Return of Organization Exempt From Income Tax

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. (Rev January 2020) Department of the Treasury Internal Revenue Service ♦ Go to www.irs.gov/Form990 for instructions and the latest information.

2019 Open to Public Inspection

<u>A</u>	For the	<u>e 2019 c</u>	lendar year, or tax year beginning $04/01/19$			20		
В	Check if a	pplicable	Name of organization <u>Bene</u> volent and Prot	ective Orde	r		D Employe	r identification number
\Box	Address c	hange	of Elks - Melrose L	odge #1031				
$\overline{\Box}$	N		Doing business as				04 - 1	611235
닏	Name cha	inge	Number and street (or P O box if mail is not delivered to street address)			Room/suite	E Telephon	
\sqcup	Initial retui	m	75 Myrtle Street				<u> 781-</u>	<u>665-9197 </u>
	Final retur		City or town, state or province, country, and ZIP or foreign postal code			•		
=	terminated		Melrose MA 02176	_			G Gross rec	eipts\$ 295,692
Ш	Amendod	roturn	Name and address of principal officer					
\Box	Application	n pending	Brandon Shine		_	H(a) Is this a grow	up return for s	ubordinates? Yes X No
_			2 Perham Avenue		Λ	H(b) Are all subd	ordinates incli	uded? Yes No
			_	2176	1			(see instructions)
			Melrose MA 0		$\frac{1}{1}$		u	(ddd maradions)
1	Tax-exen	npt status	501(c)(3) X 501(c) (8) ♦ (insert no)	4947(a)(1) or	527	_		
<u>J</u>	Website.	<u>. ♦ N</u>	/ <u>A</u>	'		H(c) Group exer		
K	Form of o	rganization	X Corporation Trust Association Other ◆	··	<u> </u>	Year of formation 1	906	M State of legal domicile MA
F	art I	Su	nmary		1			
	1 E	Briefly de	cribe the organization's mission or most significant activity	ties	•			
4		Char						
ဦ		Onar	-01					
쿌								
Governance			,					
ó	2 (Check th	box $lacktriangle$ if the organization discontinued its operations	or disposed of mo	re than 2	5% of its net ass	ets .	
∞ ∞	3 1	Number (voting members of the governing body (Part VI, line 1a)				3	9
Š			independent voting members of the governing body (Pai	rt VI. line 1b)			4	9
Ę			ber of individuals employed in calendar year 2019 (Part V	=			5	11
Activities &				, iiiic za/			6	25
ĕ	1		ber of volunteers (estimate if necessary)				<u> </u>	
	7a 1	rotal unr	lated business revenue from Part VIII, column (C), line 12	2			7a	0
	1 61	Net unrel	ted business taxable income from Form 990-T, line 39	·			7b	0
	1				}	Prior Yea		Current Year
ē	8 (Contribut	3 , 637	15,548				
Revenue	9 F	rogram	ervice revenue (Part VIII, line 2g)				- 1	0
Š	10 1	nvestme	t income (Part VIII, column (A), lines 3, 4, and 7d)			2	723	3,574
ď	11 0	Other rev	,325	221,293				
		Total reve	, 685	240,415				
			300	2,400				
			d similar amounts paid (Part IX, column (A), lines 1–3)		ŀ		300	2,400
			aid to or for members (Part IX, column (A), line 4)					<u> </u>
<u> </u>	15 8	Salaries,	ther compensation, employee benefits (Part IX, column (A), lines 5–10)		90	298	93,917
sesue 1707	16a F	Professio	al fundraising fees (Part IX, column (A), line 11e)					0
<u>_</u> <u>e</u>	ьт	Total fund	raising expenses (Part IX, column (D), line 25) ◆	C) [
_ŭ	1		enses (Part IX, column (A), lines 11a-11d, 11f-24e)		ľ	93	,446	99,358
,			nses Add lines 13–17 (must equal Part IX, column (A), li	ne 25)			,044	195,675
ī	1 40 5	•			ļ		641	44,740
	19 5	kevenue	ess expenses Subtract line 18 from line 12	RECEIVE	7	Beginning of Curr		End of Year
೦್ಯೆ	20. 7		to (Dark V. line 46)	NECLIVE			,016	210,817
⊥ 8 8	20 1		ts (Part X, line 16)		18			
4 ₹ 5	=1		tites (Part X, line 26)	AUG 1 4 20	26		639	10,511
چۆ.	22 N	let asset	or fund balances Subtract line 21 from line 20	AUU 1 4 20	בט גע	158	377	<u>200,306</u>
3 P	art II	Sig	nature Block		≅		·	
N O	nder per	alties of	erjury, I declare that I have examined this return, including accon	nparving schedules la	nd statem	ents, and to the be	st of my kn	owledge and belief, it is
tr	ue, corre	ct, and co	nplete Declaration of preparer (other than officer) is based on a	Il-information-of-whiel	-preparer-	has any knowledge	•	
			10000 1 1011/1				78	-10-20
Qi,	10	<u>s</u>	nature of officer				Date	
Sig	-		Can T Dulla Tagas	URER M	-10	SE RPO	- H.	. 7 1
He	re	-	GERRET DOYTE, IKEAN	UREIL 111	<u> </u>	SE DIV	5 1-1	021
		T	pe or print name and title					
		Print/Type	preparer's name Preparer's signature		_	Date	Check	If PTIN
Pai	d	Joseph	M. Stanton Joseph M:	tanton A		08/04/	20 self-em	ployed P00282586
Pre	parer		" Tanada M Charter CD		_		m's EIN 66	04-2954754
	Only	Firm's nar			 	<u> FI</u>	III S EIN	<u> </u>
J30	- Oy		,	01				701 200 0022
		Firm's add				Pł	one no	781-388-2233
Ma	y the IR	S discus	this return with the preparer shown above? (see instructi	ons)				X Yes No
		ork Redu	tion Act Notice, see the separate instructions					Form 990 (2019)
DAA								920
								\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \

Form 990 (2019)	Benevolent and Pr	rotective Order 04-	-1611235	Page 2
	Statement of Program Service Check of Schedule O contains	ice Accomplishments a response or note to any line in this	s Part III	X
1 Briefly desc	cribe the organization's mission	a responde of moto to any mile in and		
Charity	•			
2 Did the orga	anization undertake any significant	program services during the year which were	not listed on the	
	990 or 990-EZ? scribe these new services on Sched	dule O		Yes X No
		e significant changes in how it conducts, any	program	
services? If "Yes " de:	scribe these changes on Schedule	0.		Yes X No
4 Describe the	e organization's program service ad	ecomplishments for each of its three largest particular and are required to report the amount of		
the total exp	penses, and revenue, if any, for eac	ch program service reported		
4a (Code) (Expenses \$	including grants of \$) (Revenue \$)
N/A		•		
			\ \mathref{m}	
4b (Code N/A) (Expenses \$	including grants of \$) (Revenue \$)
4c (Code) (Expenses \$	including grants of \$) (Revenue \$)
N/A				
Ad Other progr	am services (Describe on Schedule	.0)		
(Expenses		iding grants of \$	(Revenue \$)
4e Total progra	am service expenses ◆			Form 990 (2019)
- 1				· ···· • • • (2013)



P	art IV Checklist of Required Schedules			
			Yes	ž
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			İ
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			į
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			İ
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			İ
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			İ
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			İ
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			ĺ
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
01	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			ĺ
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			İ
	VII, VIII, IX, or X as applicable			ĺ
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			ĺ
	complete Schedule D, Part VI	11a	Χ	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more			ĺ
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more			İ
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			ĺ
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	<u></u>
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
I2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	i		
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		_X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			ı
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or

domestic government on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II

P	art IV Checklist of Required Schedules (continued)			
			Yes	Nο
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	↓	X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the		}	
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	—	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			١,,
	through 24d and complete Schedule K If "No," go to line 25a	24a	₩	X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	 	
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
_	to defease any tax-exempt bonds?	24c	\vdash	₩
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	\vdash	╁
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	250		
h	transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	25a	╁	╁
b	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		1
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	230	 	
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	İ		
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part		-	
	IV instructions, for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c	<u> </u>	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	↓	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30	<u> </u>	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	<u> </u>	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			۱
	complete Schedule N, Part II	32	 	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			١,,
• •	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	<u> </u>	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			.,
	or IV, and Part V, line 1	34	├──	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	 	X
ь	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	254		
36	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
30	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		
٠,	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	3,		<u> </u>
•	19? Note: All Form 990 filers are required to complete Schedule O	38	Х	
P	art V Statements Regarding Other IRS Filings and Tax Compliance			
* *	Check if Schedule O contains a response or note to any line in this Part V			
	Trivial in Advisaged of Advisories in Andrews of Lieute to and the fit fills I said a		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0		'	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and	_		
_	reportable gaming (gambling) winnings to prize winners?	10	x	

