



**PUBLIC NOTICE
THE ELOY CITY COUNCIL**

Meets

MONDAY, APRIL 19, 2021

5:00 PM

ELOY CITY COUNCIL CHAMBERS

595 NORTH C STREET

ELOY, ARIZONA 85131

**For a
WORK SESSION**

AGENDA

- I. Call to Order**
- II. Roll Call**
- III. Pledge of Allegiance**
- IV. Unscheduled Public Appearances**
- V. Discussion Items**

- A. Presentations from representatives from outside agencies and organizations on funding requests for Mayor and Council review and discussion for the proposed Fiscal Year 2021-2022 budget.

Harvey Krauss

VI. Adjournment

**POSTED BY WEDNESDAY, APRIL 14, 2021, BY 5:00 P.M. AT ELOY CITY HALL,
ELOY POST OFFICE, TROY THOMAS COMMUNITY CENTER, TOLTEC
COMMUNITY/SENIOR CENTER AND CITY WEBSITE: www.elayaz.gov**

Mary Myers, CMC, CPM
City Clerk

INDIVIDUALS WITH SPECIAL ACCESSIBILITY NEEDS MAY CONTACT LORENA LaSALDE-RIOS, ADA COORDINATOR FOR THE CITY OF ELOY AT 520-466-9201 OR 520-466-7455 (TDD). IF POSSIBLE, SUCH REQUESTS SHOULD BE MADE 72 HOURS IN ADVANCE. ONE OR MORE MEMBERS OF THE COUNCIL AND/OR STAFF MAY PARTICIPATE BY TELEPHONIC OR VIDEO MEANS.

CITY OF ELOY

REQUEST FOR COUNCIL ACTION

Agenda Item: **V.A.**

Date: **4/19/2021**

Date submitted:
04/13/2021

Action: Other

Subject: Presentations from representatives from outside agencies and organizations on funding requests for Mayor and Council review and discussion for the proposed Fiscal Year 2021-2022 budget.

Date requested:
4/19/2021

TO: Mayor and City Council

FROM: Harvey Krauss, City Manager

RECOMMENDATION:

Mayor and Council to hear presentations from representatives from outside agencies and organizations on funding requests for the proposed Fiscal Year 2021-2022 budget.

DISCUSSION:

On April 1, 2021 applications were received from outside agencies and organizations regarding the submittal of their funding requests for the FY2021-2022 budget. The applications include information regarding the description of event/program, identify how the event strengthens community vitality, and foster community spirit, as well as an accounting of how funds for FY2021-2022 will be spent by their agency.

Staff has received the following complete applications:

Andrew Rodriguez	Corazon De Latinos Unidos	Eloy Fiestas Patrias - 2021 \$10,000
Ralph Varela	Pinal Hispanic Council/ Eloy Veterans Center	Veterans Day Celebration: Honoring Those Who Have Served - \$500
Ralph Varela	Pinal Hispanic Council/ Eloy Veterans Center	Eloy: Wreaths Across America, In Memory & Gratitude of Veterans Who Served - \$2,000
Patricia King	Pinal Alliance for Economic Growth	Annual Funding Request - \$10,000

Cynthia Yates

Sunland Visitor Center

Annual Funding Request -
\$18,000

Mark Benner

Eloy Chamber of Commerce

Annual Funding Request -
\$28,000

FISCAL IMPACT:

The total funding requests from community agencies/organizations for FY2021-2022 is \$68,500.

Approved as to Form:



Stephen R. Cooper, City Attorney

Community Event Grant Program Application

Applicant Information

Organization Name Corazon De Latinos Unidos - Eloy Fiestas
Mailing Address PO Box 774 City Eloy State AZ Zip Code 85131
Physical Address _____ City _____ State _____ Zip Code _____
Funding Amount Requested \$ 10,000 Prior Year's Funding 2019 - 5,000
Event Contact Andrew Rodriguez - President
Phone _____ Cell Phone 520-280-8164 Email Arodelay@gmail.com

Event Information

Name of Event/Program Eloy Fiestas Patrias 2021
Date(s) Sept. 17 & 18th 2021
Event Location Downtown Eloy - Eloy Main Street Park
Private Property: Yes ☐ No ☒ Public Property: Yes ☒ No ☐
Event Start Time Friday Noon - 10pm Event End Time Saturday 9:00 AM - 10:00 PM
Admission Cost Free to the Public Project Attendance 2000 to 2500
Expense Budget projected at \$30,000 Estimated Revenue 2,500 - 4000
Brief Description of Event/Program

See Attachment #1

Event History

Is this an annual event/program? Yes ☒ No ☐ New ☐ Recurring ☒

Is this event/program:

How many years in existence 50+ years

Average Attendance 2017-2018 2500 -

2018-2019 2500 - 3000

General Event/Program Information

Please provide a description of event activities and entertainment

Live Entertainment with:

Mariachi Groups

Folklorico Dancers

Band groups

Solo Artist

Many local groups invited to participate Veterans Center, TAZ Boxing,
Sevults National Honor Society, EHS Honor Society, Pinal Hispanic.

Please name the organizations who will receive the donated proceeds for this event and the percentage for each organization.

Corazon De Latinos Organization 100%

How does this event strengthen community vitality and foster community spirit? Check all that apply.

- ☒ Provides cultural or educational programming that demonstrates Eloy's unique diversity, history and heritage
- ☒ Provides opportunities to promote community pride and a positive image of the City of Eloy
- ☐ Increases economic impact in the community with Eloy business owners
- ☐ Increases awareness on national health campaigns/concerns for the general public

Event Sponsorship/Contributors

Please complete the following... (Do not include any items received from City of Eloy)

Event Sponsors/Contributors

What are they providing?

APS	Monetary Donation - Tax Credit
PHC	Monetary Donation - Tax Credit
Ivory Towers Realty	Monetary Donation - Tax Credit
Wood Madrid Enterprises	Monetary Donation - Tax Credit
Desert Sun Heating	Monetary Donation - Tax Credit

The City of Eloy

What services are being requested from the City for the event/program? (i.e. police, water, refuse, etc.)

Bleachers, Park use, street closures, park clean up.
Coordination of Fan pickup & light Setup, Trash Cans Setup
Promotional Banner setup Prior to the Event, Porta Potty Setup

Will you be requesting the use of the City's logo? Yes ☒ No ☐

If yes, list items you will use the log on. Provide samples if available.

All Advertising Brochures, Entertainment Schedules & Banners

Will the City receive signage or advertising opportunities at the event? Yes ☒ No ☐

If yes... Quantity 1

Type Banner, Flyers Newspaper

Location over Head - Street Banner on Main St.

Approved Funds Worksheet

[illegible]

PLEASE READ CAREFULLY BEFORE SIGNING

I certify that the information set forth within this application is complete, true and correct to the best of my knowledge and belief, and that I have received and will comply with the information set forth in the program guidelines and application requirements. Information from this application is considered public information and may be distributed to outside agencies at their request. Acceptance of this application should in no way be construed as final approval or confirmation of this request. The City of Eloy reserves the right to refuse the application and it is revocable if deemed in the best interest of the City of Eloy.

Authorized Agent Name (PRINT) Andrew Rodriguez

Signature 

Title President 

Date 4/13/2021

Project Budget For:

Corazon De Latinos Unidos - Fiesta 2021

Organization Name

FUNDING	
Earned Income	
1. Admissions/Ticket Sales	
2. Contracted Services	0.00
3. Other Revenue	3,500
Support: (Contributed Income)	2,000
4. Corporate Sponsors	
5. Foundations Grants	7,000
6. Private Contributions	3,000
7. Governmental Support (identify source)	
a.) Federal:	
b.) State:	
c.) City	
d.) County:	10,000
8. Applicant Cash	
Total Existing Funding: (lines 1-8)	25,500
Grant Amount Request:	
TOTAL FUNDING:	
EXPENSES:	
9. Personnel/ Staff (include salary and benefits)	
a.) Administration	insurance, Police security
b.) Technical/Production	Entertainment
10. Outside Fees and Services (provide details)	Scholarship
a.)	Jumping Castles
b.)	Kid train, Pony Rides, Petting zoo, Facepaint
11. Product Expenses	Postage - Trophies & Awards
12. Rental Expenses	Canopy & Light Expense
13. Promotion/Marketing	Banners & Ads
14. Other Operating Expenses	Website - CDUL meetings
Total Project Cost: (lines 9-14)	
Note: "Total Funding" should equal "Total Project Cost"	\$30,242.00

Harvey Krauss

From: Andrew Rodriguez <arodeloy@gmail.com>
Sent: Tuesday, April 13, 2021 3:25 PM
To: Harvey Krauss
Subject: Attachment for event packet

CAUTION: This email originated from outside of the City of Eloy. Do not click on links or open attachments unless you recognize the sender and know the content is safe.

Attachment #1

The Eloy Fiesta Patrias brings the Hispanic Cultural, traditions and heritage to our Eloy community. We celebrate Mexican Independence Day in the Mexican culture. Our event brings a variety of entertainment, food and children's events to everyone at no charge. This is a great time to bring the community and families together. The fiestas have been going on in Eloy for over 50 years off and on through different cultural organizations. This event is Eloy's signature event of the year. The fiesta brings people to our community from out of the area to visit our ever growing community.

The two-day event starts off on Friday September 17, 2021 with entertainment and food vendors. Saturday September 18th starts with a parade, Mayoral announcements, Proclamations and awards. Followed by awards to be a day filled with entertainment and fun for all ages. We are providing many events for children and adults. We have been gaining a growing spectacular car & bike show on Main St.

