

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

2018

- ▶ 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.

Department of the Treasury
Internal Revenue Service

Open to Public Inspection

A For the 2018 calendar year, or tax year beginning , 2018, and ending ,

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> 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 Cash Accrual Other (specify) ▶ _____

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

I Website: ▶ <http://eloychamber.com/>

J Tax-exempt status (check only one) – 501(c)(3) 501(c) (6) ◀(insert no) 4947(a)(1) or 527

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)) are \$500,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$ 62,045.

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

Revenue	1 Contributions, gifts, grants, and similar amounts received	1	44,201.
	2 Program service revenue including government fees and contracts	2	248.
	3 Membership dues and assessments	3	16,580.
	4 Investment income	4	
	5a Gross amount from sale of assets other than inventory	a	
	b Less cost or other basis and sales expenses	5b	
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6 Gaming and fundraising events		
	a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	1,016.
	b Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	
	c Less direct expenses from gaming and fundraising events	6c	
	d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	1,016.
	7a Gross sales of inventory, less returns and allowances	7a	
	b Less cost of goods sold	7b	
	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
	8 Other revenue (describe in Schedule O)	8	
	9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	62,045.
	10 Grants and similar amounts paid (list in Schedule O)	10	1,861.
	11 Benefits paid to or for members	11	7,934.
	12 Salaries, other compensation, and employee benefits	12	36,853.
	13 Professional fees and other payments to independent contractors	13	1,359.
14 Occupancy, rent, utilities, and maintenance	14	1,486.	
15 Printing, publications, postage, and shipping	15	177.	
16 Other expenses (describe in Schedule O)	16	19,112.	
17 Total expenses. Add lines 10 through 16	17	68,782.	
18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-6,737.	
19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	33,383.	
20 Other changes in net assets or fund balances (explain in Schedule O)	20		
21 Net assets or fund balances at end of year. Combine lines 18 through 20	21	26,646.	

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IRS - OSC - 14
JAN 31 2020
OGDEN, UTAH
See Schedule O

SCANNED
EXPENSES
NET ASSETS
MAR 20 2020

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2018)

99
4

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	33,687.22	25,656.
23 Land and buildings		23
24 Other assets (describe in Schedule O) See Schedule O	880.24	925.
25 Total assets	34,567.25	26,581.
26 Total liabilities (describe in Schedule O) See Schedule O	1,184.26	-65.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	33,383.27	26,646.

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

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

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

28 See Schedule O		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	
29		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	
30		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	
31 Other program services (describe in Schedule O)		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	
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 Treasurer	2	0.	0.	0.
Elizabeth Taylor Director	2	0.	0.	0.
Isabel Morales Treasurer	1.5	0.	0.	0.
Bill Pittman Chairman	5	0.	0.	0.
Nat Smith Director	1	0.	0.	0.
Terry Strain Chairman	2.5	0.	0.	0.
Todd Thomas Vice President	2.5	0.	0.	0.
John Gluch Director	1.5	50.	0.	0.
Toni Lorona Treasurer	1	50.	0.	0.
Mark Benner CEO	44	31,567.	0.	0.
Terri Ackland 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

	Yes	No
33 Did the organization engage in any significant activity not previously reported to the IRS? If 'Yes,' provide a detailed description of each activity in Schedule O		X
34 Were any significant changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions		X
35 a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?		X
b If 'Yes' to line 35a, has the organization filed a Form 990-T for the year? If 'No,' provide an explanation in Schedule O		
c 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? If 'Yes,' complete Schedule C, Part III		X
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N		X
37 a Enter amount of political expenditures, direct or indirect, as described in the instructions 37 a 0.		
b Did the organization file Form 1120-POL for this year?		X
38 a 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?		X
b If 'Yes,' complete Schedule L, Part II and enter the total amount involved 38 b N/A		
39 Section 501(c)(7) organizations Enter		
a Initiation fees and capital contributions included on line 9 39 a N/A		
b Gross receipts, included on line 9, for public use of club facilities 39 b N/A		
40 a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 38 b N/A, section 4912 39 a N/A, section 4955 39 b N/A		
b 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? If 'Yes,' complete Schedule L, Part I 40 b		
c 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 40 c 0.		
d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax on line 40c reimbursed by the organization 40 d 0.		
e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T 40 e		X
41 List the states with which a copy of this return is filed 41 None		

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

	Yes	No
b 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)? If 'Yes,' enter the name of the foreign country 42 b		X
See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)		
c At any time during the calendar year, did the organization maintain an office outside the United States? If 'Yes,' enter the name of the foreign country 42 c		X

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 **43** N/A

	Yes	No
44 a Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ 44 a		X
b Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ 44 b		X
c Did the organization receive any payments for indoor tanning services during the year? 44 c		X
d If 'Yes' to line 44c, has the organization filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O 44 d		
45 a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 45 a		X
b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions 45 b		X

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 R. Benner* Date: *1/27/2020*
 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: _____
 Check if self-employed PTIN: **P00639404**
 Firm's name: **Leon Potter dba Master Tax Advisors** Firm's EIN: **33-0948782**
 Firm's address: **43539 W Roth Rd Maricopa, AZ 85138** Phone no: **5205825425**

May the IRS discuss this return with the preparer shown above? See instructions

Yes No

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

49a Did the organization make any transfers to an exempt non-charitable related organization? 49a
b If 'Yes,' was the related organization a section 527 organization? 49b

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.'