as Either the number of emptoyees reported or Form W-3. Transmittal of Wage and Tax Statements, life for the ciscined year endomy with vir with the year covered by this return If at least one is reported on line 2a, did the organization file all required federal emptoyment tax returns? A life of the ciscined doubless poss on some of \$1,000 or more during the year? B If "Yes," has it filed a Form 990-T for they sear? If "No" for ine 3b, provide an explanation on Schedule O A lary time drough the calcidor year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country 5 the organization and organization and interest in organization and organization or other authority over, a financial account in a foreign country 5 the See instructions for filing requirements for PriCEH Form 114, Report of Foreign Bank and Financial Accounts (FBAR) B Was the organization aparty to a prohibered tax heriter transaction and any time during the tax year? Sa Was the organization or party to a prohibered tax heriter transaction? B Was the organization and price promote that it was or is a party to a prohibered tax heriter transaction? B Was the organization and price promote that the solid tax of the organization organization and the organization organization and the organization organization and the organization organization and the organization organization and the organization organization organization and the organization organization receives a consideration include with every solicitation an express statement that such contributions or gifts were not act adiociticles? O organizations that may receive deductible contributions under section 170(c). Did the organization received a contribution of the value of the goods or services provided? O organization than the promote organization received a contribution of the value of the goods or services provided? If Yes, Indicate the number of Forms 2822 filed during the year Did the organization received a contri		art y Statements Regarding Other IRS Fillings and Tax Compliance (Continued)		Yes	No
b It a least one is reported on line 2a, did the organization file all required facefail employment tax indurins? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to 4-6tic gene instructions) 3	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			,,,,,,
Note: if the sum of lines 1a and 2a is greater than 250, you may be required to -dife (see instructions) Del the Organization have unreliated business gross socies of \$1.00 or more during the year? 4. At any time during the calendar year, did the organization that was an interest in a significant of the post of the post of the year? 4. At any time during the calendar year, did the organization that was an interest in the post of the post of the year and the organization and year. 5. If Yes, if enter the name of the foreign country (such as a path's account, or one fer financial accounts (FBAR) 5. Was the organization a party to a prohibed tax shelfer framaction at any time during the tax year? 5. Was the organization and a party to a prohibed tax shelfer framaction at any time during the tax year? 5. Did any tixed party notify the organization that it was or is a party to a prohibed tax shelfer transaction? 5. Did was the organization have into granulation that it was or is a party to a prohibed tax shelfer transaction? 5. Did was the organization frame organization that was or is a party to a prohibed tax shelfer transaction? 5. Did was the organization frame organization that was or is a party to a prohibed tax shelfer transaction? 5. Did was the organization frame organization that was or is a party to a prohibed tax shelfer transaction? 5. Did was the organization frame transaction and party to a prohibed tax shelfer transaction? 5. Did was not tax deductible? 6. If Yes, if did the organization frame that were not tax deductible as charitable contributions? 6. If Yes, if did the organization frame was organized to the organization shelf tax years organization frame that was received deductible? 6. Organization shelf was received eductible contributions under section 170(c). 6. Did the organization shelf experience organization frame tax organization frame tax organization frame tax organization frame tax organization frame tax organization frame tax organization frame tax organization fram		Statements, filed for the calendar year ending with or within the year covered by this return 2a 11			
3a Dut the organization have unrelated business gross income of \$1,000 or more duming the year? 3b If Yes, "Inst efficial Form 9907 for this year? If "Mo? I fair ab, privation and sprantive or other authority over, a financial account in a foreign country fuch as a ben'th account, or other financial account(?) 4c 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 €. 5b If "Yes," either the name of the foreign country € 5c See instructions for filing requirements for FinCEN Form 114. Report of Foreign Bank and Financial Accounts (FBAR) 5c Was the organization profity to a prohibed tax shelter transaction at any time during the tax year? 5c Was the organization have annual gross recepts that are normally greater than \$10,000 and did the organization file from 8861.77 5d Does the organization have annual gross recepts that are normally greater than \$10,000 and did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitative contributions? 5d Did the organization noticed with every solicitation an express statement that such contributions or gifts were not tax deductible as charitative for thorough the state of the payor? 7 Organizations that may receive deductible contributions under section 170(c). 8 Did the organization notify the donor of the value of the goods or services provided? 8 If If Yes, "indicate the number of Forms 8282 filed during the year of the goods or services provided? 9 If If Yes, "indicate the number of Forms 8282 filed during the year of the year pay premiums, directly, or a personal benefit contract? 9 Did the organization received a contribution of carls, boats, analysins, or other vehicles, did the organization file a Form 108-C? 9 Sponsoring organizations maintaining donor advised funds. Did a donor advised funds and the payor organizations maintaining donor advised funds. 10b the spo	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
b If "Yes," last if lief at Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O At any time during the calendary year, did the organization have an interest in, or a singulative or other authority over, a financial account in a foreign country (such as a bank account, accurities account, or other financial accounts (FBAR) 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5c Unit "Yes" to line 5a or 5b, did the organization file Form 8988-T? 6d Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have include with every solicitation an explose statement that such contributions or gifts were not tax deductible? 6d If "Yes," ide the organization inclide with every solicitation are repress statement that such contributions or gifts were not tax deductible? 6d If "Yes," idea the organization notify the donor of the value of the goods or services prowded? 7a If "Yes," indicate the rumber of Forms 8282? 6d If "Yes," indicate the rumber of Forms 8282? filed during the year 7b Did the organization received a contribution of care, boats a payment on a personal benefit contract? 7c If the organization received a contribution of care, boats, anylanes, or other vehicles, did the organization file a Form 1998-07 7c If the organization received a contribution of quided, to pay premiums on a personal benefit contract? 7d If the organization received a contribution of care, boats, anylanes, or other vehicles, did the organization file a Form 1998-07 7d If the organization received a contribution of care, boats, anylanes, or other vehicles, did the organization file of Form 1998-07 7d If the organization received a contribution of care, boats anylanes, or other vehicles, di		Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
4a A vary time during the calendary 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, sectiones account, or other financial accounts (FBAR) 5a Was the organization failing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5a Was the organization for the organization flee Form 888677 5b Was the organization flee form 888677 5c Was the organization flee form 888677 5c Was the organization flee form 888677 5c Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization flee form 888677 5c B Dose the organization have annual gross receipts that are normally greater than \$100,000, and did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 5b If Yes,* did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6c Dost the organization shart may receive deductible contributions under section 170(c). 7c Organizations that may receive deductible contributions under section 170(c). 8d Did the organization shart may receive deductible contributions under section 170(c). 9 Did the organization shart may receive deductible contributions or device provided? 9 Did the organization shart may receive deductible contributions under section 170(c). 9 Did the organization shart may receive deductible contributions or device provided to the payor? 17 Did the organization shart may receive deductible contributions or device provided to the payor? 18 Did the organization received a contribution of cut a flagible personal property for which it was required to file Form 82822 filed during the year? 19 Did the organization received a contribution of cut and the year is a flagible personal property of the property of the property of the property of the property of the property of the prop	3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
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		If "Yes," complete Form 4720, Schedule O			

