

Form 990-EZ

Short Form

Return of Organization Exempt From Income Tax

OMB No 1545-1150

2015

Open to Public Inspection

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public. Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service

A For the 2015 calendar year, or tax year beginning 04-01-2015, and ending 03-31-2016

- B Check if applicable: Address change, Name change, Initial return, Final return/terminated, Amended return, Application pending

C Name of organization: BENEVOLENT AND PROTECTIVE ORDER OF ELKS 2626. Address: PO BOX 1329. City: CHESTER, CA 96020

D Employer identification number: 94-2711044. E Telephone number. F Group Exemption Number: 1156

G Accounting Method: Cash [checked] Accrual [checked] Other (specify)

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

I Website: N/A

J Tax-exempt status (check only one): 501(c)(3) [checked] 501(c)(8) (insert no) [] 4947(a)(1) [] 527 []

K Form of organization: Corporation [checked] 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. Total: \$127,239

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 [checked]

Table with 21 rows and 3 columns: Line number, Description, and Amount. Revenue section (lines 1-9) totals 121,593. Expenses section (lines 10-17) totals 118,493. Net Assets section (lines 18-21) totals 173,672.

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	120,490	22	143,536
23 Land and buildings	44,155	23	38,104
24 Other assets (describe in Schedule O)	38,148	24	37,267
25 Total assets	202,793	25	218,907
26 Total liabilities (describe in Schedule O)	32,221	26	45,235
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	170,572	27	173,672

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?
 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, TO CULTIVATE GOOD FELLOWSHIP,
 TO PERPETUATE ITSELF AS A FRATERNAL ORGANIZATION, AND TO PROVIDE FOR ITS GOVERNMENT,
 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

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

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 Additional Data Table		
(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)	<input type="checkbox"/>	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
TERRY PARSONS EXALTED RULE	000 00	0		
BUD WASON SECRETARY	000 00	0		
STEVE TROTTER TREASURER	000 00	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

Table with columns for question number, question text, and Yes/No response columns. Rows include questions 33 through 40e regarding significant activities, document changes, income, and tax shelter transactions.

41 List the states with which a copy of this return is filed CA
42a The organization's books are in care of STEVE TROTTER Telephone no (530) 258-3557
Located at PO BOX 1329 CHESTER, CA ZIP +4 96020

Table with columns for question number, question text, and Yes/No response columns. Rows include questions 42b and 42c regarding foreign financial accounts and offices.

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

Table with columns for question number, question text, and Yes/No response columns. Rows include questions 44a through 45b regarding donor advised funds, hospital facilities, and controlled entities.

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

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

Yes No

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

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

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

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

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

d Total number of other independent contractors each receiving over \$10

52 Did the organization complete Schedule A? NOTE. All Section 501(c)(3) 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 taxpayer).

Sign Here ***** Signature of officer BUD WASON SECRETARY Type or print name and title

Paid Preparer Use Only Prnt/Type preparer's name JOHN H BREAUX EA Preparer's signature Firm's name BARNARD & ASSOCIATES Firm's address 372 MAIN ST QUINCY, CA 95971

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

Additional Data

Software ID:
Software Version:
EIN: 94-2711044
Name: BENEVOLENT AND PROTECTIVE ORDER OF ELKS 2626

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

Describe what was achieved in carrying out the organization's exempt purposes. 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 501(c)(3) and 501(c)(4) organizations and 4947(a)(1) trusts; optional for others.)	
ALLOCATION OF CHARITABLE CONTRIBUTIONS INCLUDING SCHOLARSHIPS AND DIRECT 28 DONATIONS COMMUNITY AND SOCIAL EVENTS (Grants \$) If this amount includes foreign grants, check here . . . <input type="checkbox"/>	28a	
29 USED TO PROMOTE THE ELKS MISSION (Grants \$) If this amount includes foreign grants, check here . . . <input type="checkbox"/>	29a	

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at
www.irs.gov/form990.

OMB No 1545-0047

2015

**Open to Public
Inspection**

Name of the organization
BENEVOLENT AND PROTECTIVE ORDER OF
ELKS 2626

Employer identification number

94-2711044

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990-EZ, PAGE 1, ITEM C	LAKE ALMANOR ELKS
FORM 990-EZ, PART I, LINE 16	FOOD AND BEVERAGE SALES COST OF GOODS SOLD 31,229 EXPENSES SUPPLIES 7,956 CONVENTIONS/VISI TAION 5,181 PROGRAM EXPENSE 2,180 MEMBERSHIP 22 3,112 SCHOLARSHIPS AND DONATION 23,527 BADGES, SUNDRIES 4,601 ATTENDANCE DRAW 54 NON-INVESTMENT DEPRECIATION 147 TOTAL 78,009
FORM 990-EZ, PART II, LINE 24	INVENTORIES FOR SALE OR USE 5,058 5,058 68,158 68,158 LESS ACCUMULATED DEPRECIATION 65,867 66,748 LIQUOR LICENSE 30,799 30,799 TOTAL 38,148 37,267
FORM 990-EZ, PART II, LINE 26	ACCOUNTS PAYABLE AND ACCRUED EXPENSES 1,075 991 DEFERRED REVENUE 0 11,060 CHARITY 31,146 33,184
FORM 990-EZ, PART III	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, TO CULTIVATE GOOD FELLOWSHIP, TO PERPETUATE ITSELF AS A FRATERNAL ORGANIZATION, AND TO PROVIDE FOR ITS GOVERNMENT, 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	USED TO PROMOTE THE ELKS MISSION