

Form 990-EZ

Short Form Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-1150

2017

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990EZ for instructions and the latest information

A For the 2017 calendar year, or tax year beginning, 2017, and ending

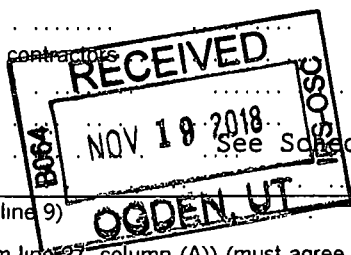
B Check if applicable: Address change, Name change, Initial return, Final return/terminated, Amended return, Application pending. C Eloy Chamber of Commerce-1, 305 North Stuart Boulevard, ELOY, AZ 85131. D Employer identification number: 86-0292290. E Telephone number. F Group Exemption Number.

G Accounting Method: [X] Cash. I Website: http://eloychamber.com/. J Tax-exempt status: [X] 501(c)(6). H Check [X] if the organization is not required to attach Schedule B.

K Form of organization: [] Corporation, [] Trust, [] Association, [] Other. L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. \$ 67,171.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Check if the organization used Schedule O to respond to any question in this Part I [X]

Table with 21 rows and 3 columns: Line number, Description, Amount. Includes categories like Contributions, Gaming, Sales, and Expenses. Total revenue is 67,171. Total expenses is 63,360. Net assets at end of year is 33,236.



SCANNED FEB 06 2019

Handwritten signature or initials.

Part II Balance Sheets (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	27,671.	33,687.
23 Land and buildings		
24 Other assets (describe in Schedule O) See Schedule O	925.	925.
25 Total assets	28,596.	34,612.
26 Total liabilities (describe in Schedule O) See Schedule O	-829.	1,376.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	29,425.	33,236.

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III

Expenses

(Required for section 501(c)(3) and 501(c)(4) organizations, optional for others.)

What is the organization's primary exempt purpose? See Schedule O

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

28 See Schedule O		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	28 a	
29		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	29 a	
30		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	30 a	
31 Other program services (describe in Schedule O)		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31 a	
32 Total program service expenses (add lines 28a through 31a)	32	

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated - see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Robert Duke Vice President	2	0.	0.	0.
Bette Taylor Director	2	0.	0.	0.
Isabel Morales Director	1.5	0.	0.	0.
Bill Pittman Director	4	0.	0.	0.
Nat Smith Director	1.5	0.	0.	0.
Terry Strain President	2	0.	0.	0.
Todd thomas Director	2	0.	0.	0.
John Gluch Director	1	0.	0.	0.
Toni Lorona Treasurer	1	0.	0.	0.
Mark Benner CEO	44	29,275.	0.	0.
Terri Auckland Director	1.5	0.	0.	0.
Toni Lorona Vice President	0	0.	0.	0.

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V.

33 Did the organization engage in any significant activity not previously reported to the IRS?
34 Were any significant changes made to the organizing or governing documents?
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities?
35b If 'Yes,' to line 35a, has the organization filed a Form 990-T for the year?
35c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year?
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year?
37a Enter amount of political expenditures, direct or indirect, as described in the instructions.
37b Did the organization file Form 1120-POL for this year?
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?
38b If 'Yes,' complete Schedule L, Part II and enter the total amount involved.
39 Section 501(c)(7) organizations. Enter
39a Initiation fees and capital contributions included on line 9
39b Gross receipts, included on line 9, for public use of club facilities.
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911, section 4912, and section 4955.
40b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ?
40c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958.
40d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization.
40e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?
41 List the states with which a copy of this return is filed.

42a The organization's books are in care of: MARK BENNER
Located at: 305 North Stuart Boulevard ELOY AZ
Telephone no.: (520) -466-3411
ZIP + 4: 85131

42b 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?
42c At any time during the calendar year, did the organization maintain an office outside the United States?
See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year.

44a Did the organization maintain any donor advised funds during the year?
44b Did the organization operate one or more hospital facilities during the year?
44c Did the organization receive any payments for indoor tanning services during the year?
44d If 'Yes' to line 44c, has the organization filed a Form 720 to report these payments?
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?
45b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I

	Yes	No
46		X

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

47 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

	Yes	No
47		

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E

48		
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49a Did the organization make any transfers to an exempt non-charitable related organization?

49a		
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b If 'Yes,' was the related organization a section 527 organization?