Form 990 (2019) Benevolent and Protective Order 04-1611235 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O 9 b Enter the number of voting members included on line 1a, above, who are independent 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 Χ any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8a Χ b Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) No 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a 12b b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c 13 Did the organization have a written whistleblower policy? 13 Did the organization have a written document retention and destruction policy? 14 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a Χ **b** Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement Χ with a taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ◆ None 18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 19

MA 02176

George Doyle

Melrose

financial statements available to the public during the tax year

State the name, address, and telephone number of the person who possesses the organization's books and records •

75 Myrtle St.

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations <u>See</u> instructions for the order in which to list the persons above

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee													
(A) Name and title	(B) Average hours per week (list any	bo	(C) Position do not check more than one ox, unless person is both an fficer and a director/frustee)			s both	an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the			
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-271099-WISC)	organization and related organizations			
(1)George Doyle	10 00												
Treasurer	10.00			Х				4,000	0	0			
(2) George Brogna													
Trustoo	5.00 0.00	Х		X				o	0	0			
Trustee (3) Brian Dunne	0.00	├^		<u> </u>				V		<u> </u>			
,,= -	5.00												
Leading Knight	0.00	X		X			_	0	0	0			
(4) Timothy McCarthy	5.00												
Trustee	0.00	Х		Х				o	0	0			
(5) Alan O'Connor									*				
Trustee	5.00 0.00	Х		Х				0	0	0			
(6) Paul Paone													
	5.00												
Loyal Knight	0.00	Х		Х			_	0	0	0			
(7) Vincent Paone	5.00	İ				•							
Trustee	0.00	X		х				0	0	0			
(8) John Siggins									-				
	5.00	,,		\ ,					0	0			
Trustee (9) Danielle Valdez	0.00	Х		Х				0	0	0			
(3) Danielle Value2	5.00								•				
Lecturing Knight	0.00	Х		Χ				0	0	0			
(10) David Chaffee													
miles	2.00			Х				o	0	0			
Tiler (11)Stephen Leahy	0.00			Λ		_							
(iii) beepiteri mearry	10.00												
Secretary	0.00			Χ			<u> </u>	0	0	<u>0</u>			

