amount allocated to Program services $

(iii) the amount allocated to Management and general $, and (iv) the amount allocated to Fundraising $

Part III Statement of Program Service Accomplishments (See page 24 of the instructions)

What is the organization's primary exempt purpose?

▶ OPERATE A CCRC AT COST/CHARITY TO THE RESIDENTS

All organizations must describe their exempt purpose achievements in a clear and concise manner State the number of clients served, publications issued, etc Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt chantable trusts must also enter the amount of grants and allocations to others)

Program Service Expenses (Required for 501(c)(3) & (4) orgs , & 4947(a)(1) trusts but optional for others.)

a SEE STATEMENT 6

(Grants and allocations $)

b

(Grants and allocations $)

c

(Grants and allocations $)

d

(Grants and allocations $)

e Other program services (attach schedule) (Grants and allocations $) 9,159,507

f **Total of Program Service Expenses** (should equal line 44, column (B), Program services) ▶ 9,159,507

Part IV **Balance Sheets** (See page 24 of the instructions)

	Note	Where required, attached schedules and amounts within the description column should be for end-of-year amounts only			(A) Beginning of year		(B) End of year
Assets	45	Cash - non-interest-bearing			90,151	45	109,630
	46	Savings and temporary cash investments				46	
	47a	Accounts receivable	47a	1,259,009			
	b	Less allowance for doubtful accounts	47b	125,000	761,336	47c	1,134,009
	48a	Pledges receivable	48a				
	b	Less allowance for doubtful accounts	48b			48c	
	49	Grants receivable				49	
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)				50	
	51a	Other notes and loans receivable (attach schedule)	51a				
	b	Less allowance for doubtful accounts	51b			51c	
	52	Inventories for sale or use				52	
	53	Prepaid expenses and deferred charges			56,684	53	92,059
	54	Investments-securities SEE STMT 7 ▶ ☐ Cost ☒ FMV			7,865,049	54	4,639,843
	55a	Investments-land, buildings, and equipment basis	55a				
	b	Less accumulated depreciation (attach schedule)	55b			55c	
	56	Investments-other (attach schedule) SEE STMT 8			2,989,779	56	3,183,129
	57a	Land, buildings, and equipment basis	57a	27,707,927			
	b	Less accumulated depreciation (attach schedule) SEE STMT 9	57b	10,210,531	18,187,780	57c	17,497,396
	58	Other assets (describe ▶ SEE STMT 10)			95,652	58	52,368
	59	**Total assets** (add lines 45 through 58) (must equal line 74)			30,046,431	59	26,708,434
Liabilities	60	Accounts payable and accrued expenses			637,410	60	918,531
	61	Grants payable				61	
	62	Deferred revenue			3,040,836	62	2,376,358
	63	Loans from officers, directors, trustees, and key employees (attach schedule)				63	
	64a	Tax-exempt bond liabilities (attach schedule) SEE WORKSHEET			2,912,500	64a	2,762,500
	b	Mortgages and other notes payable (attach schedule) SEE WORKSHEET			2,235,974	64b	2,251,311
	65	Other liabilities (describe ▶ SEE STMT 11)			225,745	65	301,062
	66	**Total liabilities** (add lines 60 through 65)			9,052,465	66	8,609,762
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here** ▶ ☒ and complete lines 67 through 69 and lines 73 and 74					
	67	Unrestricted			20,225,069	67	17,329,775
	68	Temporarily restricted				68	
	69	Permanently restricted			768,897	69	768,897
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 70 through 74					
	70	Capital stock, trust principal, or current funds				70	
	71	Paid-in or capital surplus, or land, building, and equipment fund				71	
	72	Retained earnings, endowment, accumulated income, or other funds				72	
	73	**Total net assets or fund balances** (add lines 67 through 69 or lines 70 through 72, column (A) **must** equal line 19, column (B) **must** equal line 21)			20,993,966	73	18,098,672
	74	**Total liabilities and net assets / fund balances** (add lines 66 and 73)			30,046,431	74	26,708,434

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization How the public perceives an organization in such cases may be determined by the information presented on its return Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See page 26 of the instructions)

a	Total revenue, gains, & other support per audited financial statements ▶	a	8,351,334
b	Amounts included on line a but not on line 12, Form 990		
(1)	Net unrealized gains on investments $		
(2)	Donated services and use of facilities $		
(3)	Recoveries of prior year grants $		
(4)	Other (specify) SEE STMT 12 $ -6,445		
	Add amounts on lines (1) through (4) ▶	b	-6,445
c	Line a minus line b ▶	c	8,357,779
d	Amounts included on line 12, Form 990 but not on line a		
(1)	Investment expenses not included on line 6b, Form 990 $		
(2)	Other (specify) SEE STMT 13 $ -703,943		
	Add amounts on lines (1) and (2) ▶	d	-703,943
e	Total revenue per line 12, Form 990 (line c plus line d) ▶	e	7,653,836

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

a	Total expenses and losses per audited financial statements ▶	a	11,246,628
b	Amounts included on line a but not on line 17, Form 990		
(1)	Donated services and use of facilities $		
(2)	Prior year adjustments reported on line 20, Form 990 $		
(3)	Losses reported on line 20, Form 990 $		
(4)	Other (specify) $		
	Add amounts on lines (1) through (4) ▶	b	
c	Line a minus line b ▶	c	11,246,628
d	Amounts included on line 17, Form 990 but not on line a		
(1)	Investment expenses not included on line 6b, Form 990 $		
(2)	Other (specify) $		
	Add amounts on lines (1) and (2) ▶	d	
e	Total expenses per line 17, Form 990 (line c plus line d) ▶	e	11,246,628

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated, see page 26 of the instructions)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contrib to employee benefit plans & deferred compensation	(E) Expense account and other allowances
SEE STATEMENT 14				

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than $100,000 from your organization and all related organizations, of which more than $10,000 was provided by the related organizations? If "Yes," attach schedule-see page 26 of the instructions ▶ ☐ Yes ☒ No

Part VI Other Information (See page 27 of the instructions)

			Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	77		X
78a	Did the organization have unrelated business gross inc of $1,000 or more during the year covered by this return?	78a		X
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	78b		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies trustees, officers, etc , to any other exempt or nonexempt organization?	80a		X
b	If "Yes," enter the name of the organization ▶ and check whether it is ☐ exempt or ☐ nonexempt			
81a	Enter direct or indirect political expenditures See line 81 instr 81a			
b	Did the organization file **Form 1120-POL** for this year?	81b		X
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a		X
b	If "Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III) 82b			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? N/A	84b		
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members? N/A	85a		
b	Did the organization make only in-house lobbying expenditures of $2,000 or less? N/A	85b		
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year			
c	Dues, assessments, and similar amounts from members 85c			
d	Section 162(e) lobbying and political expenditures 85d			
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f			
g	Does the organization elect to pay the section 6033(e) tax on the amount in 85f? N/A	85g		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? N/A	85h		
86	501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12 86a			
b	Gross receipts, included on line 12, for public use of club facilities 86b			
87	501(c)(12) orgs Enter a Gross income from members or shareholders 87a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 87b			
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Part IX	88		X
89a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 ▶ 0 , section 4912 ▶ 0 , section 4955 ▶ 0			
b	501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b		X
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ 0			
d	Enter Amount of tax on line 89c, above, reimbursed by the organization ▶ 0			
90a	List the states with which a copy of this return is filed ▶ PA			
b	Number of employees employed in the pay period that includes March 12, 2002 (See instructions) 90b 197			
91	The books are in care of ▶ DIANE DOBBINS, DIR FINAN Telephone no ▶ 610-825-6100 Located at ▶ 801 RIDGE PIKE, LAFAYETTE HILL, PA ZIP + 4 ▶ 19444-1799			
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of **Form 1041**- Check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 92			

Part VII Analysis of Income-Producing Activities (See page 31 of the instructions)

Note Enter gross amounts unless otherwise indicated	Unrelated business income (A) Business code	Unrelated business income (B) Amount	Excluded by sec 512, 513, or 514 (C) Exclusion code	Excluded by sec 512, 513, or 514 (D) Amount	(E) Related or exempt function income
93 Program service revenue					
a RESIDENT RELATED INCOME					5,968,318
b RENTAL INCOME (PHARMACY)					39,256
c PURCHASE DISCOUNTS					8,336
d					
e					
f Medicare/Medicaid payments					2,405,307
g Fees and contracts from government agencies					
94 Membership dues and assessments					1,470
95 Interest on savings and temporary cash investments			14	2,461	
96 Dividends and interest from securities			14	443,941	
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income			36	45,190	
100 Gain or (loss) from sales of assets other than inventory			18	-1,968,347	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue a					
b DECEASED RESIDENTS					114,071
c MISCELLANEOUS			1	6,756	
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0		-1,469,999	8,536,758
105 Total (add line 104, columns (B), (D), and (E))				▶	7,066,759

Note Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 32 of the instructions)

Line No ●	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
	SEE STATEMENT 15

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 32 of the instructions)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 33 of the instructions)

(a) Did the organization during the year receive any funds directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

(b) Did the organization, during the year, pay premiums, directly or indirect

Note If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

Please Sign Here

Under penalties of perjury, I declare that I have examined this return, inclu and belief, it is true, correct, and complete Declaration of preparer (other t

▶ Adrienne M. Stadden

Signature of officer

▶ Adrienne M. Stadden

Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶ Jay R Wheatley CPA

Firm's name (or yours if self-employed) ▶ MORTON, GOBER & CO

address, and ZIP + 4 1515 WEST CHESTER WEST CHESTER, PA

[redacted]

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.)

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

OMB No 1545-0047

2002

Name of the organization

MASONIC HOME OF PENNSYLVANIA

Employer identification number

23-0846955

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions List each one If there are none, enter "None ")

(a) Name and address of each employee paid more than $50 000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee ben plans & deferred compensation	(e) Expense account and other allowances
ADEPEJU ADEBANJO 801 RIDGE PK, LAFAYETTE HILL, PA	RN 51	73,119	2,600	0
LORRAINE LARDANI 801 RIDGE PK, LAFAYETTE HILL, PA	RES SVC ADMN 40	70,538	4,900	0
DEBORAH LANKFORD 801 RIDGE PK, LAFAYETTE HILL, PA	DIR HLTHCARE 40	63,961	7,150	0
CAROL BENNER 801 RIDGE PK, LAFAYETTE HILL, PA	DIR PERSCARE 40	63,929	10,400	0
RUTH WADDINGTON 801 RIDGE PK, LAFAYETTE HILL, PA	RN SUPERVISR 40	57,187	0	0
Total number of other employees paid over $50,000 ▶	4			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instr List each one (whether individuals or firms) If there are none, enter "None ")

(a) Name and address of each independent contractor paid more than $ 50 000	(b) Type of service	(c) Compensation
FOCAL POINT CONSULTING P.O. BOX 699, GREEN LANE, PA	CONSULTING	58,140
Total number of others receiving over $50,000 for professional services ▶	0	

Part III Statements About Activities (See page 2 of the instructions)

			Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶$ _____ **(Must equal amount on line 38,** Part VI-A, or line I of Part VI-B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities	1		X
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions)			
a	Sale, exchange, or leasing of property?	2a		X
b	Lending of money or other extension of credit?	2b		X
c	Furnishing of goods, services, or facilities?	2c		X
d	Payment of compensation (or payment or reimbursement of exp if more than $1 000)? SEE PART V, FORM 990	2d	X	
e	Transfer of any part of its income or assets?	2e		X
3	Does the organization make grants for scholarships, fellowships, student loans, etc ? (See **Note** below)	3		X
4	Do you have a section 403(b) annuity plan for your employees?	4	X	

Note Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments

Part IV Reason for Non-Private Foundation Status (See pages 3 through 5 of the instructions)

The organization is not a private foundation because it is (Please check only **ONE** applicable box)

- 5 ☐ A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
- 6 ☐ A school Section 170(b)(1)(A)(ii) (Also complete Part V)
- 7 ☐ A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8 ☐ A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
- 9 ☐ A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) **Enter the hospital's name, city, and state** ▶
- 10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A)
- 11a ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 11b ☐ A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 12 ☐ An organization that normally receives **(1) more than 33 1/3%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc , functions-subject to certain exceptions, and **(2) no more than 33 1/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A)
- 13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in **(1)** lines 5 through 12 above, or **(2)** section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

Provide the following information about the supported organizations (See page 5 of the instructions)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14 ☐ An organization organized and operated to test for public safety Section 509(a)(4) (See page 5 of the instructions)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) **Use cash method of accounting**

