

Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

OMB No 1545-1150

2012

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

“Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions). All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form

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

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

A For the 2012 calendar year, or tax year beginning 04/01/12, and ending 03/31/13

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization BENEVOLENT & PROTECTIVE ORDER OF ELKS #1300 WATSONVILLE Number and street (or P O box, if mail is not delivered to street address) Room/suite 121 MARTINELLI STREET City or town, state or country, and ZIP + 4 WATSONVILLE CA 95076	D Employer identification number 94-0317347 E Telephone number 831-724-2493 F Group Exemption Number ◆ 1156
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G Accounting Method Cash Accrual Other (specify) **◆** _____

I Website: **◆ N/A**

J Tax-exempt status (check only one) — 501(c)(3) 501(c) (**8**) • (insert no) 4947(a)(1) or 527

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

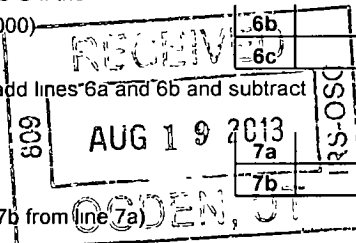
K Check if the organization is not a section 509(a)(3) supporting organization or a section 527 organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.

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, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ **◆ \$ 179,057**

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

	1 Contributions, gifts, grants, and similar amounts received			
	2 Program service revenue including government fees and contracts			
	3 Membership dues and assessments		See Statement	23,142
	4 Investment income			407
	5a Gross amount from sale of assets other than inventory	5a		
	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		
	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	
	7a Gross sales of inventory, less returns and allowances	7a	17,534	
	b Less cost of goods sold	7b	7,036	
	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)			10,498
	8 Other revenue (describe in Schedule O)			137,974
	9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8			172,021
	10 Grants and similar amounts paid (list in Schedule O)			
	11 Benefits paid to or for members			
	12 Salaries, other compensation, and employee benefits			23,338
	13 Professional fees and other payments to independent contractors			3,400
	14 Occupancy, rent, utilities, and maintenance			89,673
	15 Printing, publications, postage, and shipping			3,737
	16 Other expenses (describe in Schedule O)			84,376
	17 Total expenses. Add lines 10 through 16			204,524
	18 Excess or (deficit) for the year (Subtract line 17 from line 9)			-32,503
	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)			328,462
	20 Other changes in net assets or fund balances (explain in Schedule O)			
	21 Net assets or fund balances at end of year. Combine lines 18 through 20			295,959



Expenses SCANNED SEP 04 2013 Revenue

8
22

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	214,506	22	196,965
23 Land and buildings	70,129	23	70,129
24 Other assets (describe in Schedule O)	128,077	24	124,189
25 Total assets	412,712	25	391,283
26 Total liabilities (describe in Schedule O)	84,250	26	95,324
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	328,462	27	295,959

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 and section 4947(a)(1) trusts, optional for others)

28 OPERATES UNDER THE LODGE SYSTEM FOR THE EXCLUSIVE BENEFIT OF THE MEMBERS.

(Grants \$) If this amount includes foreign grants, check here 28a

29

(Grants \$) If this amount includes foreign grants, check here 29a

30

(Grants \$) If this amount includes foreign grants, check here 30a

31 Other program services (describe in Schedule O)

(Grants \$) If this amount includes foreign grants, check here 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
BERNICE TAPIZ EXALTED RULER	10.00	0	0	0
RICK FLORES LEADING KNIGHT	10.00	0	0	0
ANGELA FLORES LOYAL KNIGHT	10.00	0	0	0
ROSEMARIE LEWIS LECTURING KNIGHT	10.00	0	0	0
LAURA ROGERS SECRETARY	20.00	19,998	0	0
MERLE AVERY TREASURER	20.00	1,200	0	0
RICHARD RUELAS TRUSTEE	5.00	0	0	0
JOE TAPIZ TRUSTEE	5.00	0	0	0
ABEL CAMPOS TRUSTEE	5.00	0	0	0
WARREN ANDERSON TRUSTEE	5.00	0	0	0
RANDY MCCLELLAN TRUSTEE	5.00	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? If "Yes," provide a detailed description of each activity in Schedule O
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)
35a 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)?
35b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O
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? If "Yes," complete Schedule C, Part III
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
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, section 4955
40b Section 501(c)(3) and 501(c)(4) 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
40c Section 501(c)(3) and 501(c)(4) 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) and 501(c)(4) 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? If "Yes," complete Form 8886-T
41 List the states with which a copy of this return is filed
42a The organization's books are in care of
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 (such as a bank account, securities account, or other financial account)?
42c At any time during the calendar year, did the organization maintain an office outside the U S?
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? If "Yes," Form 990 must be completed instead of Form 990-EZ
44b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ
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? If "No," provide an explanation in Schedule O
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)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)