Table with 5 columns: (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.'

Table with 3 columns: (a) Name and business address of each independent contractor, (b) Type of service, (c) Compensation. Includes a stamp: RECEIVED IN CORRES IRS OSC-09 NOV 27 2019 OGDEN, UTAH

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: 11/13/2019

Mark Benner Executive Director Type or print name and title

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

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

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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.

2018

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

Employer identification number

Eloy Chamber of Commerce-1

86-0292290

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

Adj Journ p/r test discrep	\$	-2.
Advertising and Promotion		2,329.
Arizona Corporation Co.		10.
Award Plaques		265.
AZ Chamber Executive Dues		280.
Board Member Meetings		104.
Cell & Mile Reim		2,688.
Cell Phone Reimbursement		249.
Conferences, Conventions, and Meetings		120.
Contest Winner		140.
Dues&Subscriptions		49.
Eloy City Council Work Session		20.
Golf Tournament Prizes		500.
Information Technology		232.
Insurance		2,518.
Mileage Reimbursement		1,259.
Office Expenses		3,220.
Travel		33.
Var exec dir reim Jan-Mar 2017		868.
Various Golf Tournament		1,665.
Various Golf Tourney Exp Reim		2,565.
Total	\$	19,112.

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

	<u>Beginning</u>	<u>Ending</u>
Accounts Receivable	\$ -45.	\$ 0.
Prepaid Expenses and Deferred Charges	925.	925.
Total	\$ 880.	\$ 925.

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

	<u>Beginning</u>	<u>Ending</u>
Accounts Payable and Accrued Expenses	\$ 1,951.	\$ 645.
AZ Income Tax	2.	7.
AZ Unemployment Tax	-43.	-50.
Federal Taxes (941)	531.	595.
Federal Unemployment (940)	40.	36.
Federal Unemployment Payable	-110.	-110.
Payroll Liabilities	-804.	-804.
Rounding Error	0.	-1.
Social Security & Medicare	-383.	-383.
Total	\$ 1,184.	\$ -65.

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.

NOV 27 2019

Name of the organization

Employer identification number

Eloy Chamber of Commerce-1

86-0292290

OGDEN, UTAH

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

Our marketing efforts have increased in the last year and we will continue to take advantage of all opportunities. We plan to trim our operating budget by over \$ 5,000.00 for fiscal 2019-2020 to balance our proposed budget. Our Chamber is in good shape, since 2015, our Chamber membership has continued to grow, (not many chambers in Pinal County can say the same.) we are 115 members strong, a 10% increase over 2017. Our efforts for marketing the Eloy Community continues with a year-round program. The Chamber funds, operates and maintains a chamber website and offers continuous marketing which provides up to date information about our community, member businesses and local attractions. We hold quarterly business luncheons with speakers that share their knowledge with our members including 'State of the City of Eloy' annual business luncheon, the annual presentation by Tim Kanavel the Economic Development Director in Pinal County. We sponsor the Awards banquet for local businesses, in 2018 we included new awards for the City of Eloy "employee of the year" as well as Eloy Police Department's "employee of the year." We distribute our business directory & community guide to all Eloy Businesses, our membership, and also by request to Eloy Citizen's (including mailings to those individuals who request a relocation / informational packet when considering moving to Pinal County.) We also provide statewide tourist brochures and pamphlets for visitors to Eloy. Social media continues to grow and we have added additional videos including Facebook live broadcasts to promote Eloy events. Our Facebook Chamber Business Page and our Chamber Website garners more than 1,000 people (interested in the Eloy community,) visiting our website. Google analytics would show a higher visitor count however, our security parameter is tight and we eliminate potentially nefarious hits from accessing our chamber website. The Eloy Chamber as the recognized destination marketing organization for our community is also the primary source to provide these services to the City, and we have done so

Name of the organization

Eloy Chamber of Commerce-1

Employer identification number

86-0292290

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

for the last 70 years. Working closely with Eloy's Economic Development Consultant, Jeff Fairman, we aggressively promote the City by identifying the excellent potential for start-up businesses or those considering relocating their operation to Eloy, Arizona. The Eloy Chamber makes the connections that businesses look for when Eloy is on their radar. Page Two: 2018 Eloy Chamber Accomplishments Our Downtown Tour of Empty Buildings is held twice a year, in 2018 we partnered with the City, "Community Development") has seen a reduction of building vacancies as two additional buildings have either been sold or opened. Additionally, the Chamber is responsible for the Eloy Electric Lights Contest, we provided local citizens prizes in excess of \$175.00 for the winning entries. The Chamber donated \$600.00 to local charities from money raised at our annual golf tourney in 2018. We conduct a Memorial Day Ceremony, in 2018 we had 103 attendees from the local community. We serve on the Eloy Veterans Committee and assist with sponsoring the Veterans Day Parade & Ceremony, 115 citizens attended in 2018. Sincerely,

Mark Benner Chief Executive Officer

Mark R. Benner
 11/12/2019