Part VII · Section A. Officers (A) Name and title	(B) Average hours per week (list any	(d bo	o not	Pos check ess pe	c) ition more rson i	than c s both r/truste	ne an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	c	(F) timated at of othe compensa from the	ir ation e	
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)		ganızaltoi ed organi		ŝ
(12) Linda Rotunno Inner Guard	2.00 0.00			Х				0	0				C
(13) Brandon Shine Exalted Ruler	10.00			Х				0	0				C
(14) Tracie Shine Chaplain	2.00			x				0	0				C
								•		1			
total (add lines 1b and 1c) Total number of individuals (in reportable compensation from	cluding but not I	ımıte	d to		e lıs	ted a	♦ ♦ bove	4,000 4,000 e) who received more than	\$100,000 of				
 Did the organization list any for employee on line 1a? If "Yes," For any individual listed on line organization and related organization and related organization listed on line 1 for services rendered to the organization. 	complete Schee 2 1a, is the sum dizations greater a receive or acc	dule of re than	J for porta \$15 comp	suci able 60,00 cens	com com o? /	fividu pens f "Ye n fron	al atio s," c n an	n and other compensation complete Schedule J for suc y unrelated organization or	from the ch		3 4 5	Yes	No
Section B. Independent Contracto Complete this table for your five compensation from the organization.	e highest comp	ensa	ited i	ndep	end for ti	ent d	ontr	actors that received more that received more that received more that year ending with or with	han \$100,000 of in the organization's tax ye	ear			
	(A) business address							· -	(B) uon of services		Com	(C) pensat	ion
Total number of independent of the second seco	ontractors (inclu	ıdıng	but	not 1	ımıte	ed to	thos	se listed above) who				······································	•••••

* *	,,,,	Check if	Sch	edule O conti	ains a	a respor	ise or note	to any line in thi	s Part VIII		
							-	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts st	1a	Federated camp	aigns		1a						
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership due	es		1b	Ī	15,548				
S, E	С	Fundraising eve	nts		1c						
ar E	đ	Related organiz			1d						
s, E	е	Government grants (co			1e					•	
isi	f	All other contributions,									
the the		and similar amounts n	-		1f						
E O	g	Noncash contributions	ınclude	f in lines 1a-1f	1g	\$					
a C	h	Total. Add lines	1a-11	f			♦	15,548			
			_				Business Code				
ę.	2a										
ξ.	b										
Se	С										
Zev.	ď										
Program Service Revenue	е						<u> </u>				
ш.	f	All other program	n serv	rice revenue							
	g	Total. Add lines	2a-21	f			•				
	3	Investment inco	me (ın	cluding dividend	s, inte	erest, and					
		other sımılar am	ounts))			•	3,466	3,466		
	4	Income from inv	estme	ent of tax-exemp	bond	proceeds	•				
	5	Royalties		·		···	<u> </u>				
		-	-	(ı) Real			Personal				
	6a	Gross rents	6a	28,	800						
	b	Less rental expenses	6b								
	С	Rental inc or (loss)	6c		800	L					
	d 72	Net rental incom	e or (· ·		ī	<u> </u>	28,800			28,800
	/ a	sales of assets		(i) Securities) Other				
		other than inventory	7a	3,	000	<u> </u>					
Other Revenue	b	Less cost or other	1								
Ş		basis and sales exps	7b	2,	892						
<u>چ</u> ا		Gain or (loss)	<u>7c</u>	<u> </u>	108	1		1.00	100		
je .	d	Net gain or (loss			r	r	•	108	108		
ō	ва	Gross income from	i fundra	ising events							
		(not including \$									
		of contributions rep		on line 1c)	_ ا						
		See Part IV, line 18			8a 8b						
		Less direct expe				<u> </u>	•				
		Net income or (I Gross income from		-	- vents	,					
	Ja	See Part IV, line 19	-	ig activities	9a						
	h	Less direct exp			9b						
		Net income or (I				<u> </u>					
		Gross sales of I	-		11103						
	iva	returns and allow		•	10a		155,204				
	h	Less cost of go			10b		52,385				
		Net income or (I				·	<u>52,565</u>	102,819	102,819		<u></u>
-			/	2 02.00 01 11140		:	Business Code				
Miscellaneous Revenue	11a	Entertainm	ent/9	Social Income	.			89,674	89,674		
ane Due	b		/ .		•						
e e	C										
Aisc R	d	All other revenue	е							, ,	
-		Total. Add lines		11d			•	89,674			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
		Total revenue.				١	•	240,415	196,067	0	28,800

Form **990** (2019)