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 paid more than \$100,000	(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 ▶ _____

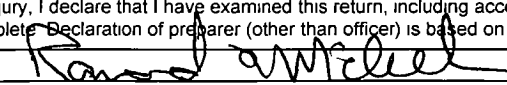
51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation

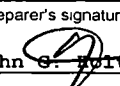
d Total number of other independent contractors each receiving over \$100,000

52 Did the organization complete Schedule A? **Note** All section 501(c)(3) organizations that are nonexempt charitable trusts must attach a completed Schedule A

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 provided to the preparer.

Sign Here 
 Signature of officer
 Randal E. McCholla
 Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature
John G. Holt, EA, ATA	 John G. Holt
Firm's name**	A J Holt Inc
Firm's address**	4209 W Magnolia Blvd Burbank, CA 91505-2726

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

SCHEDULE O
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZComplete 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.

OMB No 1545-0047

2012Open to Public
Inspection**BENEVOLENT & PROTECTIVE ORDER OF
ELKS #1300 WATSONVILLE**Employer identification number
94-0317347**Form 990-EZ, Part I, Line 8 - Other Revenue**

Description	Amount
MEMBERS RENT	\$ 67,645
LODGE ACTIVITIES	\$ 37,571
MISCELLANEOUS	\$ 18,035
PARKING LOT INCOME	\$ 14,723
Total	\$ 137,974

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

Description	Amount
BAR SALES	
LICENSES	\$ 1,704
BAR SUPPLIES	\$ 82
Non-investment Depreciation	\$ 720
Expenses	
Office	\$ 2,715
Conferences/Meetings	\$ 7,697
DIGNITARY ENT	\$ 1,108
PER CAPITA GL/STATE	\$ 4,150
TELEPHONE	\$ 1,898
LODGE ACTIVITIES	\$ 25,148
MEETING EXP	\$ 799
LANDSCAPING	\$ 3,252
YOUTH ACTIVITIES	\$ 2,748
BADGES/PINS	\$ 605

Name of the organization

BENEVOLENT & PROTECTIVE ORDER OF

Employer identification number

94-0317347

BANK CHARGES	\$	1,190
PERMITS & LICENSES	\$	550
POSTAGE	\$	495
INSTALLATION	\$	1,117
MISCELLANEOUS	\$	13,889
COPY MACHINE EXPENSE	\$	2,185
Non-investment Depreciation	\$	12,324
	Total \$	84,376

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

Description	Beg. of Year	End of Year
Inventories for Sale or Use	\$ 6,742	\$ 5,883
Prepaid Expenses and Deferred Charges	\$ 812	\$ 721
BUILDING, EQUIPMENT	\$ 539,445	\$ 552,285
Less Accumulated Depreciation	\$ 418,922	\$ 434,700
	Total \$ 128,077	\$ 124,189

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

Description	Beg. of Year	End of Year
Accounts Payable and Accrued Expenses	\$ 2,077	\$ 5,907
Mortgages and Notes Payable	\$ 26,500	\$ 26,500
Restricted Funds	\$ 55,673	\$ 62,917

Form 990-EZ, Part III - Primary Exempt Purpose

To inculcate the principles of Charity, Justice, Brotherly Love and Fidelity; to recognize a belief in God; to promote the welfare and enhance the happiness of its members; to quicken the spirit of American patriotism;

Name of the organization

BENEVOLENT & PROTECTIVE ORDER OF

Employer identification number

94-0317347

to cultivate good fellowship; to perpetuate itself as a fraternal organization, and to provide for its governance, the Benevolent and Protective Order of Elks of the United States of America will serve the people and communities through benevolent programs, demonstrating that Elks Care and Elks Share.

Form 990-EZ, Part III, Line 31 - All Other Accomplishment
OPERATES UNDER THE LODGE SYSTEM FOR THE EXCLUSIVE BENEFIT
OF THE MEMBERS.