Note You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

Calendar year (or fiscal year beginning in) ▶	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants See line 28)	845,568	1,088,710	867,747	974,208	3,776,233
16 Membership fees received	1,600	1,520	1,700	2,160	6,980
17 Gross receipts from admissions merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's chantable, etc purpose					
18 Gross inc from int dividends, amounts received from pymt on securities loans (section 512(a)(5)) rents, royalties, & unrelated busn taxable inc (less sec 511 taxes) from businesses acquired by the organization after June 30, 1975	530,300	542,879	514,967	535,912	2,124,058
19 Net income from unrelated business activities not included in line 18					
20 Tax revn levied for the organization's ben & either paid to it or expended on its behalf					
21 The value of serv or facl furnished to the org by a governmental unit without charge Do not incl the value of serv or fac generally furnished to the public without charge					
22 Other income Attach a schedule Do not include gain or (loss) from sale of cap assets					
23 Total of lines 15 through 22	1,377,468	1,633,109	1,384,414	1,512,280	5,907,271
24 Line 23 minus line 17	1,377,468	1,633,109	1,384,414	1,512,280	5,907,271
25 Enter 1% of line 23	13,775	16,331	13,844	15,123	

26 Organizations described on lines 10 or 11 a Enter 2% of amount in column (e), line 24 ▶ 26a 118,145

b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1998 through 2001 exceeded the amount shown in line 26a **Do not file this list with your return.** Enter the total of all these excess amounts ▶ 26b

c Total support for section 509(a)(1) test Enter line 24, column (e) ▶ 26c 5,907,271

d Add Amounts from column (e) for lines 18 2,124,058 19 _____ 22 _____ 26b _____ ▶ 26d 2,124,058

e Public support (line 26c minus line 26d total) ▶ 26e 3,783,213

f **Public support percentage (line 26e (numerator) divided by line 26c (denominator))** ▶ 26f 64.0433%

27 Organizations described on line 12 a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person " **Do not file this list with your return** Enter the sum of such amounts for each year N/A

(2001) (2000) (1999) (1998)

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the **larger** of **(1)** the amount on line 25 for the year or **(2)** $5,000 (Include in the list organizations described in lines 5 through 11, as well as individuals) **Do not file this list with your return** After computing the difference between the amount received and the larger amount described in **(1)** or **(2)**, enter the sum of these differences (the excess amounts) for each year N/A

(2001) (2000) (1999) (1998)

c Add Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 20 _____ 21 _____ ▶ 27c

d Add Line 27a total _____ and line 27b total _____ ▶ 27d

e Public support (line 27c total minus line 27d total) ▶ 27e

f Total support for section 509(a)(2) test Enter amount on line 23, column (e) ▶ 27f

g **Public support percentage (line 27e (numerator) divided by line 27f (denominator))** ▶ 27g %

h **Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))** ▶ 27h %

28 Unusual Grants For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant **Do not file this list with your return** Do not include these grants in line 15

Part V Private School Questionnaire (See page 7 of the instructions)

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		N/A		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?		31		
	If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)				
32	Does the organization maintain the following				
a	Records indicating the racial composition of the student body, faculty, and administrative staff?		32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		32b		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?		32d		
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)				
33	Does the organization discriminate by race in any way with respect to				
a	Students' rights or privileges?		33a		
b	Admissions policies?		33b		
c	Employment of faculty or administrative staff?		33c		
d	Scholarships or other financial assistance?		33d		
e	Educational policies?		33e		
f	Use of facilities?		33f		
g	Athletic programs?		33g		
h	Other extracurricular activities?		33h		
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)				
34a	Does the organization receive any financial aid or assistance from a governmental agency?		34a		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement		34b		
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation		35		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions)
(To be completed ONLY by an eligible organization that filed Form 5768) N/A

Check ▶ a ☐ if the organization belongs to an affiliated group Check ▶ b ☐ if you checked "a" and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38 Total lobbying expenditures (add lines 36 and 37)	38		
39 Other exempt purpose expenditures	39		
40 Total exempt purpose expenditures (add lines 38 and 39)	40		
41 Lobbying nontaxable amount Enter the amount from the following table-			
If the amount on line 40 is- / The lobbying nontaxable amount is-			
Not over $500,000 — 20% of the amount on line 40			
Over $500,000 but not over $1,000,000 — $100,000 plus 15% of the excess over $500,000			
Over $1,000,000 but not over $1,500,000 — $175,000 plus 10% of the excess over $1,000,000	41		
Over $1,500,000 but not over $17,000,000 — $225,000 plus 5% of the excess over $1,500,000			
Over $17,000,000 — $1,000,000			
42 Grassroots nontaxable amount (enter 25% of line 41)	42		
43 Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43		
44 Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44		
Caution If there is an amount on either line 43 or line 44, you must file Form 4720			

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below
See the instructions for lines 45 through 50 on page 11 of the instructions)

	Lobbying Expenditures During 4-Year Averaging Period				
Calendar year (or fiscal year beginning in) ▶	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities
(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instr) N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
a Volunteers			
b Paid staff or management (include compensation in expenses reported on lines c through h)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (add lines c through h)			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 12 of the instructions)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

		Yes	No
a	Transfers from the reporting organization to a noncharitable exempt organization of		
(i)	Cash	51a(i)	X
(ii)	Other assets	a(ii)	X
b	Other transactions		
(i)	Sales or exchanges of assets with a noncharitable exempt organization	b(i)	X
(ii)	Purchases of assets from a noncharitable exempt organization	b(ii)	X
(iii)	Rental of facilities, equipment, or other assets	b(iii)	X
(iv)	Reimbursement arrangements	b(iv)	X
(v)	Loans or loan guarantees	b(v)	X
(vi)	Performance of services or membership or fundraising solicitations	b(vi)	X
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	c	X

d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers transactions and sharing arrangements
N/A			

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ▶ ☐ Yes ☒ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Form **990/990-PF**

Mortgages and Other Notes Payable

For calendar year 2002, or tax year beginning , and ending

2002

Name

MASONIC HOME OF PENNSYLVANIA

Employer Identification Number

23-0846955

FORM 990, PART IV, LINE 64B - ADDITIONAL INFORMATION

	Name of lender	Relationship to disqualified person
(1)	STANDARD FUNDING CORP	
(2)	COMMONWEALTH BANK	
(3)	MELLON BANK TRUST	
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		