49b		
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50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation

d Total number of other independent contractors each receiving over \$100,000

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations must attach a completed Schedule A Yes No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here
 Signature of officer: Mark Benner Date: 11/15/2018
 Type or print name and title: Mark Benner Executive Director

Paid Preparer Use Only
 Print/Type preparer's name: Leon Potter Preparer's signature: Leon Potter Date:
 Firm's name: Leon Potter dba Master Tax Advisors Check if self-employed PTIN: P00639404
 Firm's address: 43539 W Roth Rd Firm's EIN: 33-0948782
Maricopa, AZ 85138 Phone no: 5205825425

May the IRS discuss this return with the preparer shown above? See instructions Yes No

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

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.

2017

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

Name of the organization

Employer identification number

Eloy Chamber of Commerce-1

86-0292290

Form 990-EZ, Part I, Line 16
Other Expenses

Advertising and Promotion....	\$ 1,068.
AZ Chamber Executive Dues.....	630.
Board luncheon.....	276.
Circus Ad.....	63.
Circus expenses.....	1,757.
City Tax.....	16.
Conferences, Conventions, and Meetings.....	221.
Contest Winner.....	100.
Contract for Labor/Intern.....	720.
Customer Appreciation.....	75.
Dues&Subscriptions.....	264.
EDGE Tickets.....	20.
Golf Tournament.....	136.
Golf tournament Luncheon.....	3,254.
Golf tournament Tee Bags.....	144.
Golf Tournament/exec dir reimb.....	1,535.
Information Technology.....	866.
Insurance.....	1,186.
misc.....	906.
Office Expenses.....	3,724.
Presold Tickets expense.....	1,324.
reconciliation discrepancy.....	-10.
Travel.....	1,868.
Various exec director reimburs.....	1,506.
Total	\$ 21,649.

Form 990-EZ, Part II, Line 24
Other Assets

	<u>Beginning</u>	<u>Ending</u>
Prepaid Expenses and Deferred Charges.....	\$ 925.	\$ 925.
Total	\$ 925.	\$ 925.

Form 990-EZ, Part II, Line 26
Total Liabilities

	<u>Beginning</u>	<u>Ending</u>
Accounts Payable and Accrued Expenses.....	\$ -25.	\$ 1,951.
Liabilities_Other.....	-804.	-575.
Total	\$ -829.	\$ 1,376.

Form 990-EZ, Part III - Organization's Primary Exempt Purpose

The Eloy Chamber of Commerce Shall Provide community leadership, be the voice of business through advocacy, networking and education. We also provide visitor information and are open daily to provide all citizens of Eloy with Helpful information on how and where people want to live, work and play. Chamber membership is open to all businesses and individual members, it si an investment in the

Name of the organization

Employer identification number

Eloy Chamber of Commerce-1

86-0292290

Form 990-EZ, Part III - Organization's Primary Exempt Purpose (continued)

present and future of Eloy.

Form 990-EZ, Part III, Line 28 - Statement of Program Service Accomplishments

2017 Chamber Accomplishments: We service 98 Businesses and 5 individuals who pay membership dues., including 13 non-profit organizations. Twice a year we provide local service organizations a venue to display their services and network with our membership at no cost. We provided 8 business luncheons with relevant speakers, & 7 business mixers as well. We assisted approximately 30 local citizens & businesses with City contacts & City services. We provide mailing packets for anyone interested in relocating to the Eloy Community. We maintain a website which includes our community guide. We are the liaison for our business clients who need assistance & representation to solve problems working with the City on code & zoning issues, we have successfully provided 2 businesses with a course of action to allow our businesses to successfully gain approval on projects when they had no other recourse. We are the "Go To" Place for Eloy businesses, citizens & winter visitors to garner information on City Services, zoning requirements & local area tourist attractions. Contest each December. We distributed yard signs that identified the "Winning Participants and published their names in the local paper, Eloy Enterprise. We assist, as MC and recruit the keynote speaker for Eloy's Veterans Day Celebration. We sponsored the Memorial Day Program, Eloy Cemetery each year (103 attendees.) We recruited the keynote speaker and administered the role of master of ceremonies. We provided the meeting venue and serve as the Chair on the Eloy Downtown Advisory Council, we worked closely with the Eloy Economic Development Consultant and serve as the Chairman of The Eloy Downtown Advisory Commission as appointed by Eloy's City Council. We also represent businesses and individual interests in resolving disputes with city departments, cutting through red tape and interaction involving working with the City of Eloy. We provided

Employer identification number

86-0322290

Elroy Chamber of Commerce-I

Form 990-EZ, Part III, Line 28 - Statement of Program Service Accomplishments

access for the public to attend, "A State of the City" presentation & "Final
 County Economic Development presentation in which over 130 people attended. We
 answered any and all citizen's requests involving the community, city services and
 local tourism questions, during our 365 days a year business cycle.