President- Andrew Rodriguez

Vice- President- Grace Lopez

Treasure- Gilbert Mendez

Secretary – Jose Garcia

Community Event Grant Program Application

Applicant Information

Organization: Name Pinal Hispanic Council/Eloy Veterans Center

Mailing Address: 107 E. 4th Street City Eloy State: Arizona Zip Code: 85131

Physical Address : SAA City Eloy _____ State: Arizona Zip Code: 85131

Funding Amount Requested: \$ 500.00 Prior Year's Funding: \$500.00

Event Contact Ralph Varela, CEO

Phone: 466-7765__ Cell Phone: 560-0999_____ Email: varela_ralph@yahoo.com

Event Information

Name of Event/Program Veterans Day Celebration: Honoring Those Who Have Served

Date(s): 11/11/2021

Event Location Eloy Main Street Park

Private Property: Yes ☐ No ☒

Public Property: Yes ☒ No ☐

Event Start Time: 9 AM

Event End Time 2 PM

Admission Cost: Free

Project Attendance 250 to 350

Expense Budget: \$1,000

Estimated Revenue: \$1,000

Brief Description of Event/Program

Eloy Veterans Day Event:

The Eloy Veterans Center is proposing to continue to have the Eloy Veterans Day event to be held on held 11/11/2021.

There are 3 main elements to the Veterans Day Event:

- A parade with about 25 – 30 parade entries
- A Event Program held after the parade at the Eloy Downtown Main Street Park
- As part of the Veterans Day event, food and beverages are provided to the Veterans, their loved ones, and the community as a whole

Is this an annual event/program? Yes ☒ No ☐ New ☐ Recurring ☒

Is this event/program:

How many years in existence ____ 20 + Years

Average Attendance 2017-2018: 250 2018-2019: 275

2019-2020 Event not held due to COVID-19

Funds were allowed to be used for Eloy Wreaths Across America

General Event/Program Information

Please provide a description of event activities and entertainment

As noted in the previous segment under Brief Description of Event Program, the event has three elements to the Eloy Veterans Day celebration. The three elements are Veterans Parade, Veterans Day Program at Eloy Main Street Park and the food and beverages after the event at the park.

The Eloy Veterans Day Celebration is a collaboration between Pinal Hispanic Council, Eloy Veterans Center, City of Eloy, and Eloy Chamber of Commerce.

The event includes a Ceremonial Program, the posting of the colors ceremony, guest speaker and entertainment (has not been identified—in planning stages).

The parade traditional has about 25-30 entries

The Eloy Main Street Veterans Program has about 250 in attendance

The food and beverages serves about 250

Please name the organizations who will receive the donated proceeds for this event and the percentage for each organization.

Pinal Hispanic Council will receive the funds and will use funds to support the Eloy Veterans Day Celebration.

100% of the funds will be used for the event

How does this event strengthen community vitality and foster community spirit? Check all that apply.

- X Provides cultural or educational programming that demonstrates Eloy's unique diversity, history and heritage
- X Provides opportunities to promote community pride and a positive image of the City of Eloy
- X Increases economic impact in the community with Eloy business owners
- X Increases awareness on national health campaigns/concerns for the general public

Event Sponsorship/Contributors

Please complete the following... (Do not include any items received from City of Eloy)

Event Sponsors/Contributors

What are they providing?

Pinal Hispanic Council	125.00
Eloy Veterans Center	125.00
Walmart Distribution Center #7013	250.00 + Fruits
Arizona Public Service	Free marketing items, light bulbs, fans, etc

The City of Eloy

What services are being requested from the City for the event/program? (i.e. police, water, refuse, etc.)

The use of the City of Eloy Main Street Park
Police walk thru as Eloy Police Department time permits
Blocking off streets for the Parade

Will you be requesting the use of the City's logo? Yes x ☐ No ☐

If yes, list items you will use the log on. Provide samples if available.

Newspaper article, event program, and social media advertising

Will the City receive signage or advertising opportunities at the event? Yes x ☐ No ☐

If yes... Quantity: Uncertain at this time

Type : Banner or other signage that the City of Eloy might possess

Location: Eloy Main Street Park and other future designated areas that are mutually identified

Approved Funds Worksheet

[illegible]

PLEASE READ CAREFULLY BEFORE SIGNING

I certify that the information set forth within this application is complete, true and correct to the best of my knowledge and belief, and that I have received and will comply with the information set forth in the program guidelines and application requirements. Information from this application is considered public information and may be distributed to outside agencies at their request. Acceptance of this application should in no way be construed as final approval or confirmation of this request. The City of Eloy reserves the right to refuse the application and it is revocable if deemed in the best interest of the City of Eloy.

Authorized Agent Name (PRINT) RALPH VARELA

Signature 10/11/22

Title CFO

Date 4/1/21

Project Budget For: **ELOY VETERANS DAY CELEBRATION**

ANAL HISPANIC COUNCIL / EVC

Organization Name

FUNDING	
Earned Income	
1. Admissions/Ticket Sales	0
2. Contracted Services	0
3. Other Revenue	0
Support: (Contributed Income)	
4. Corporate Sponsors	250.00
5. Foundations Grants	
6. Private Contributions	
7. Governmental Support (identify source)	
a.) Federal:	
b.) State:	
c.) City	
d.) County:	
8. Applicant Cash PHC/EVC	250.00
Total Existing Funding: (lines 1-8)	
Grant Amount Request:	500.00
TOTAL FUNDING:	
EXPENSES:	
9. Personnel/ Staff (include salary and benefits)	0
a.) Administration	0
b.) Technical/Production	0
10. Outside Fees and Services (provide details)	
a.)	
b.)	
11. Product Expenses FOOD/DRINKS	500.00
12. Rental Expenses BATH ROOMS	150.00
13. Promotion/Marketing	250.00
14. Other Operating Expenses SUPPLIES	100.00
Total Project Cost: (lines 9-14)	
Note: "Total Funding" should equal "Total Project Cost"	500.00

Community Event Grant Program Application

Applicant Information

Organization: Name Pinal Hispanic Council/Eloy Veterans Center

Mailing Address: 107 E. 4th Street City Eloy State: Arizona Zip Code: 85131

Physical Address : SAA City Eloy _____ State: Arizona Zip Code: 85131

Funding Amount Requested: \$2,000 Prior Year's Funding: \$ 1,500

Event Contact Ralph Varela, CEO, Pinal Hispanic Council

Phone: 466-7765__ Cell Phone: 560-0999_____ Email: varela_ralph@yahoo.com

Event Information

Name of Event/Program: Eloy: Wreaths Across America: In Memory and Gratitude of Veterans Who Served

Date(s): 12/18/2021

Event Location City of Eloy Cemetery

Private Property: Yes ☐ No ☒

Public Property: Yes ☒ No ☐

Event Start Time: 8 AM

Event End Time 1 PM

Admission Cost: Free

Project Attendance 300 to 400

Expense Budget: \$5,500

Estimated Revenue: \$5,500

Brief Description of Event/Program

Eloy: Wreaths Across America: Honoring Veterans Who Have Served:

The Eloy Veterans Center is proposing to have the second Annual Eloy project that follows the intent and guidelines of the national Wreaths Across America yearly project. This year the project will be held nationally on 12/18/2021.

Is this an annual event/program? x Yes No ☐ x Recurring

Is this event/program:

How many years in existence ____ Second Year

Average Attendance 2017-2018: N/A 2018-2019: N/A

2020 1st Year of the Project

General Event/Program Information

Please provide a description of event activities and entertainment

The Eloy Wreaths Across America will again be the same as the national Wreaths Across America annual program. The project will again take place at the City of Eloy Cemetery. There are approximately 460 Veterans who are buried at the City of Eloy Cemetery.

The intent is to place a wreath at each of the Veteran burial sites in honor of their service to this Country. It is a time to pay homage to the great service and sacrifices that each Veteran and their families made to keep America safe. The national program has a very detailed program which must be followed. Eloy Veterans Center will be forming a planning committee and the key is to have a Project Coordinator, who will help in coordinating the event which includes recruiting volunteers, having monthly meetings, developing the full program for that day, and working with community partners. PHC will take the lead in raising the necessary funds for the event.

The project will be collaboration between Eloy Veterans Center, City of Eloy, Veteran groups, Pinal County, Civic Organizations, and private/private sectors.

Please name the organizations who will receive the donated proceeds for this event and the percentage for each organization.

Pinal Hispanic Council will receive the funds and will use funds to support the Eloy Wreaths Across America project.

100% of the funds will be used for the event

How does this event strengthen community vitality and foster community spirit? Check all that apply.

- X Provides cultural or educational programming that demonstrates Eloy's unique diversity, history and heritage
- X Provides opportunities to promote community pride and a positive image of the City of Eloy
- XIncreases economic impact in the community with Eloy business owners
- X Increases awareness on national health campaigns/concerns for the general public

Event Sponsorship/Contributors

Please complete the following... (Do not include any items received from City of Eloy)

Event Sponsors/Contributors	What are they providing?
Pinal Hispanic Council	250.00
Eloy Veterans Center	250.00
** Will be reaching out to seek sponsors	1,500
** Will be reaching out to families and individual sponsors for a wreath	1,500

The City of Eloy

What services are being requested from the City for the event/program? (i.e. police, water, refuse, etc.)

The use of the City of Eloy Cemetery
 Public Work Department and Parks and Recreations Department for event coordination/support
 Eloy Police Department and Eloy Fire Department as time permits

Will you be requesting the use of the City's logo? Yes x ☐ No ☐

If yes, list items you will use the log on. Provide samples if available.

Newspaper article, event program, and social media advertising

Will the City receive signage or advertising opportunities at the event? Yes x ☐ No ☐

If yes... Quantity: Uncertain at this time

Type : Banner or other signage that the City of Eloy might possess

Location: City of Eloy Cemetery

Approved Funds Worksheet

[illegible]

PLEASE READ CAREFULLY BEFORE SIGNING

I certify that the information set forth within this application is complete, true and correct to the best of my knowledge and belief, and that I have received and will comply with the information set forth in the program guidelines and application requirements. Information from this application is considered public information and may be distributed to outside agencies at their request. Acceptance of this application should in no way be construed as final approval or confirmation of this request. The City of Eloy reserves the right to refuse the application and it is revocable if deemed in the best interest of the City of Eloy.