Part IX Statement of Functional Expenses

<u> </u>	Check if Schedule O contains a response			p.o.co ooranni (rij	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
-2	Grants and other assistance to domestic				
	individuals See Part IV, line 22	2,400			
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16	<u></u>			·····
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
•	persons described in section 4958(c)(3)(B)				·· ····
7	Other salaries and wages	85,734			······································
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
١10	Payroll taxes	8,183			
11	Fees for services (nonemployees)		i		
а	Management				
b	Legal				
С	Accounting	5,000			•
đ	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)			-	
12	Advertising and promotion	1,683			
13	Office expenses				·
14	Information technology				
15	Royalties	40.061			
16	Occupancy	40,261			
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	1 126			
19	Conferences, conventions, and meetings	4,436			
20	Interest				
21	Payments to affiliates	4 (40)			
22	Depreciation, depletion, and amortization	4,649			
23	Insurance				
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)	0 700			
а	Public Service/Charity	9,729			
b	Insurance	9,293			 -
C	Office Supplies & Expense	5,955			
d	Collations	4,943	,		
е	All other expenses	13,409			
25	Total functional expenses Add lines 1 through 24e	195,675	0	0	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation Check here ◆ if				
	following SOP 98-2 (ASC 958-720)	l l	1	l l	

Balance Sheet

	Check if Schedule O contains a response or note	to any line in this Part X			
			(A) Beginning of year		(B) End of year
1	Cash—non-interest-bearing		29,694	1	28 , 796
2	Savings and temporary cash investments			2	
3	Pledges and grants receivable, net			3	
4	Accounts receivable, net			4	770
5	Loans and other receivables from any current or former	officer, director,			
+	trustee, key employee, creator or founder, substantial co	ontributor, or 35%			
	controlled entity or family member of any of these perso	ns		5	
6	Loans and other receivables from other disqualified pers	sons (as defined			
ર્શ	under section 4958(f)(1)), and persons described in sect	tion 4958(c)(3)(B)		6	
Assets 7	Notes and loans receivable, net			7	
⋖ 8	Inventories for sale or use		4,065		4,043
9	Prepaid expenses and deferred charges	, ,	889	9	887
10a	Land, buildings, and equipment cost or other				
	hasis Complete Part VI of Schedule D	10a 340, 352		ı r	
b	Less accumulated depreciation	10b 263,203	72,659		77,149
11	Investments—publicly traded securities	-	25 , 897	11	22,704
12	Investments—other securities See Part IV, line 11	<u> </u>		12-	···········
13	Investments—program-related See Part IV, line 11	_		13	
14	Intangible assets			14	
15	Other assets See Part IV, line 11	<u> </u>	34,812	15	76,468
16	Total assets. Add lines 1 through 15 (must equal line 33	3)	168,016		210,817
17	Accounts payable and accrued expenses	<u> </u>	8,046		6,961
18	Grants payable	<u> </u>	1 500	18	
19	Deferred revenue	<u> </u>	1,593	19	3,550
20	Tax-exempt bond liabilities		······································	20	
21	Escrow or custodial account liability Complete Part IV o	[10		21	
<u>ဖ</u> 22	Loans and other payables to any current or former office				
美	trustee, key employee, creator or founder, substantial co				
Liabilities	controlled entity or family member of any of these person			22	
23	Secured mortgages and notes payable to unrelated third	· —		23	
24	Unsecured notes and loans payable to unrelated third pa			24	
25	Other liabilities (including federal income tax, payables to				
	parties, and other liabilities not included on lines 17-24)	Complete Part X			
١٠٠	of Schedule D	-	0 630	25	10 511
26	Total liabilities. Add lines 17 through 25	AV	9,639	26	10,511
ړي	Organizations that follow FASB ASC 958, check here	. ▼ △			
2 27	and complete lines 27, 28, 32, and 33.		124 207		124 670
<u>គ</u> 27 명 28	Net assets without donor restrictions	<u> </u>	124,397 33,980	27	124,670 75,636
<u> </u>	Net assets with donor restrictions	all have A	33,900	28	13,636
Net Assets or Fund Balances 22 22 32 32 32 32 32 32 32 32 32 32 32	Organizations that do not follow FASB ASC 958, che	CK Here 🔻			
5 20	and complete lines 29 through 33.			20	
O 29	Capital stock or trust principal, or current funds	- fund		29	
30	Paid-in or capital surplus, or land, building, or equipment			30	
∯ 31	Retained earnings, endowment, accumulated income, or Total net assets or fund balances	other lunds	158,377	31	200,306
호 32 33		F	168,016	32	
133	Total liabilities and net assets/fund balances	<u></u>	100,010	33	210,817

orm	990 (2019) Benevolent and Protective Order 04-1611235				Page 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	,			
1	Total revenue (must equal Part VIII, column (A), line 12)	1			<u>0,415</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	L	19	5,675
3	Revenue less expenses Subtract line 2 from line 1	3			<u>4,740</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4			8,377
5	Net unrealized gains (losses) on investments	5			2,811
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8	<u> </u>		
9	Other changes in net assets or fund balances (explain on Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10		20	0,306
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
					Yes No
1	Accounting method used to prepare the Form 990				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		l	2a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		Ĺ	2b	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a			٠	
	separate basis, consolidated basis, or both		Į		
	Separate basis Consolidated basis Both consolidated and separate basis				
¢	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			į	
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		Į	2c	
	If the organization changed either its oversight process or selection process during the tax year, explain on				
	Schedule O				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the		-		
	Single Audit Act and OMB Circular A-133?		ĺ	3a	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		Γ		
	required audit or audits, explain why on Schedule O and describe any stens taken to undergo such audits			3h	Ì

SCHEDULÉ D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

♦ Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

◆ Attach to Form 990.