	Original amount borrowed	Date of loan	Maturity date	Repayment terms	Interest rate
(1)	76,718	5/16/02	3/01/03	PAYABLE MONTHLY	9.500
(2)	2,000,000			VAR. INT. PAYABLE MONTHLY	
(3)	400,000	10/18/01	10/18/04	$2500 INTEREST PD MONTHLY	7.500
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

	Security provided by borrower	Purpose of loan
(1)	UNRESTRICTED HOME ASSETS	INSURANCE PREMIUM FINANCING
(2)	UNRESTRICTED HOME ASSETS	LINE OF CREDIT
(3)	SEPARATE TRACK OF LAND	IMPROVE ENTRANCE-WAY OF FACILITY
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		

	Consideration furnished by lender	Balance due at beginning of year	Balance due at end of year
(1)			15,344
(2)		1,835,974	1,835,967
(3)		400,000	400,000
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Totals		2,235,974	2,251,311

Tax-Exempt Bond Liabilities

Form **990** | For calendar year 2002, or tax year beginning , and ending | **2002**

Name: MASONIC HOME OF PENNSYLVANIA

Employer Identification Number: 23-0846955

FORM 990, PART IV, LINE 64A - ADDITIONAL INFORMATION

	Name of lender	Purpose of issue
(1)	COMMONWEALTH BANK	TAX-FREE LONG-TERM LOAN
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		

	Issue date	Original amount of issue	Form 8038 filed Y/N	Form 8038 filed Date filed	Date retired	Completion date of project	Unexpended bond proceeds
(1)		3,000,000	N				
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							

	Third party use percent	Maturity date	Repayment terms	Interest rate
(1)			$12,500 MONTHLY PLUS INT.	
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

	Security provided by borrower	Amount outstanding at beginning of year	Amount outstanding at end of year
(1)	UNRESTRICTED HOME ASSETS	2,912,500	2,762,500
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Totals		2,912,500	2,762,500

Federal Statements

Statement 1 - Form 990, Part I, Line 7 - Other Investment Income

Description	Amount
OPTIONS	$ 39,775
CHARITABLE GIFT ANNUITY	5,415
TOTAL	$ 45,190

Federal Statements

Statement 2 - Form 990, Part I, Line 8c - Sale of Assets Other Than Inventory - Securities

Desc	How Rec'd	Whom Sold	Date Acquired	Date Sold	Sale Price	Cost & Expense	Deprec	Gain/ -Loss
SEE SCHEDULE ATTACHED								
	PURCHASE				$3,115,519	$5,083,866	$	$ -1968347
TOTAL					$3,115,519	$5,083,866	$ 0	$ -1968347

Federal Statements

Statement 3 - Form 990, Line 20 - Other Changes in Net Assets or Fund Balances

Description	Amount
NET UNREALIZED GAIN ON LONG-TERM INVESTMENTS	$ 703,943
ADJUSTMENTS OF PRIOR YEAR ESTIMATES - NET	-6,445
CHANGES IN TEMPORARILY RESTRICTED NET ASSETS	
TOTAL	$ 697,498

Federal Statements

Statement 4 - Form 990, Part II, Line 24 - Benefits Paid to or for Members

Description	Amount
ALLOWANCE - RESIDENTS	$ 33,319
TOTAL	$ 33,319

Statement 5 - Form 990, Part II, Line 43 - Other Functional Expenses

Description	Total Expenses	Program Service	Mgt & General	Fund-Raising
	$	$	$	$
EXPENSES				
DIETARY - ADVERTISING	840	840		
DIETARY - FOOD	482,752	482,752		
DIETARY - MGMT FEES & COSTS	446,814	446,814		
HOUSEKEEPING - SERVICEMASTER	88,852	88,852		
HOUSEKEEPING - ADVERTISING				
HOUSEKEEPING - LAUNDRY	10,026	10,026		
PLANT OPERAT - SERVICEMASTER	157,960	157,960		
PLANT OPERAT - FUEL	93,837	93,837		
PLANT OPERAT - ELECTRIC	316,464	316,464		
PLANT OPERAT - PAINTING	2,476	2,476		
PLANT OPERAT - WATER & SEWER	55,638	55,638		
PLANT OPERAT - REAL EST TAXES	62,076	62,076		
PLANT OPERAT - SECURITY	248,146	248,146		
PLANT OPERAT - GROUNDS	44,455	44,455		
PLANT OPERAT - MAINT CONTRACT	98,458	98,458		
PLANT OPERAT - REPAIRS & MAIN	52,089	52,089		
NURSING - ADVERTISING	42,702	42,702		
NURSING - MED DIR FEE	6,336	6,336		
NURSING - RELIGIOUS ACTIVITIE	2,653	2,653		
NURSING - RES SUPPLIES	3,668	3,668		
NURSING - LAUNDRY	33,683	33,683		
NURSING - CONSULTING	850	850		
NURSING - AGENCY PERSONNEL	142,367	142,367		
NURSING - MEDICATIONS	190,723	190,723		
NURSING - PHYSICIAN FEES	15	15		
PERS CARE ADMIN - ADVERTISING	1,015	1,015		
PERS CARE ADMIN - MED DIR FEE	12,864	12,864		
PERS CARE ADMIN - LAUNDRY	4,884	4,884		
PERS CARE ADMIN - MEDICATIONS	157,549	157,549		
PERS CARE ADMIN - PHYSICIANS	30	30		
PERS CARE ADMIN - CONSULTANTS	375	375		
PERS CARE ADMIN - AGENCY PERS	3,367	3,367		
ANCILLARY - ADVERTISING				
ANCILLARY - BURIAL	26,264	26,264		
ANCILLARY - CLOTHING	89	89		
ANCILLARY - HOSPITAL FEES	3,450	3,450		
ANCILLARY - LABORATORY FEES	8,743	8,743		
ANCILLARY - PHYSICIAN FEES	100,791	100,791		
ANCILLARY - PODIATRY	208	208		
ANCILLARY - DENTAL	13,803	13,803		
ANCILLARY - RES ACTIVITIES	30,212	30,212		
ANCILLARY - RES SUNDRY	7,697	7,697		
ANCILLARY - VOLUNTEER EXP	323	323		

Federal Statements

Statement 5 - Form 990, Part II, Line 43 - Other Functional Expenses (continued)