Authorized Agent Name (PRINT) RALPH VARELA

Signature 

Title CEO

Date 4/1/2021

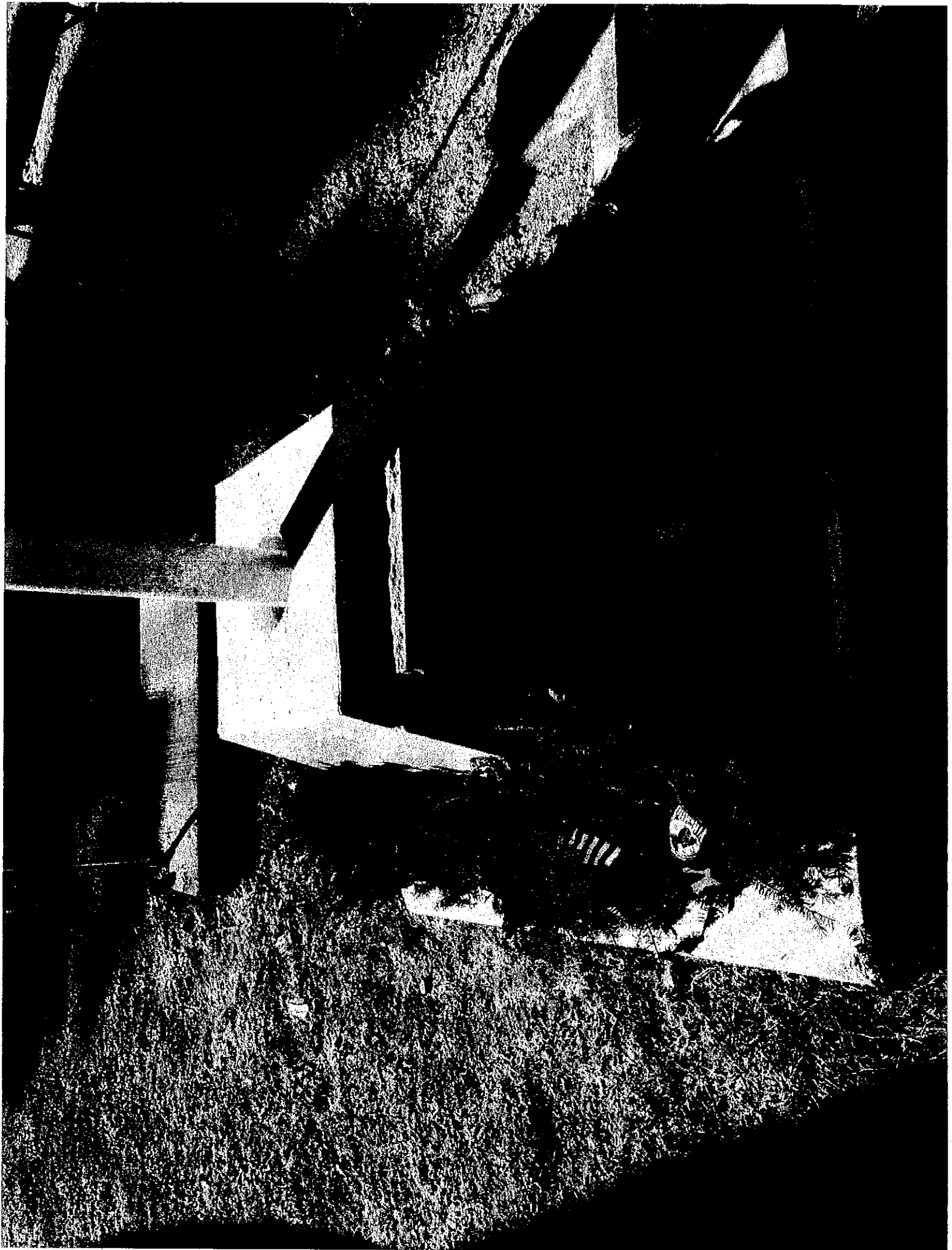
Project Budget For:

ELOY WRATHS ACROSS AMERICA

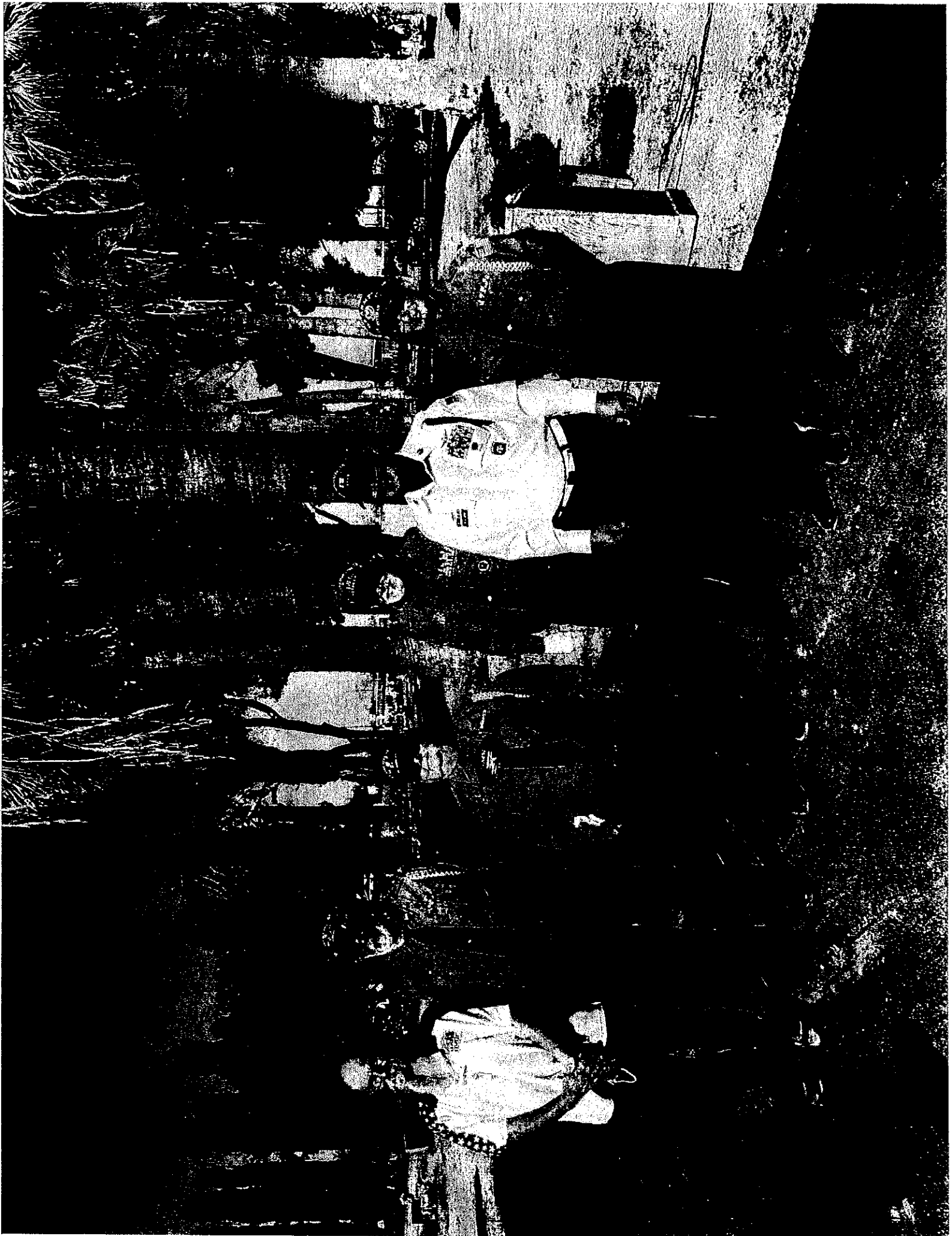
Organization Name

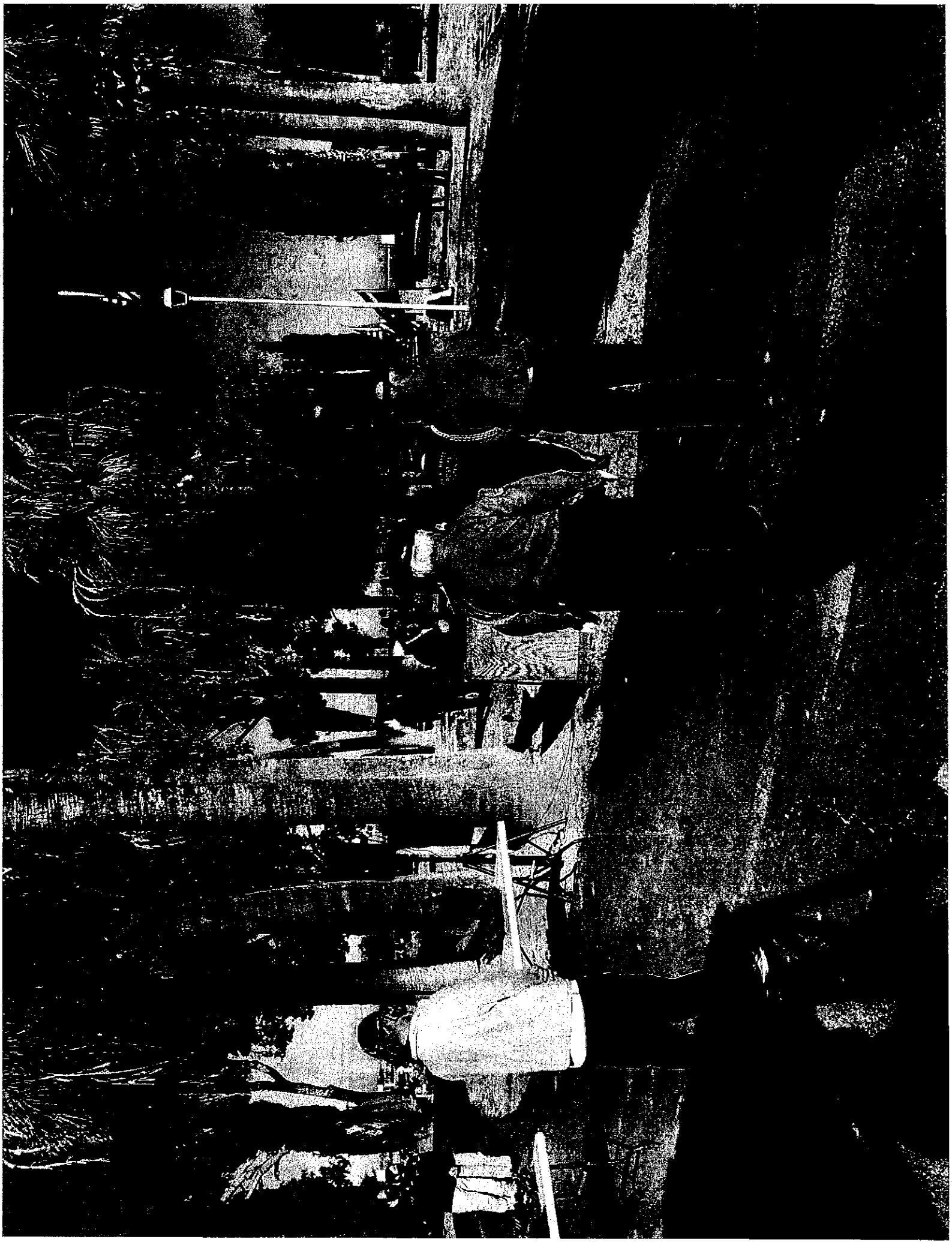
PINAL HISPANIC COUNCIL / ELOY VETERANS CENTER

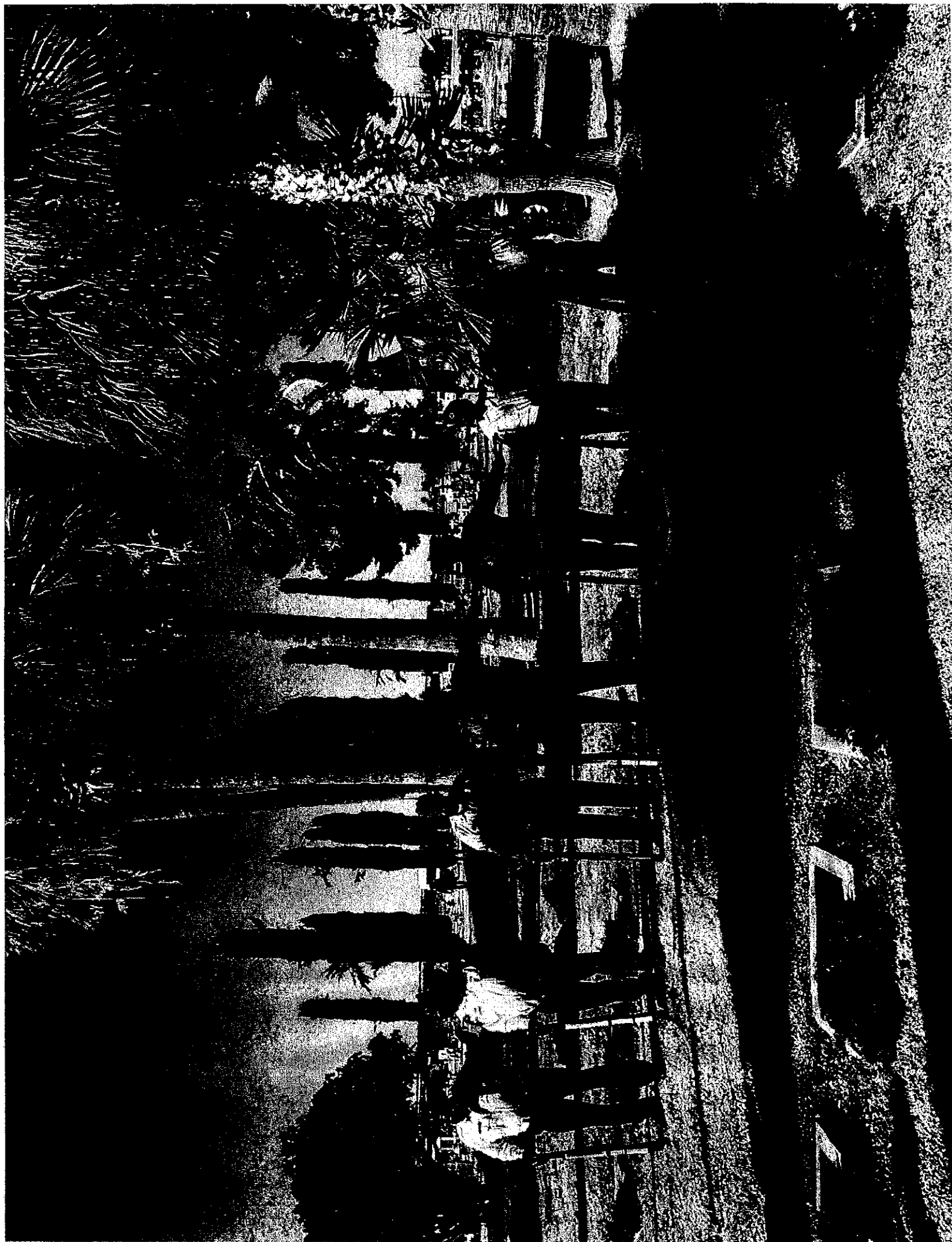
FUNDING	
Earned Income	
1. Admissions/Ticket Sales	0
2. Contracted Services	0
3. Other Revenue	
Support: (Contributed Income)	
4. Corporate Sponsors	1,500
5. Foundations Grants	
6. Private Contributions	1,500
7. Governmental Support (Identify source)	
a.) Federal:	
b.) State:	
c.) City	2,000
d.) County:	
8. Applicant Cash	500
Total Existing Funding: (lines 1-8)	
Grant Amount Request:	5,500
TOTAL FUNDING:	
EXPENSES:	
9. Personnel/ Staff (include salary and benefits)	0
a.) Administration	0
b.) Technical/Production	0
10. Outside Fees and Services (provide details)	
a.)	
b.)	
11. Product Expenses WRATHS	4,700
12. Rental Expenses	150
13. Promotion/Marketing	325
14. Other Operating Expenses WATER/ DRINKS/ SUPPLIES	325
Total Project Cost: (lines 9-14)	
Note: "Total Funding" should equal "Total Project Cost"	5,500











COMMUNITY OUTREACH PROGRAM
2021-2022 FUNDING APPLICATION

Section 1

Date: March 30, 2021

Organization Name: Pinal Alliance for Economic Growth

Address: 17235 N. 75th Avenue, Suite D145, Glendale, AZ 85308

Phone: 520-836-6868 Fax: 602-789-9126

Email: pking@pinalalliance.org

Contact Person: Patricia King, Executive Manager

Proposal Due Date: Thursday, April 2, 2021

Name of the services/program for which you are requesting funding: Pinal Alliance for Economic Growth, a 501c(6) organization serving as a regional economic development organization

Please indicate the amount of funding you are requesting: \$10,000.00

Have you applied for other grant funding such as Eloy Community Event Grant Program from the city: Yes ☒ No



Executive Manager

March 30, 2021

CITY OF ELOY

Partner/External Agency Funding Application

Fiscal Year 2021/2022 Application



Services that Pinal Alliance is Proposing and Benefit to the City of Eloy

Our program of services for FY 2021/2022 are reflective of the strategic structure designed by the board of directors to support Eloy and other community partners, including City of Casa Grande and Pinal County in a completely open and transparent manner. The City of Eloy has been a community partner of Pinal Alliance for Economic Growth, formerly Access Arizona and Central Arizona Regional Economic Development, for many years. To help accomplish Eloy's economic development objectives and to deliver results, Pinal Alliance proposes:

- Support the work of Achieve Pinal to connect the efforts of Achieve60AZ at the state level to the City of Eloy. Pinal Alliance hosts the committee's website, achievecpinal.org, purchases and assembles promotional and informative materials, and markets its initiatives to help generate greater public and private awareness, ownership and support for the long-term steps needed in college entry and completion, adult education and training, and identifying and closing skills gaps to better prepare our workforce for the future. These efforts are supported by an extensive volunteer group and PAEG staff. The financial commitment to supporting these efforts equaled nearly 41% of the organization's staff expense in the first quarter of 2021.
- Expand outreach to students and adults seeking careers in Eloy and throughout Pinal County through Achieve Pinal's Career Expo app, which was launched February 1, 2021. The app provides customized information about careers in Pinal County, jobs currently open for PAEG's investors, educational opportunities, scholarships, and college readiness information. In demand career fields, according to Arizona@Work Pinal County are featured in the app. Since its launch, the app has accommodated 189 users and more than 1,000 views spending a cumulative of 50.25 hours exploring the app.
- Support the Achieve Pinal committee and program staff with management and expansion of the AARP Experience Corps Pinal-Casa Grande program, which is a volunteer-based tutoring program that connects older adults to their communities by engaging them in the intergenerational work of helping young students become better readers. The program helps older adult volunteers maintain a sense of purpose by putting their wisdom to work, while at the same time addressing a major contributor to poverty: the inability of children to read at grade level by the end of third grade. Students who are unable to read at the end of the third grade are four times more likely to leave school without a diploma. The program's overarching goal is to develop a competitive workforce for future jobs. 2021/22 will be the second year of the pilot program, and the goal is to expand the program to other interested school districts in Pinal County in the third year of the program. This program directly addresses the learning deficit that has occurred as a result of COVID-19.
- Advocate for full funding of the I-10 Widening between Casa Grande and Chandler.
- Pursue inclusion of the City of Eloy in Pinal Alliance's association healthcare plan to reduce the cost associated with providing healthcare benefits to Eloy employees.
- Maintain a robust website with tools providing critical resources to support business attraction, retention and expansion efforts in the region. The website includes consistently updated demographic and economic data for the region.
- To provide the city with licensed access to Pinal Alliance's subscription to GIS Planning and EMSI's economic modeling programs, including nationwide data.