◆ Go to www.irs.gov/Form990 for instructions and the latest information

OMB No 1545-0047

Employer identification number

Open to Public Inspection

Benevolent and Protective Order 04-1611235 of Elks - Melrose Lodge #1031 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year Total number of conservation easements 2a 2b b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax vear • Number of states where property subject to conservation easement is located ◆ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) Yes No and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 \$ \$ (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

Schedul	le D (Form 990) 2019 Benevole	ent and Pro	tecti	ve Orde	er	04-1	611 <u>235</u>		P	age 2
Part	III Organizations Maintaini	ng Collections of	f Art, His	storical Tr	easures,	or Othe	r Similar Ass	ets (contir	าued)	
	sing the organization's acquisition, accessollection items (check all that apply)	ssion, and other record	ls, check a	any of the foll	owing that m	nake signif	icant use of its			
а	Public exhibition	d 🗀	Loan or e	xchange prog	oram					
ь	Scholarly research	e	Other	xonungo proj	g, c					
c	Preservation for future generations	ں -	G.G .							
	rovide a description of the organization's	collections and explai	n how they	further the o	organization'	s exempt i	ourpose in Part			
XI	·			, , , , , , , , , , , , , , , , , , , ,						
5 D	uring the year, did the organization solici	t or receive donations	of art, hist	orical treasur	es, or other	sımılar				
as	ssets to be sold to raise funds rather than	to be maintained as	part of the	organization	's collection?	,		Y	es 🗌	No
Part	IV Escrow and Custodial A	rrangements.				·	<u> </u>			
	Complete if the organizati	on answered "Yes	" on For	m 990, Pa	rt IV, line 9	9, or rep	orted an amoi	unt on Fore	m	
	990, Part X, line 21				·					
1a Is	the organization an agent, trustee, custo	odian or other intermed	diary for co	intributions o	r other asset	ts not		_	_	_
ın	cluded on Form 990, Part X?							Y	es _	∫No
b If	"Yes," explain the arrangement in Part X	III and complete the fo	llowing tal	ble						
								Amou	<u>nt</u>	
	eginning balance						1c			
	dditions during the year		·				1d			
	istributions during the year						1e			
	nding balance						1f			T
	id the organization include an amount on							Y	'es _	∐ No
THE STATE OF THE S	"Yes," explain the arrangement in Part X V Endowment Funds.	III Check here if the e	xpianation	has been pr	ovided on P	art XIII				Į
Part	Complete if the organization	on answered "Ves	" on For	m 000 Pa	rt IV Juno 1	10				
	Complete if the organization	(a) Current year		rior year	(c) Two yea		(d) Three years ba	ack (a) Fo	ur years	back
1a B	ngunung of year halance	(a) Current year	(6) -	nor year	(C) I WO yes	ars back	(d) Three years ba	3CK (8) FO	ıı years	Dack
	eginning of year balance ontributions									
	et investment earnings, gains, and						 			
	sses									
	rants or scholarships		 							
	ther expenditures for facilities and									
	rograms									
	dministrative expenses						-			
	nd of year balance						•			
	rovide the estimated percentage of the c	urrent year end balanc	e (line 1g.	column (a))	held as	•				
	oard designated or quasi-endowment ◆	%	,	,						
b Pe	ermanent endowment ◆ %	6								
с Те	erm endowment ◆ %									
Th	ne percentages on lines 2a, 2b, and 2c s	hould equal 100%								
3a Ar	re there endowment funds not in the pos	session of the organiza	ation that a	are held and	administered	for the				,
or	ganization by							۔۔۔۔۔	Yes	No
	Unrelated organizations							3a(i)	—	<u> </u>
) Related organizations							3a(ii)		<u> </u>
	"Yes" on line 3a(ii), are the related organ							3b	<u> </u>	<u> </u>
	escribe in Part XIII the intended uses of t		owment fur	nds						
Part		•	,, ,				5 000 B			
	Complete if the organization									
	Description of property	(a) Cost or other		(b) Cost or of			ccumulated preciation	(d) Book	value	
		(investment)		(othe			prociation		10	0.6.4
1a La					42,964		161 504		42,	<u> ソロ4</u>
	uildings				61,584		161,584		2 1	217
	easehold improvements				32,520		61,203		<u>21,</u>	
	quipment				53,284		40,416		12,	008
e Of		t equal Form 000, Co-	t Y 20/11	n (R) line 10					77,	1 / 0
rotal. A	dd lines 1a through 1e (Column (d) mus	cequai roiiii 990, Par	. A, COIUINI	ii (D), IIIIE TU	· <i>)</i>		. •		111	<u>エセ</u> フ