Description	Total Expenses	Program Service	Mgt & General	Fund-Raising
ANCILLARY - X-RAY	$ 8,002	$ 8,002	$	$
ANCILLARY - IL ACTIVITIES	6,383	6,383		
ANCILLARY - GIFT SHOP	21,765	21,765		
ANCILLARY - RELIGIOUS ACTIV	5,587	5,587		
ANCILLARY - PHYSICAL THERAPY	91,463	91,463		
ANCILLARY - OCCUP THERAPY	61,578	61,578		
ANCILLARY - SPEECH THERAPY	47,003	47,003		
ANCILLARY - AGENCY				
ADMIN - AMORTIZATION	39,399		39,399	
ADMIN - ADVERTISING	8,955		8,955	
ADMIN - COMPUTER CONSULTANTS	83,629		83,629	
ADMIN - CONSULTANTS - OTHER	21,256		21,256	
ADMIN - MARKETING	97,459		97,459	
ADMIN - BANK FEES	7,595		7,595	
ADMIN - CORPORATION EXP	64,081		64,081	
ADMIN - INSURANCE	104,122		104,122	
ADMIN - PENSION EXP	3,250		3,250	
ADMIN - BAD DEBT	-22,473		-22,473	
ADMIN - INVEST ADVISORY FEES	8,156		8,156	
TOTAL	$ 3,612,754	$ 3,197,325	$ 415,429	$ 0

Statement 6 - Form 990, Part III, Line a - Statement of Program Service Accomplishments

PROVIDE FOOD, SHELTER, HEALTHCARE AND RECREATIONAL ACTIVITIES FOR ELDERLY PENNSYLVANIA MEMBERS OF THE MASONIC FRATERNITY AND/OR THEIR ELIGIBLE FAMILY MEMBERS AND/OR THE PUBLIC AT LARGE

Federal Statements

Statement 7 - Form 990, Part IV, Line 54 - Investments in Securities

Description	Beginning of Year	End of Year	Basis of Valuation
CORPORATE STOCK	6,419,055	3,644,103	MARKET
CORPORATE BONDS	1,445,994	995,740	MARKET
	7,865,049	4,639,843	

See Schedules Attached

Statement 8 - Form 990, Part IV, Line 56 - Other Investments

Description	Beginning of Year	End of Year	Basis of Valuation
ELKINS ENDOWMENT FUND	$ 768,897	$ 768,897	MARKET
MINIMUM RESERVE REQUIREMENT	1,017,655	1,113,917	MARKET
LAUREL FUND	60,000	60,000	MARKET
PRINCIPAL CASH	43,376	174,805	MARKET
DESIGNATED CASH INVESTMENT	921,716	892,974	MARKET
CHARITABLE GIFT ANNUITY INVESTMENT	15,908	112,961	MARKET
RESIDENTS' WAITING LIST DEPOSITS	110,996	7,877	MARKET
CASH HELD FOR RESIDENTS	51,231	51,698	MARKET
TOTAL	$ 2,989,779	$ 3,183,129	

Statement 9 - Form 990, Part IV, Line 57 - Land, Buildings, and Equipment

Description	Beginning of Year	Accum Deprec	End of Year	Accum Deprec
LAND	$ 1,077,558	$	$ 1,095,158	$
CAPITALIZED FINANCE CHARGES - LAND	106,822	23,738	106,822	59,345
BUILDINGS	4,423,690	2,312,275	4,423,690	2,411,389
RENOVATIONS - BUILDING	2,418,779	608,661	2,418,779	683,224
LAND IMPROVEMENTS	143,013	67,638	143,013	72,672
NEW ADDITIONS	14,553,407	3,633,872	14,553,407	3,926,924
RENOVATIONS - APARTMENTS	1,423,946	338,737	1,423,946	409,935
FURNITURE & EQUIPMENT	3,508,740	2,483,254	3,543,112	2,647,042
TOTAL	$27,655,955	$ 9,468,175	$27,707,927	$10,210,531

Federal Statements

Statement 10 - Form 990, Part IV, Line 58 - Other Assets

Description	Beginning of Year	End of Year
DEPOSITS - HEALTH INSURANCE	$ 38,110	$ 38,110
PREMIUM ON PERPETUAL FIRE INSURANCE	6,966	6,966
ACCOUNT RECEIVABLE - MISCELLANEOUS	43,479	4,115
ACCOUNT RECEIVABLE - WATER	7,097	3,177
TOTAL	$ 95,652	$ 52,368

Statement 11 - Form 990, Part IV, Line 65 - Other Liabilities

Description	Beginning of Year	End of Year
REFUNDABLE ENTRANCE FEES	$ 45,716	$ 29,127
ESCROW DEPOSITS	163,488	164,539
CHARITABLE GIFT ANNUITY PAYABLE	16,541	107,396
TOTAL	$ 225,745	$ 301,062

Federal Statements

Statement 12 - Form 990, Part IV-A - Other Revenue Included in Financial Statements

Description	Amount
NET ADJUSTMENTS OF PRIOR YEAR ESTIMATES	$ -6,445
TOTAL	$ -6,445

Statement 13 - Form 990, Part IV-A - Other Revenue Included on Return

Description	Amount
NET UNREALIZED GAIN ON LONG-TERM INVESTMENTS	$ -703,943
TOTAL	$ -703,943

Federal Statements

Statement 14 - Form 990, Part V - List of Officers, Directors, Trustees, and Key Employees

Name	Comp	Benefits	Expenses	Title	Average Hours	Address	City, State, Zip
MORTON LADER	0	0	0	CHAIRMAN	10	801 RIDGE PIKE	LAFAYETTE HILL, PA 19444
JAMES F. STANDISH, JR.	0	0	0	1ST V-CHRMN	2	801 RIDGE PIKE	LAFAYETTE HILL, PA 19444
ALBERT H. SCHOELLHAMMER	0	0	0	2ND V-CHRMN	2	801 RIDGE PIKE	LAFAYETTE HILL, PA 19444
DALLETT G. BOWERS	0	0	0	TREASURER	2	801 RIDGE PIKE	LAFAYETTE HILL, PA 19444
ADRIENNE M. STAUDENMAYER	85,981	6,500	0	SECRETARY	40	801 RIDGE PIKE	LAFAYETTE HILL, PA 19444
GARRETT P. BOLGER	0	0	0	DIRECTOR	2	801 RIDGE PIKE	LAFAYETTE HILL, PA 19444
ROBERT G BOONE	0	0	0	DIRECTOR	2	801 RIDGE PIKE	LAFAYETTE HILL, PA 19444
J EDWARD BURLEIGH, III	0	0	0	DIRECTOR	2	801 RIDGE PIKE	LAFAYETTE HILL, PA 19444
JOSEPH J. CASSIDY	0	0	0	DIRECTOR	2	801 RIDGE PIKE	LAFAYETTE HILL, PA 19444
MICHAEL CLANCY, MD	0	0	0	DIRECTOR	2	801 RIDGE PIKE	LAFAYETTE HILL, PA 19444
CASSIN W. CRAIG	0	0	0	DIRECTOR	2	801 RIDGE PIKE	LAFAYETTE HILL, PA 19444
JOHN W DEAN, IV	0	0	0	DIRECTOR	2	801 RIDGE PIKE	LAFAYETTE HILL, PA 19444
EARL W. KIMMEL	0	0	0	DIRECTOR	2	801 RIDGE PIKE	LAFAYETTE HILL, PA 19444
KENNETH R MILLS	0	0	0	DIRECTOR	2	801 RIDGE PIKE	LAFAYETTE HILL, PA 19444
JAMES H SHACKLET, III	0	0	0	DIRECTOR	2	801 RIDGE PIKE	LAFAYETTE HILL, PA 19444