- Continue to market the advantages of Eloy internationally, nationally, statewide, regionally and locally as a place to locate or expand a business. Pinal Alliance is budgeted to fund a social media professional, sponsorships and place advertisements on behalf of Eloy and its other community partners at a value of \$15,000 in FY 2021.
- Advocating on behalf of the community through the engagement on a pro-bono basis the firm of Dorn Policy Group to serve as Pinal Arizona's eyes and ears at the state legislature. The value of this representation is \$5,000 annually.

Persons Served by Partnership

- Support the efforts of the City of Eloy and reach an audience of at least 3,000 community members in FY 2021/22. Audience will include senior citizens, elected leaders, chamber members, business leaders, high school students, and the education community.
- Impact persons interested in locating in Eloy, as well as community elected and business leaders with economic development messages through our newsletter and advertisements. The goal will be to influence 500 in 2021/22. One of our advertising programs will track the audience reached, and that data will be shared with the City of Eloy.
- The AARP Experience Corps Pinal-Casa Grande Reading Program will utilize seniors over 55 to tutor the program participants. It is expected the citizens of Eloy would be very interested in participating in this program. At this point, 60 Pinal County residents are volunteering for the program. The value of their volunteer hours for the program, which launched virtually in November, will be calculated and presented to the Eloy Chamber of Commerce.

The services Pinal Alliance is proposing to provide offer many benefits. As an independent, dues driven organization, we are capable of providing services to Eloy that are not otherwise permissible by the public sector. Our organizational model will positively impact Eloy's economic development efforts by leveraging, not duplicating, local efforts. The organization's board of directors is proud to come together at monthly meetings to consider how Pinal Alliance and each partner organization can work to improve the economic vitality of the region.



OGDEN UT 84201-0038

In reply refer to: 0441681549
Apr. 12, 2010 LTR 4168C E0
86-0482868 000000 00
00033474
BODC: TE

CENTRAL ARIZONA REGIONAL ECONOMIC
DEVELOPMENT FOUNDATION
540 N CAMINO MERCADO STE 2
CASA GRANDE AZ 85122



040552

Employer Identification Number: **-***2868
Person to Contact: Mr. Ludlow
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

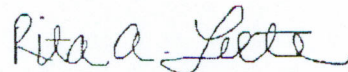
This is in response to your Apr. 01, 2010, request for information regarding your tax-exempt status.

Our records indicate that your organization was recognized as exempt under section 501(c)(6) of the Internal Revenue Code in a determination letter issued in June 1985.

Because you are not an organization described in section 170(c) of the Code, donors may not deduct contributions made to you. You should advise your contributors to that effect.

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely yours,



Rita A. Leete
Accounts Management II

OGDEN UT 84201-0046

In reply refer to: 0423274550
Oct. 05, 2017 LTR 252C 0
86-0482868 000000 00
00004810
BODC: TE

PINAL ALLIANCE FOR ECONOMIC GROWTH
17235 N 75TH AVE STE D145
GLENDALE AZ 85308-0861



032496

Taxpayer Identification Number: 86-0482868

Dear Taxpayer:

Thank you for the inquiry dated Sep. 06, 2017.

We have changed the name on your account as requested. The number shown above is valid for use on all tax documents.

If you need forms, schedules, or publications, you may get them by visiting the IRS website at www.irs.gov or by calling toll-free at 1-800-TAX-FORM (1-800-829-3676).

If you have any questions, please call us toll free at 1-877-829-5500.

If you prefer, you may write to us at the address shown at the top of the first page of this letter.

Whenever you write, please include this letter and, in the spaces below, give us your telephone number with the hours we can reach you. Also, you may want to keep a copy of this letter for your records.

Telephone Number () _____ Hours _____

Sincerely yours,



Shane M. Painter
Dept. Manager, Entity

Enclosure(s):
Copy of this letter

Pinal Alliance for Economic Growth

Balance Sheet

As of December 31, 2020

	Dec 31, 20	Dec 31, 19	% Change
ASSETS			
Current Assets			
Checking/Savings			
102 · GWB Operating Account	7,555.34	28,712.21	-73.69%
106 · Edward Jones Investments	16,007.73	15,976.82	0.19%
107 · The Foothills Bank			
107.5 · The Foothills Bank Savings 1324	43,955.97	63,524.39	-30.81%
Total 107 · The Foothills Bank	43,955.97	63,524.39	-30.81%
Total Checking/Savings	67,519.04	108,213.42	-37.61%
Accounts Receivable			
1200 · Accounts Receivable	-833.34	-833.34	0.0%
Total Accounts Receivable	-833.34	-833.34	0.0%
Other Current Assets			
1499 · Undeposited Funds	-333.85	-333.85	0.0%
Total Other Current Assets	-333.85	-333.85	0.0%
Total Current Assets	66,351.85	107,046.23	-38.02%
Fixed Assets			
1500 · Property & Equipment			
1501 · Original Cost	51,992.94	51,992.94	0.0%
1502 · Depreciation	-51,992.94	-51,992.94	0.0%
Total 1500 · Property & Equipment	0.00	0.00	0.0%
Total Fixed Assets	0.00	0.00	0.0%
TOTAL ASSETS	66,351.85	107,046.23	-38.02%
LIABILITIES & EQUITY			
Equity			
301 · Retained Earnings	107,046.23	102,520.09	4.42%
Net Income	-40,694.38	4,526.14	-999.1%
Total Equity	66,351.85	107,046.23	-38.02%
TOTAL LIABILITIES & EQUITY	66,351.85	107,046.23	-38.02%

Pinal Alliance for Economic Growth

Profit & Loss YTD Comparison

January through December 2020

	Jan - Dec 20	Jan - Dec 19	% Change
Ordinary Income/Expense			
Income			
4000 · Achieve Pinal Project			
4000.1 · AARP Experience Corps Program	8,359.40	0.00	100.0%
4000.2 · Careertopia	2,500.00	0.00	100.0%
4000 · Achieve Pinal Project - Other	0.00	2,250.00	-100.0%
Total 4000 · Achieve Pinal Project	10,859.40	2,250.00	382.64%
4001 · City of Casa Grande	24,687.00	25,000.00	-1.25%
4003 · City of Eloy	5,000.00	10,000.00	-50.0%
4004 · Pinal County	37,500.00	50,000.00	-25.0%
4100 · Memberships	46,375.00	65,977.00	-29.71%
4500 · Interest	462.49	572.49	-19.21%
4900 · Meeting/Event Revenue			
4901 · Annual Meeting	0.00	7,135.00	-100.0%
4905 · Forum Event Revenue	315.00	0.00	100.0%
Total 4900 · Meeting/Event Revenue	315.00	7,135.00	-95.59%
Total Income	125,198.89	160,934.49	-22.21%
Gross Profit	125,198.89	160,934.49	-22.21%
Expense			
8110 · Management Fees	104,816.59	87,674.82	19.55%
8115 · Achieve Project			
8115.1 · AARP Experience Corps Program	8,026.81	0.00	100.0%
8115.2 · Career Expo Pinal County	4,064.76	0.00	100.0%
8115 · Achieve Project - Other	156.06	1,636.21	-90.46%
Total 8115 · Achieve Project	12,247.63	1,636.21	648.54%
8205 · Travel/Mileage	1,550.36	3,042.20	-49.04%
8206 · Postage & Delivery	264.13	235.00	12.4%
8207 · Telephone	1,500.00	1,625.00	-7.69%
8208 · Office Supplies	395.55	278.25	42.16%
8209 · Dues/Subscriptions	26,430.00	29,627.80	-10.79%
8211 · Commercial Insurance	1,847.00	1,826.00	1.15%
8212 · Legal/Accounting	585.00	580.00	0.86%
8215 · Printing	153.10	205.65	-25.55%
8219 · Training/Professional Dev	90.00	2,052.94	-95.62%
8224 · State-Wide Sponsorships	0.00	1,332.95	-100.0%
8300 · Annual Meeting			
8301 · Meals	0.00	4,257.07	-100.0%
8303 · Office Supplies	0.00	88.78	-100.0%
8304 · Copying/Printing	0.00	265.10	-100.0%
8306 · Other	0.00	150.00	-100.0%
Total 8300 · Annual Meeting	0.00	4,760.95	-100.0%
8400 · Local Meetings			
8401 · Board Meetings	503.35	1,955.89	-74.27%
8402 · Community Meetings	20.00	174.24	-88.52%

Pinal Alliance for Economic Growth

Profit & Loss YTD Comparison

January through December 2020

	Jan - Dec 20	Jan - Dec 19	% Change
8403 · Office Meetings	0.00	46.38	-100.0%
8404 · Forum Event Expenses	600.00	0.00	100.0%
Total 8400 · Local Meetings	1,123.35	2,176.51	-48.39%
8501 · Industry Programs	20.00	0.00	100.0%
8502 · Web Site/Internet/Email	1,090.29	1,832.45	-40.5%
8600 · Special Projects			
I-10 Widen Art and Production	0.00	23.75	-100.0%
8607 · I-10 Initiative--Management Fee	0.00	886.50	-100.0%
8608 · I-10 Initiative Website Fees	0.00	34.00	-100.0%
8610 · I-10 Initiative-Office Supplies	0.00	487.36	-100.0%
Total 8600 · Special Projects	0.00	1,431.61	-100.0%
8605 · Bank & Finance charges	480.85	629.61	-23.63%
8700 · Marketing & Advertising	13,177.57	15,460.40	-14.77%
8900 · Miscellaneous	121.85	0.00	100.0%
Total Expense	165,893.27	156,408.35	6.06%
Net Ordinary Income	-40,694.38	4,526.14	-999.1%
Net Income	-40,694.38	4,526.14	-999.1%