Complete if the organization answered "Yes" on Form 990, Pa (a) Description of security or category (noteding name of security) (1) Financial derivatives 2) Closely held equity interests 3) Other (A) (B) (C) (D) (E) (F) (G) (H) otal: (Column (b) must equal Form 990, Part X, col (B) line 12) (a) Description of investment (b) Book vi (c) (d) (e) (e) (f) (e) (f) (e) (f) (g) (h) otal: (Column (b) must equal Form 990, Part X, col (B) line 12) (e) Description of investment (f) (g) (g) (h) (g) (g) (h) (g) (g) (h) (h) (h) (h) (h) (h) (h) (h) (h) (h	e (c) Method of Cost or end-of-ye	Part X, line 13.
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(1) Federal income taxes (2) (3)	IV, line 11e or 11f See Form	
(2)	IV, line 11e or 11f See Form	(b) Book value
(3)	IV, line 11e or 11f See Form	
	IV, line 11e or 11f See Form	
(4)	IV, line 11e or 11f See Form	
	IV, line 11e or 11f See Form	
(5)	IV, line 11e or 11f See Form	
(6)	IV, line 11e or 11f See Form	
(7)	IV, line 11e or 11f See Form	
(8)	IV, line 11e or 11f See Form	
(9)	IV, line 11e or 11f See Form	
otal. (Column (b) must equal Form 990, Part X, col (B) line 25)	IV, line 11e or 11f See Form	
Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text.	•	

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Pe	Reconciliation of Revenue per Audited Financial Statem	ents With Reve	enue per Return.			
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a						
1	Total revenue, gains, and other support per audited financial statements		1_			
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			·		
а	Net unrealized gains (losses) on investments	2a				
b	Donated services and use of facilities	2b				
С	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIII)	2d				
е	Add lines 2a through 2d		2e_	· · · · · · ·		
3	Subtract line 2e from line 1		3			
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 }				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII)	4b				
-	Add lines 4a and 4b		4c			
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5			
Pa	Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.					
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.						
1	Total expenses and losses per audited financial statements		1			
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1 1				
а	Donated services and use of facilities	2a				
b	Prior year adjustments	2b				
C	Other losses	2c				
d	Other (Describe in Part XIII)	2d				
е	Add lines 2a through 2d					
3	Subtract line 2e from line 1	1 1	3			
4	Amounts included on Form 990, Part IX, line 25, but not on line 1					
	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII)	4b				
C	Add lines 4a and 4b		4c			
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5			

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line

2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Schedule D (Form 990) 2019

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

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.

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

Benevolent and Protective Order
of Elks - Melrose Lodge #1031

OMB No 1545-0047

2019

Open to Public Inspection

Employer identification number

04-1611235

Form 990, Part I, Line 6

When the lodge sponsors functions a number of the members will assist by setting up, cooking and cleaning.

A number of the members also assist in helping to maintain the premises by cleaning, painting (if necessary) and by keeping all of the systems and utilities functioning for normal usage.

Form 990, Part III, Line 4d - All Other Accomplishments BPOE Melrose provides charitable services to hundreds of persons in and around the Melrose, MA area.

This is done through charitable giving and by sponsoring of numerous functions and programs that would otherwise not be available.

Form 990, Part VI, Line 6 - Classes of Members or Stockholders Regular and life-time members.

Form 990, Part VI, Line 7a - Election of Members and Their Rights Elections of officers are held annually for offices with terms as officers ranging from 1 to 5 years.

Form 990, Part VI, Line 7b - Decisions Subject to Approval of Members

Most of the decisions not made by committee and all important decisions are
subject to approval by the members.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

The return is reviewed with the tax preparer by the treasurer and the bar manager. After this review the return is presented to the membership and a vote is taken to approve the filing.

Form 990, Part VI, Line 15a - Compensation Process for Top Official None of the officers are compensated for the services (time) that they provide to the organization.

Form 990, Part VI, Line 15b - Compensation Process for Officers

All employees are paid wages that are reasonable for the services provided.

During the year ended March 31, 2020 the organizations highest paid employee earned \$25,810.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Documents are made available upon request.