Federal Statements

Statement 15 - Form 990, Part VIII - Relationship of Activities

Line No	Description
93A	FURTHERS OUR EXEMPT PURPOSE OF PROVIDING FOOD, SHELTER, HEALTHCARE, AND RECREATIONAL ACTIVITIES FOR ELDERLY PENNSYLVANIA MEMBERS OF THE MASONIC ORDER AND/OR ELIGIBLE FAMILY MEMBERS.
93B	AIDS THE HOME IN REDUCING THE NET COST OF PHARMACEUTICALS PROVIDED BY THE HOME FREE OF CHARGE TO OUR CHARITABLE RESIDENTS AND TO EXPEDIATE DELIVERY TO OUR OTHER RESIDENTS
93F	AIDS THE HOME IN PROVIDING QUALITY HEALTHCARE FOR THOSE RESIDENTS WHOSE RESOURCES HAVE BEEN EXHAUSTED
94	DUES ARE FROM MASONIC ORGANIZATIONS THROUGHOUT THE COMMON-WEALTH OF PENNSYLVANIA WHOSE MEMBERS ARE OR WILL BE ELIGIBLE FOR ADMISSION TO THE HOME
103	AIDS THE HOME IN ITS CHARITABLE MISSION OF PROVIDING SERVICES TO THOSE RESIDENTS WHO ARE UNABLE TO BE SELF-SUPPORTING

Statement 2 - Form 990 - Part I - Line 8c

The Masonic Home of Pennsylvania
and the
Wm L Elkins Masonic Orphanage for Girls

STATEMENT OF PROFIT (LOSS) ON SALE OF INVESTMENTS

For the Year ended December 31, 2002

Shares/ Par Value	Description of Investment	Selling Price	Cost Basis	Net Profit or (Loss) on Sale
32	Agere Systems, Inc Cl A	$ 29	$ -	$ 29
793	Agere Systems, Inc Cl B	682	-	682
4,000	Agrium 8% Canadian Orig Pfd	80,500	100,000	(19,500)
4,000	Airborne Freight Corp	90,731	144,280	(53,549)
5,000	Alabama Power Cap Tr II 7 65% Pfd	100,000	100,000	-
4,000	Alliance Capital Mgmt Hldg	116,400	194,571	(78,171)
2,000	APW Ltd	*	48,908	(48,908)
3,000	Axcelis Technologies Inc	39,179	28,166	11,013
500	Bank of America Corp	34,277	34,186	91
$100,000	Bank of America Corp Sub 7 1%	96,500	100,000	(3,500)
450	Bellsouth Corp	17,411	17,264	147
$100,000	Bellsouth Telecommunications	102,625	101,515	1,110
3,000	Boston Scientific Corp	80,185	88,941	(8,756)
2,300	Chase Pfd. Cap. Corp 8 1% Cum Series A	57,500	57,500	-
$50,000	Chesapeake & Potomac Tel Co 7 25%	50,470	46,375	4,095
500	Coca Cola Co	23,135	33,077	(9,942)
5,000	Daimler-Chrysler A G	125,993	304,275	(178,282)
4,000	DuPont, E I deNemours & Co	121,815	196,164	(74,349)
4,000	EDF London Cap LP 8 625%	100,000	103,500	(3,500)
4,000	EIX Tr I 7 875% Pfd	66,625	100,000	(33,375)
4,000	EMC Corp	17,280	98,289	(81,009)
4,000	Ericsson, L M Tel Co Cl B	2,440	47,442	(45,002)
$100,000	Ford Motor Credit Med Term 7 125%	100,000	100,000	-
3,000	Freddie Mac	126,106	130,130	(4,024)
5,500	General Motors Corp Cl H	42,895	92,097	(49,202)
2,000	Goodyear Tire & Rubber Co	16,500	127,270	(110,770)
2,000	Guidant Corp	58,780	131,501	(72,721)
4,000	Independent Cap Tr I 9 28% Pfd	100,000	100,000	-
1,000	IBM Corp	71,400	109,704	(38,304)
2,000	Johnson & Johnson Co	110,000	95,791	14,209
696	Ladenburg Thalmann Finl Svcs	494	15,693	(15,199)
3,527	Legg Mason Value Trust	145,737	251,186	(105,449)
$100,000	Lehman Bros Hldgs. Inc Med Term Notes 7 250%	100,000	100,000	-
3,000	Lucent Technologies, Inc	2,100	161,529	(159,429)
2,000	Microsoft Corp	52,320	67,271	(14,951)
4,000	MidAmerican Energy 7 98% Pfd	100,000	100,000	-

Statement 2 - Form 990 - Part I - Line 8c

The Masonic Home of Pennsylvania
and the
Wm L. Elkins Masonic Orphanage for Girls

STATEMENT OF PROFIT (LOSS) ON SALE OF INVESTMENTS (CONTINUED)