PINAL ALLIANCE		
2021 ADOPTED BUDGET		
		Proposed Budget
		2021
<u>INCOME</u>	City of Casa Grande	25,000.00
	City of Eloy	10,000.00
	Pinal County	50,000.00
	Memberships	50,000.00
	Achieve Pinal Initiatives	10,000.00
	I-10 Widening Project	0.00
	Interest	350.00
	Annual Meeting	6,000.00
	Forum Event Revenue	0.00
	Other Revenue	
TOTAL INCOME		151,350.00
<u>EXPENSES</u>	Management Fees	85,000.00
	Mileage/Travel	2,500.00
	Postage	150.00
	Telephone	1,500.00
	Office Supplies	250.00
	Dues/Subscriptions	28,000.00
	Commercial Insurance	1,900.00
	Legal/Accounting	585.00
	Office Equipment	0.00
	Printing	250.00
	Training/Professional Development	500.00
	Industry Programs	0.00
	Community Sponsorships	0.00
	Annual Meeting	4,500.00
	Board Meetings	2,000.00
	Community Meetings	500.00
	Forum Event Expenses	4,000.00
	Web Site/Internet/Email	1,200.00
	Bank & Finance Charges	650.00
	Marketing & Advertising	10,000.00
	Miscellaneous	250.00
	Achieve Pinal Initiatives	5,000.00
	I-10 Widening Project	0.00
TOTAL EXPENSES		148,735.00
TOTAL Income/Expense		2,615.00

PINAL ALLIANCE		
2022 CONCEPTUAL BUDGET		
		Proposed Budget
		2021
<u>INCOME</u>	City of Casa Grande	23,748.00
	City of Eloy	10,000.00
	Pinal County	50,000.00
	New Community Partner Members	30,000.00
	Memberships	50,000.00
	Achieve Pinal Initiatives	25,000.00
	I-10 Widening Project	0.00
	Interest	350.00
	Annual Meeting	6,000.00
	Forum Event Revenue	0.00
	Other Revenue	
TOTAL INCOME		195,098.00
<u>EXPENSES</u>	Management Fees	105,000.00
	Mileage/Travel	2,000.00
	Postage	150.00
	Telephone	1,500.00
	Office Supplies	250.00
	Dues/Subscriptions	28,000.00
	Commercial Insurance	1,900.00
	Legal/Accounting	600.00
	Office Equipment	0.00
	Printing	250.00
	Training/Professional Development	1,000.00
	Industry Programs	0.00
	Community Sponsorships	0.00
	Annual Meeting	4,500.00
	Board Meetings	2,000.00
	Community Meetings	500.00
	Forum Event Expenses	0.00
	Web Site/Internet/Email	1,200.00
	Bank & Finance Charges	900.00
	Marketing & Advertising	15,000.00
	Miscellaneous	250.00
	Achieve Pinal Initiatives	15,000.00
	I-10 Widening Project	0.00
TOTAL EXPENSES		180,000.00
TOTAL Income/Expense		15,098.00

**COMMUNITY OUTREACH PROGRAM
2021-2022 FUNDING APPLICATION**

Section 1

Date: March 24, 2021

Organization Name: Sunland Visitor Center, Inc. (SVC)

Address: 3725 N. Camelot St., Eloy, AZ 85131

Phone: 520-466-3007 Cell: 520-431-2654 Fax: 520-466-3007

E-mail: sunandvisitorcenter@azci.net

Contact Person/Title: Cynthia Yates, Director of Operations

Name of the services/program for which you are requesting funding:

Sunland Visitor Center, Inc.

Please indicate the amount of funding you are requesting: \$18,000

Have you applied for other grant funding such as Eloy Community Event Grant Program from the city: No

Cynthia Yates
Authorized Agency Representative

Director of Operations
Title

March 24, 2021
Date

SUNLAND VISITOR CENTER

2021 – 2022 Budget

***INCOME**

City of Eloy	\$18,000.00
Pinal County	27,000.00
Donations	1,252.00
TOTAL	\$46,252.00

***EXPENSES**

Arizona Corporation Commission	\$	10.00
Insurance		1,842.00
Maintenance & Supplies		2,400.00
Marketing		
Billboard (6 months)	\$8,000.00	
Printed Ads	8,500.00	24,500.00
Digital Ads	8,000.00	
Miscellaneous		1,300.00
Internet		1,000.00
Office Supplies/Printer/Printing		3,700.00
Postage		200.00
Utilities (Electric)		3,000.00
Wages (Director)		8,300.00
TOTAL		\$46,252.00

***City of Eloy and Pinal County Budget Checks are deposited into the Sunland Visitor Bank Checking Account. All expenses are paid from that one account. There is not a specific designation or separation of City and/or Pinal County monies when payments are made from that account. However, the major contribution of the County is spent on marketing and printing.**

Sunland Visitor Center, Inc.
7/1/2020 through 3/16/2021

20-21 Income			40,086.12
20-21 Income:Eloy Income			15,000.00
9/21/2020	City Of Eloy	Yearly Operating Funding	15,000.00
20-21 Income:Other Income			1,086.12
7/3/2020	Santa Cruz Valley Museum	May Utilities Reimbursement	27.21
7/3/2020	Santa Cruz Valley Museum	June Utilities Reimbursement	52.61
8/13/2020	Santa Cruz Valley Museum	Feb Apr July Utilities Reimbursement	232.68
8/28/2020	Eloy Chamber Of Commerce	Utilities Mar, June, July	214.34
9/20/2020	Santa Cruz Valley Museum	Utilities August Reimbursement	134.72
10/8/2020	Eloy Chamber Of Commerce	Utilities: August Reimbursement	134.72
10/29/2020	Santa Cruz Valley Museum	September Utilities Reimbursement	93.25
12/11/2020	Eloy Chamber Of Commerce	Utilities: October Partial Payment	58.59
12/21/2020	Santa Cruz Valley Museum	Oct Nov Utilities Reimbursement	101.28
1/4/2021	Santa Cruz Valley Museum	Dec Utilities Reimbursement	36.72
20-21 Income:Pinal County Income			24,000.00
10/6/2020	Pinal County	First Half Support	12,000.00
2/11/2021	Pinal County	Second Half Support	12,000.00
20-21 Budget Expenses			-26,500.74
20-21 Budget Expenses:Other Insurance			-1,842.00
3/15/2021	Philidelphia Insurance Companies	2021 Insurance	-1,842.00
20-21 Budget Expenses:Other Marketing			-16,076.12
10/13/2020	Wallace Snestrud	Domain name and website	-30.76
10/29/2020	Compass Marketing	Advertising	-900.00
11/1/2020	San Diego Magazien	Advertising	-2,180.00
12/18/2020	Madden Media	Marketing	-500.00
12/30/2020	Madden Media	Q-00516, Q-00528	-6,775.00
12/30/2020	Wallace Snestrud	Go Daddy Website Hosting 1-year	-124.81
1/17/2021	Clear Channel	Marketing January Invoices	-1,802.75
1/28/2021	Blue Raven Studios	Google Photography	-499.00
2/15/2021	Clear Channel	Marketing February Invoice	-1,250.00
2/15/2021	Alphabet Signs	Marketing	-381.90
3/9/2021	Alphabet Signs	Marketing	-381.90
3/15/2021	Clear Channel	Marketing March Invoice	-1,250.00
20-21 Budget Expenses:Other Office Supplies			-919.05
7/20/2020	Staples	Office Supplie	-77.17
7/23/2020	Officemax	Sanitizer/Disenfecting wipes	-66.78
8/3/2020	Wallace Snestrud	Sprayer and Disinfectant	-285.41
		MLsc. Fasteners	-8.50
9/30/2020	Staples	Office Supplie	-58.42
10/2/2020	Staples	Office Supplie	-9.13
10/7/2020	Lowes, Casa Grande	Office Supplies	-46.93
1/20/2021	Western Bank	Checks	-19.95
2/1/2021	Staples	Office Supplie	-269.56
2/15/2021	Wallace Snestrud	Corporate Commision rpts 20 and 21	-20.00
2/28/2021	James Yates	Reimbursement	-57.20

20-21 Budget Expenses:Other Utilities			-1,850.47
7/1/2020	Aps Utility	Electricity July	-150.00
7/23/2020	Aps Utility	Electricity July (balance of bill)	-185.14
7/29/2020	City Of Eloy	July Water Bill	-21.50
8/20/2020	City Of Eloy	August Water Bill	-21.51
8/24/2020	Aps Utility	Electricity August	-382.65
9/22/2020	Aps Utility	Electricity: September	-258.67
9/25/2020	Santa Cruz Valley Museum	Feb-Aug Securiity Utilities Reimbursement	-121.31
9/30/2020	City Of Eloy	September Water Bill	-21.08
10/9/2020	City Of Eloy	October Water Bill	-21.50
10/22/2020	Aps Utility	Electricity: October	-183.99
11/3/2020	Eloy Chamber Of Commerce	Phone and Internet Nov-Mar	-59.19
11/20/2020	Aps Utility	Electricity: November	-80.23
11/21/2020	City Of Eloy	November Water Bill	-21.08
12/8/2020	City Of Eloy	December Water Bill	-28.23
12/19/2020	Aps Utility	December Electric Bill	-81.92
1/21/2021	Aps Utility	January Electric Bill	-67.36
1/23/2021	City Of Eloy	January Water Bill	-21.11
2/15/2021	City Of Eloy	February Water Bill	-21.50
2/17/2021	Aps Utility	Electricity February	-102.50
20-21 Budget Expenses:Other Wages			-5,813.10
7/1/2020	United State Treasury	Fed Medicare tax Qtr 2-2020	-275.40
8/5/2020	Cindy Yates	August Wages	-554.10
8/31/2020	Cindy Yates	September Wages	-554.10
10/1/2020	Cindy Yates	October Wages	-554.10
10/5/2020	United State Treasury	Fed Medicare tax Qtr 3-2020	-275.40
11/3/2020	Cindy Yates	November Wages	-554.10
11/20/2020	Cindy Yates	December Wages	-554.10
12/30/2020	United State Treasury	Fed Medicare tax Qtr 4-2020	-275.40
1/1/2021	Cindy Yates	January Wages	-554.10
1/17/2021	Cindy Yates	February Wages	-554.10
2/22/2021	Cindy Yates	March Wages	-554.10
3/15/2021	Cindy Yates	April Wages	-554.10
Budetary Total			13,585.38

SVC BOARD OF DIRECTORS

Bill Pitman

Richard Myers

Gloria Stanley

Wally Snesrud

Mary Lu Brooks

Mark Benner



PHILADELPHIA
INSURANCE COMPANIES

A Member of the Tokio Marine Group

One Bala Plaza, Suite 100
Bala Cynwyd, Pennsylvania 19004
610.617.7900 Fax 610.617.7940
PHLY.com

Philadelphia Indemnity Insurance Company
COMMON POLICY DECLARATIONS

Policy Number: PHPK2233646

Named Insured and Mailing Address:

Sunland Visitor Center, Inc
3725 N Camelot St
Eloy, AZ 85131-1526

Producer: 105364

Gebhardt Insurance Group LLC
719 E Cottonwood Ln Ste 1
Casa Grande, AZ 85122

Policy Period From: 04/01/2021 **To:** 04/01/2022

(520)836-3244

at 12:01 A.M. Standard Time at your mailing
address shown above.

Business Description: Non Profit Organization

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS
POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.

THIS POLICY CONSISTS OF THE FOLLOWING COVERAGE PARTS FOR WHICH A PREMIUM IS
INDICATED. THIS PREMIUM MAY BE SUBJECT TO ADJUSTMENT.

	PREMIUM
Commercial Property Coverage Part	1,377.00
Commercial General Liability Coverage Part	384.00
Commercial Crime Coverage Part	81.00
Commercial Inland Marine Coverage Part	
Commercial Auto Coverage Part	
Businessowners	
Workers Compensation	

Total \$ **1,842.00**

Total Includes Federal Terrorism Risk Insurance Act Coverage **27.00**

FORM (S) AND ENDORSEMENT (S) MADE A PART OF THIS POLICY AT THE TIME OF ISSUE
Refer To Forms Schedule

*Omits applicable Forms and Endorsements if shown in specific Coverage Part/Coverage Form Declarations

CPD- PIIC (06/14)

Secretary

John W. Glomb, Jr.
President & Chief Underwriting Officer

2021 ANNUAL REPORT

ENTITY INFORMATION

ENTITY NAME: SUNLAND VISITOR CENTER, INC.
ENTITY ID: 02051578
ENTITY TYPE: Domestic Nonprofit Corporation
CHARACTER OF BUSINESS: Other Services (except Public Administration)
AUTHORIZED SHARES:
ISSUED SHARES:

STATUTORY AGENT INFORMATION

STATUTORY AGENT NAME: ROBERT M YATES
PHYSICAL ADDRESS: 8370 Encanto Lane, ARIZONA CITY, AZ 85123
MAILING ADDRESS: 3275 N Camelot St, ELOY, AZ 85131

KNOWN PLACE OF BUSINESS

Att: Cynthia Yates, SUNLAND VISITOR CENTER , 3725 N. Camelot St, ELOY, AZ 85131

PRINCIPAL OFFICE ADDRESS

PRINCIPAL INFORMATION

Director: Mark Benner - 10295 N. Burris Rd., CASA GRANDE, AZ, 85122, USA - - Date of Taking Office:
Director: MARY L BROOKS - PO BOX 529 8308 SANTA CRUZ BLVD, ARIZONA CITY, AZ, 85123, USA - - Date
of Taking Office: 07/01/2019
President: William Pitman - 4115 N. Golden St., ELOY, AZ, 85131, USA - - Date of Taking Office: 07/01/2019
Secretary: Gloria Stanley - 3950 N. Moarc, ELOY, AZ, 85131, USA - - Date of Taking Office: 07/01/2019
Treasurer: Wally Snesrud - PO Box 1504, 8471 W. Mission Hills Dr., ARIZONA CITY, AZ, 85123, USA - - Date of
Taking Office: 07/01/2019
Vice-President: Richard Myers - 11585 W. Arica Rd., CASA GRANDE, AZ, 85193, USA -
doublerr@myerssys.com - Date of Taking Office: 07/01/2019

SIGNATURE

Treasurer: Wally Snesrud - 02/12/2021

Request for Taxpayer Identification Number and Certification

► Go to www.irs.gov/FormW9 for instructions and the latest information.

Give Form to the
requester. Do not
send to the IRS.

Print or type.
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. Sunland Visitor Center, Inc.	
2 Business name/disregarded entity name, if different from above	
3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. ☐ Individual/sole proprietor or single-member LLC ☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership): _____ Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. ☐ Other (see Instructions) ►	4 Exemptions (codes apply only to certain entities, not individuals; see Instructions on page 3): Exempt payee code (if any) 1 Exemption from FATCA reporting code (if any) A (Applies to accounts maintained outside the U.S.)
5 Address (number, street, and apt. or suite no.) See Instructions. 3725 N. Camelot St.	Requester's name and address (optional)
6 City, state, and ZIP code Eloy, AZ 85131-1526	
7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number								
			-					
or								
Employer identification number								
8	6		-	0	5	8	0	4 2 8

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the Instructions for Part II, later.

Sign Here	Signature of U.S. person ► <i>Wallace M. Suesund</i>	Date ► <i>3/15/2021</i>
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What Is backup withholding*, later.

Quarterly Report January – March, 2021



SUNLAND VISITOR CENTER, INC. (SVC)

Covid vaccinations have provided some great news for those who wish to leave their homes and interact with the rest of society. A **Destination Analysts** survey reveals that 67% of people surveyed, will be travelling in July and August. Most wish to visit small or rural areas away from the rush of cities and suburbs. Outdoor open areas and parks are on the desirable list. That is a good description of our part of Arizona.

Attractions are beginning to re-open. Most Visitor Centers at parks and amenities are still shuttered, but outdoor areas are open for viewing.

The SVC Census is ticking up. Staff is beginning the vaccination process (only 3 of the staff are fully vaccinated). **Phase 1 of the Re-opening process** seemed logical. As the staff is ready to return, the schedule will fill until the Visitor Center is fully opened. A beginning schedule of 4 hours/day on Friday, Saturday and Sunday was posted by the Outdoor Boxes and flyers dropped at RV Parks. A Press Release will go out when we are ready to have our **GRAND OPENING**. Being shuttered for a year has been very frustrating!

The Outdoor Boxes, .com URL and Google Business site have been very successful.

CENSUS TOTALS (Outdoor boxes and social media)

<u>JANUARY</u>	<u>FEBRUARY</u>	<u>MARCH</u>
671	1909	2175
		(In-house - 86)

Google Search Engine Marketing (SEM) is introducing visitors to our new sunlandvisitorcenter.com website.

The **Google 360 Virtual Tour** is now available on **Google: sunland visitor center- photos**. The Tour is of the Visitor Center and both Museum locations.

The Tucson Guide (with our full-page ad) has been printed and distributed. That concludes most of our outsourced marketing. Plans are now beginning for our 2021-2022 Marketing Campaign. Canada and Minnesota are on our schedule for outreach this year. Covid stole almost 60% of our visitor market from the upper-states and Canada. Our job is to entice them to return.

Funding Applications have been submitted to Pinal County and City of Eloy.

Date	Description	Memo	Amount
INCOME			
20-21 Income			40,224.57
20-21 Income:Eloy Income			40,224.57
			15,000.00
20-21 Income:Other Income			15,000.00
	9/21/2020 City Of Eloy	Yearly Operating Funding	1,224.57
	7/3/2020 Santa Cruz Valley Museum	May Utilities Reimbursement	27.21
	7/3/2020 Santa Cruz Valley Museum	June Utilities Reimbursement	52.61
	8/13/2020 Santa Cruz Valley Museum	Feb Apr July Utilities Reimbursement	232.68
	8/28/2020 Eloy Chamber Of Commerce	Utilities Mar, June, July	214.34
	9/20/2020 Santa Cruz Valley Museum	Utilities August Reimbursement	134.72
	10/8/2020 Eloy Chamber Of Commerce	Utilities: August Reimbursement	134.72
	10/29/2020 Santa Cruz Valley Museum	September Utilities Reimbursement	93.25
	12/11/2020 Eloy Chamber Of Commerce	Utilities: October Partial Payment	58.59
	12/21/2020 Santa Cruz Valley Museum	Oct Nov Utilities Reimbursement	101.28
	1/4/2021 Santa Cruz Valley Museum	Dec Utilities Reimbursement	36.72
	3/14/2021 Santa Cruz Valley Museum	Jan-Feb Utilities Reimbursement	70.91
	3/21/2021 Century Link	MDL Settlement	67.54
20-21 Income:Pinal County Income			24,000.00
	10/6/2020 Pinal County	First Half Support	12,000.00
	2/11/2021 Pinal County	Second Half Support	12,000.00
EXPENSES			
20-21 Budget Expenses			-26,532.16
20-21 Budget Expenses:Other Insurance			-26,532.16
	3/15/2021 Philidelphia Insurance Compar 2021 Insurance		-1,842.00
20-21 Budget Expenses:Other Marketing			-1,842.00
	10/13/2020 Wallace Snedrud	Marketing Domain name and website	-16,076.12
	10/29/2020 Compass Marketing	Marketing - Advertising	-30.76
			-900.00