For the Year ended December 31, 2002

Shares/ Par Value	Description of Investment	Selling Price	Cost Basis	Net Profit or (Loss) on Sale
$ 50,000	N J Bell Tel Co Deb 7 25%	50,565	45,187	5,378
$100,000	Phillip Morris Cos Inc Notes 7 5%	100,000	100,269	(269)
4,000	Phillips 66 Cap 8 24% Pfd	100,000	100,000	-
110	Phoenix Companies, Inc	1,828	2,046	(218)
1,000	Proctor & Gamble Co	90,380	97,154	(6,774)
172	Qwest Communications Intl , Inc	1,531	2,215	(684)
2,000	Rite Aid Corp	3,860	14,902	(11,042)
497	SBC Communications	17,253	18,041	(788)
40	Smucker, J M Co	1,407	1,533	(126)
2,000	Sovereign Bancorp, Inc.	27,537	21,356	6,181
4,000	Sun Microsystems, Inc	11,480	96,573	(85,093)
4,000	Telebanc Cap Tr II 9%	76,440	94,500	(18,060)
4,000	Tyco International Ltd	49,600	148,944	(99,344)
2,000	United Parcel Service Inc	126,100	135,568	(9,468)
2,100	Vector Group Ltd	24,906	60,802	(35,896)
200	Verizon Communications	8,936	9,120	(184)
6,000	Western Digital Corp	35,700	175,315	(139,615)
4,000	Williams Communications Group	*	16,319	(16,319)
2,000	Williams Companies Inc	3,220	71,441	(68,221)
4,500	Worldcom Inc	612	244,007	(243,395)
180	Worldcom Inc. - MCI	30	9,384	(9,354)
3,000	Xcel Energy Inc	27,270	87,126	(59,856)
200	Zimmer Holdings Inc	6,755	5,439	1,316
	Totals	$3,115,519	$5,083,866	$(1,968,347)

*Considered Worthless

Statement 7 - Form 990 - Part IV - Line 54

The Masonic Home of Pennsylvania
and the
Wm L Elkins Masonic Orphanage for Girls

STATEMENT OF STOCKS OWNED

December 31, 2002

Shares		Fair Value	Book Value	Income
2,000	America Online, Inc	$ 26,200	$ 127,490	$ 1,000
4,000	American Finl Cap Tr I 9 125% Pfd	100,400	104,500	9,125
4,000	BGE Capital Tr I 7 16%	101,280	100,000	7,160
1,500	Bank of America Corp	104,354	102,559	9,050
2,000	Bank One Corp	73,100	114,558	3,680
1,400	BankNorth Group Inc	31,640	33,329	210
1,200	BP PLC Spons ADR	48,780	50,736	480
2,000	Bristol Myers Squibb Co	46,300	107,343	2,240
1,000	Cadbury Schweppes LP 8 625% Pfd	25,470	25,000	2,156
700	Chevron Texaco Corp	46,536	51,800	490
3,000	Cisco Systems Inc	39,270	187,216	-
1,200	Citigroup Inc	42,228	42,708	216
1,500	Coca Cola Co.	65,760	99,231	1,200
357	Del Monte Foods Co	2,831	2,441	-
3,000	Disney, Walt Holding Co	48,930	116,888	-
4,000	Duquesne Cap LP Monthly Income 8 375% Pfd	100,600	100,000	8,375
2,000	Eastman Kodak Co	70,080	155,905	5,250
2,000	Emerson Electric Co	101,700	137,187	5,210
4,000	Entergy Gulf States Cap 8 75% Pfd	101,960	100,000	8,750
4,000	Equitable Res Cap Tr I 7 35% Pfd	100,000	100,000	7,350
2,000	Fine Host Corp	-	61,407	-
1,400	Fleet Boston Financial Corp	34,020	30,520	-
4,500	General Electric Co	109,575	208,344	5,110
4,000	Health Care Ppty Invs Inc 8 6% Pfd	100,000	100,000	8,600
800	Heinz, H J Co	26,296	22,533	-
600	Hershey Foods Corp A	40,464	37,410	196
5,265	Hewlett Packard Co	91,400	202,200	1,482
1,200	Home Depot Inc	28,824	35,976	72
2,000	Honeywell Intl Inc	48,000	124,035	3,100
4,000	Intel Corp	62,280	222,155	320
1,000	IBM Corp	77,500	109,704	3,546
4,000	Istar Financial Inc 9 375% Pfd. Ser B	102,000	100,000	9,375
1,800	J P. Morgan Chase & Co	43,200	34,020	-
1,300	Keycorp	32,682	32,253	390
2,000	Koninklijke Phillips Electric	35,360	66,043	4,534
4,000	Lehman Bros Holdings Cap Tr. I 8 0% Pfd	103,600	100,000	8,000
2,000	Lilly, Eli & Co	127,000	169,595	5,180
1,300	May Department Stores	29,874	31,655	309

Statement 7 - Form 990 - Part IV - Line 54

The Masonic Home of Pennsylvania
and the
Wm L Elkins Masonic Orphanage for Girls

STATEMENT OF STOCKS OWNED (CONTINUED)

December 31, 2002

Shares		Fair Value	Book Value	Income
1,600	McDonald's Corp	$ 25,728	$ 27,856	$ 376
900	Merck & Co , Inc	50,949	45,045	-
1,000	Microsoft Corp	51,710	67,271	-
4,000	Motorola Inc	34,600	88,497	640
2,000	New Plan Excel Realty Trust	38,180	30,079	3,300
4,000	Nipsco Capital Markets Inc 7 75% Ser. A	100,000	100,000	7,750
4,000	Oracle Corp	43,200	167,061	-
1,500	Pfizer, Inc	45,855	49,710	195
4,687	Philadelphia Suburban Corp	96,552	74,001	2,519
4,000	Philip Morris Cos Inc	162,120	133,826	16,817
1,200	Pitney Bowes Inc	39,192	39,408	354
800	PNC Financial Services	33,520	29,940	-
1,000	Proctor & Gamble Co	85,940	97,154	1,580
1,200	Provident Financial Group Inc	31,128	31,373	288
1,100	Sara Lee Corp	24,761	24,849	-
1,500	SBC Communications	40,665	36,600	-
3,000	Schering Plough Corp	66,600	155,764	2,010
2,000	Sovereign Bancorp, Inc	28,100	21,357	200
1,700	U S Bancorp Del	36,074	34,969	-
1,500	Verizon Communications	58,125	52,200	560
4,000	Virginia Electric & Power Co 7 15% Pfd	102,200	100,000	7,150
1,000	Washington Mutual Inc	34,530	34,650	280
1,200	Wyeth	44,880	42,480	276
	Income on Securities Sold			100,249
	Income on Charitable Gift Annuity Investments			1,903
	Income on Designated Cash Investments			9,458
	Other Interest Earned			2,461
	Totals	$3,644,103	$5,030,831	$280,522

Statement 7 - Form 990 - Part IV - Line 54

The Masonic Home of Pennsylvania
and the
Wm L Elkins Masonic Orphanage for Girls

STATEMENT OF BONDS OWNED

December 31, 2002

Par Value		Rate of Interest	Maturity Date	Fair Value	Book Value	Income
$100,000	Aetna, Inc - Debenture	7 250	08/15/2023	$ 111,275	$ 92,708	$ 7,250
$100,000	Citicorp Subordinated Notes	7 750	06/15/2006	114,120	99,759	7,750
$175,000	GTE North Inc	7 625	05/15/2026	187,541	180,781	13,344
$100,000	General Motors Acceptance Corp Notes	8 000	11/01/2031	100,544	105,904	7,978
$100,000	Iowa Electrical Light & Power Co , Mtg	7 000	10/01/2023	102,774	98,329	7,000
$100,000	Morgan, J P & Co , Inc Subordinated Notes	7 625	09/15/2004	107,893	100,165	7,625
$100,000	Morgan Stanley Group Inc Deb	7 250	10/15/2023	104,363	92,682	7,250
$100,000	NationsBank Corp Subordinated Notes	7 750	08/15/2004	108,908	99,859	7,750
$ 50,000	NationsBank Corp. Sr Notes	7 250	10/15/2025	58,322	50,924	3,625
	Total Bonds			$ 995,740	$ 921,111	$ 69,572

Statement 8 - Form 990 - Part IV - Line 56

The Masonic Home of Pennsylvania
and the
Wm L Elkins Masonic Orphanage for Girls

STATEMENT OF THE WM L ELKINS ENDOWMENT FUND

December 31, 2002

Shares/ Par Value		Rate of Interest	Maturity Date	Fair Value	Book Value	Income
5,000	Barclays Bank PLC 8% Conv Note			$128,000	$125,000	$ 10,000
$ 5,000	Broken Arrow Municipal Authority	7 875	5/01/2011	6,129	3,570	394
2,000	Ford Motor Credit Co Sr Note	7 600	3/01/2032	49,600	50,000	2,892
$ 50,000	Ford Motor Credit Global Landmark Secs	7 450	7/16/2031	43,494	49,117	1,863
4,000	HRPT Properties Trust 9 875%			105,600	100,000	9,875
1,000	Provident Trust II	10 000	2/28/2030	27,000	25,000	1,875
4,000	MCI Capital 8% Cum Pfd.			22,000	100,000	2,000
4,000	Pennfed Capital Tr. 8 90% Pfd			101,400	100,000	8,900
5,000	Traveler's P & C Capital Tr 8 08% Pfd.			125,750	125,000	10,100
$100,000	Wal-Mart Stores Notes	7 500	5/15/2004	107,317	100,312	7,500
	Ryan Beck & Co - Cash Management			52,607	52,607	-
	Income on Securities Sold			-	-	3,373
	Total			$768,897	$830,606	$ 58,772

Statement 8 - Form 990-Part IV - Line 56

The Masonic Home of Pennsylvania
and the
Wm L Elkins Masonic Orphanage for Girls

STATEMENT OF THE MINIMUM RESERVE REQUIREMENT FUND

December 31, 2002

Shares/ Par Value		Fair Value	Book Value	Income
2,000	Allegiant Capital Tr II	$ 51,800	$ 50,000	$ 3,375
4,000	Bankunited CAP II TR 9 60% Pfd	101,600	107,500	9,600
$100,000	Boston Edison Co Deb 7 80% due 3/15/2023	104,541	102,650	7,800
$100,000	Disney Walt Co 7 00% due 3/01/2032	103,375	100,000	3,558
4,000	FCB Inc Cap Tr II 8 4%	106,400	100,000	10,313
4,000	Foster Wheeler Capital 9 0% Pfd	5,600	100,000	-
4,000	Hartford Capital 7 7% Cum Pfd	100,200	100,000	7,700
4,000	Hercules Trust 9 42% Pfd	86,200	100,000	9,420
4,000	Host Marriott Corp 10 0% Pfd	104,600	100,000	10,000
$100,000	Motorola Inc Notes 7 625%	102,375	100,000	7,625
4,000	Textron Cap I Tr 7 92% Pfd	100,960	100,000	7,920
	Ryan Beck & Co - Cash Management	146,266	146,266	-
	Total	$1,113,917	$1,206,416	$ 77,311

230846955 05/08/2003 4 48 PM

Form **8868**
(December 2000)
Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return

OMB No 1545-1709

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box ▶ ☒
- If you are filing for an **Additional (not automatic) 3-Month Extension, complete only Part II** (on page 2 of this form)

Note: Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Part I Automatic 3-Month Extension of Time- Only submit original (no copies needed)

Note Form 990-T corporations requesting an automatic 6-month extension-check this box and complete Part I only ▶ ☐

All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041

Type or print File by the due date for filing your return See instructions	Name of Exempt Organization	Employer identification number
	MASONIC HOME OF PENNSYLVANIA	23-0846955
	Number, street, and room or suite no If a P O box, see instructions 801 RIDGE PIKE	
	City, town or post office, state, and ZIP code For a foreign address, see instructions LAFAYETTE HILL PA 19444-1799	

Check type of return to be filed (file a separate application for each return)

☒ Form 990	☐ Form 990-T (corporation)	☐ Form 4720
☐ Form 990-BL	☐ Form 990-T (sec 401(a) or 408(a) trust)	☐ Form 5227
☐ Form 990-EZ	☐ Form 990-T (trust other than above)	☐ Form 6069
☐ Form 990-PF	☐ Form 1041-A	☐ Form 8870

- If the organization does **not** have an office or place of business in the United States, check this box ▶ ☐
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the **whole** group, check this box ▶ ☐ If it is for part of the group, check this box ▶ ☐ and attach a list with the names and EINs of all members the extension will cover

1 I request an automatic 3-month (6-month, for **990-T corporation**) extension of time until 8/15/03 , to file the exempt organization return for the organization named above The extension is for the organization's return for
▶ ☒ calendar year 2002 or
▶ ☐ tax year beginning _____ , and ending _____

2 If this tax year is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions $ _____

b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit $ _____

c **Balance Due** Subtract line 3b from line 3a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions $ _____

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature ▶ [signature] Title ▶ CPA Date ▶ 5/08/03

For Paperwork Reduction Act Notice, see instruction

Form **8868** (12-2000)

DAA