11/1/2020	San Diego Magazien	Marketing - Advertising	-2,180.00
12/18/2020	Madden Media	Marketing	-500.00
12/30/2020	Madden Media	Marketing Q-00516, Q-00528	-6,775.00
12/30/2020	Wallace Snesrud	Marketing Go Daddy Website Hosting 1-year	-124.81
1/17/2021	Clear Channel	Marketing January Invoices	-1,802.75
1/28/2021	Blue Raven Studios	Marketing - Google Photography-Website	-499.00
2/15/2021	Clear Channel	Marketing February Invoice	-1,250.00
2/15/2021	Alphabet Signs	Marketing - Advertising - Signs	-381.90
3/9/2021	Alphabet Signs	Marketing - Advertising - Signs	-381.90
3/15/2021	Clear Channel	Marketing March Invoice	-1,250.00
20-21 Budget Expenses:Other Office Supplies			-919.05
7/20/2020	Staples	Office Supplie	-77.17
7/23/2020	Officemax	Sanitizer/Disinfecting wipes	-66.78
8/3/2020	Wallace Snesrud	Sprayer and Disinfectant	-285.41
		Misc. Fasteners	-8.50
9/30/2020	Staples	Office Supplie	-58.42
10/2/2020	Staples	Office Supplie	-9.13
10/7/2020	Lowes, Casa Grande	Office Supplies	-46.93
1/20/2021	Western Bank	Checks	-19.95
2/1/2021	Staples	Office Supplie	-269.56
2/15/2021	Wallace Snesrud	Corporate Commision rpts 20 and 21	-20.00
2/28/2021	James Yates	Reimbursement- Office Supplies	-57.20
20-21 Budget Expenses:Other Utilities			-1,881.89
7/1/2020	Aps Utility	Electricity July	-150.00
7/23/2020	Aps Utility	Electricity July (balance of bill)	-185.14
7/29/2020	City Of Eloy	July Water Bill	-21.50
8/20/2020	City Of Eloy	August Water Bill	-21.51
8/24/2020	Aps Utility	Electricity August	-382.65
9/22/2020	Aps Utility	Electricity- September	-258.67
9/25/2020	Santa Cruz Valley Museum	Feb-Aug Security Utilities Reimbursement	-121.31
9/30/2020	City Of Eloy	September Water Bill	-21.08
10/9/2020	City Of Eloy	October Water Bill	-21.50
10/22/2020	Aps Utility	Electricity- October	-183.99
11/3/2020	Eloy Chamber Of Commerce	Phone and Internet Nov-Mar	-59.19
11/20/2020	Aps Utility	Electricity- November	-80.23

11/21/2020	City Of Eloy	November Water Bill	-21.08
12/8/2020	City Of Eloy	December Water Bill	-28.23
12/19/2020	Aps Utility	December Electric Bill	-81.92
1/21/2021	Aps Utility	January Electric Bill	-67.36
1/23/2021	City Of Eloy	January Water Bill	-21.11
2/15/2021	City Of Eloy	February Water Bill	-21.50
2/17/2021	Aps Utility	Electricity February	-102.50
3/7/2021	City Of Eloy	March Water Bill	-24.89
3/14/2021	Eloy Chamber Of Commerce	Utilities: January-February Partial Payment	70.91
3/18/2021	Aps Utility	Electricity March	-77.44
20-21 Budget Expenses:Other Wages			-5,813.10
7/1/2020	United State Treasury	Fed Medicare tax Qtr 2-2020	-275.40
8/5/2020	Cindy Yates	August Wages	-554.10
8/31/2020	Cindy Yates	September Wages	-554.10
10/1/2020	Cindy Yates	October Wages	-554.10
10/5/2020	United State Treasury	Fed Medicare tax Qtr 3-2020	-275.40
11/3/2020	Cindy Yates	November Wages	-554.10
11/20/2020	Cindy Yates	December Wages	-554.10
12/30/2020	United State Treasury	Fed Medicare tax Qtr 4-2020	-275.40
1/1/2021	Cindy Yates	January Wages	-554.10
1/17/2021	Cindy Yates	February Wages	-554.10
2/22/2021	Cindy Yates	March Wages	-554.10
3/15/2021	Cindy Yates	April Wages	-554.10

April 01, 2021

To: Harvey Krauss
City Manager
Eloy City Hall
595 North C Street, Ste. 104
Eloy, AZ 85131



COMMUNITY OUTREACH PROGRAM

GUIDELINES AND APPLICATION

FY 2021-2022

From: Eloy Chamber of Commerce
3725 North Camelot Street
Eloy, AZ 85131-1526
520-466-3411

markbenner@eloychamber.org

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Please proceed to page 3**

COMMUNITY OUTREACH PROGRAM 2020-2021 FUNDING
APPLICATION

Section 1

Date: 4/01/2021

Organization Name: Eloy Chamber of Commerce

Address: 3725 North Camelot Street

Eloy, AZ 85131-1526

Phone: 520-466-3411 Fax: none

Email: markbenner@eloychamber.org

Contact Person/Title: Mark Benner – Chief executive Officer

Proposal Submitted on: Thursday, April 1, 2021

Name of the services/program for which you are requesting funding: _____

Eloy Chamber Marketing Services Contract

Please indicate the amount of funding you are requesting: \$ 28,000

Have you applied for other grant funding such as Eloy Community Event Grant Program from the city: No

Mark R. Benner

Authorized Agency Representative

CEO

Title

4/01/2021

Date



COMMUNITY OUTREACH PROGRAM

2021-2022 FUNDING APPLICATION – ELOY CHAMBER OF COMMERCE

SECTION 2

1. Brief Description of our services/program of work

We remain the "Go To" Place for Eloy businesses, citizens & winter visitors to garner information on City Services, zoning requirements, local area businesses and tourist attractions. Our Business Memberships total 117, includes approximately 13 non-profit organizations. In normal times, (no pandemics) we usually provide local service organizations a venue to display their services and network with our membership at no cost. At this point in time, we are in the planning stages to now continue to provide a minimum of 6 business luncheons (with relevant speakers if available,) & 6 business mixers as well. We assist local citizens with City contacts & City services. We provide mailing packets for anyone interested in relocating to the Eloy Community. We plan to sponsor the Memorial Day Ceremony, Eloy Memorial Park /Cemetery yearly: (85-110 attendees.) We recruit the keynote speaker and administer the role of master of ceremonies. Our CEO serves as the Vice Chair Commissioner on the Eloy Downtown Advisory Council, we work closely with the Eloy Economic Development Consultant and serve as well, on the Eloy Economic Development Committee.

We answer any citizen's request involving the community, city services and local tourism questions, 362 days a year.

2. Benefits to City of Eloy

We are the liaison for our business clients who need assistance & representation to take advantage of economic opportunities, & solve problems. Additionally, we work with the business community & citizens who need information on Eloy code & zoning issues, we have successfully provided the course of action to allow our businesses to gain approval on projects when they had no other recourse. Our CEO is Vice Chair of the Downtown Advisory Commission & actively involved. The Chamber's Tour of Empty buildings is held twice a year (Community Planning dept. is a partner,) we started with 11 vacant buildings and six have since been sold or occupied. We publish an annual Business Directory & Community Guide which is distributed to approximately 600 Citizens, 200 winter visitors and @ 15 Chambers & Visitor Center offices throughout the state. We plan to distribute @ 2,000 copies per year. Under normal traveling conditions; a.) we personally provide information on Eloy and our local Businesses to an average of 500 tourists/winter visitors per year. B.) We partner with our business members & local Chambers to provide The Pinal County Tourism Map, 20,000 copies are printed and distributed throughout the County.



3. Total number of persons served by our program of service

We serve the entire community as needed. We provide local businesses & service organizations a venue to network with our membership at no cost. We assist local citizens with City contacts & City services. We provide mailing packets for anyone interested in relocating to the Eloy Community. We maintain a website which includes our community guide (normally we receive @ 1,000 clicks per month.) We interact with approximately 600 visitors from other countries who visit Eloy for skydiving events.

PREPARED BY:

Smaller
TREASURER



2021-2022 Eloy Chamber Of Commerce Proposed Budget

	Jul 2021	Aug 2021	Sept 2021	Oct 2021	Nov 2021	Dec 2021	Jan 2022	Feb 2022	Mar 2022	Apr 2022	May 2022	Jun 2022	Totals
Income													
Rebate/Refund Inc	0	0	0	0	0	0	0	0	0	1,300	0	0	1,300
Banquet	0	0	0	0	0	0	0	2,167	833	0	0	0	3,000
Lunches/Mixers/50/50	225	225	85	85	225	85	225	85	225	85	225	85	1,860
Donations	0	0	0	200	0	1,200	300	0	0	0	0	0	1,700
Funding from City	0	0	7,000	0	0	7,000	0	0	7,000	0	0	7,000	28,000
Golf Tournament	0	0	0	2,983	2,983	2,984	0	0	0	0	0	0	8,950
Membership Dues	1,500	1,500	1,500	1,500	1,500	1,500	1,700	1,600	1,600	1,700	1,600	1,600	18,800
Total Income	1,725	1,725	8,585	4,768	4,708	12,769	2,225	3,852	9,658	3,085	1,825	8,685	63,610
Expenses													
Bank & CC Svc Chgs	42	42	42	42	42	42	42	42	42	42	42	42	506
Insurance	0	0	0	0	0	0	1,700	0	900	0	0	0	2,600
Telephone	60	60	60	60	60	60	60	60	60	60	60	60	720
Water Service	20	20	20	20	20	20	20	20	20	20	20	20	240
Garbage/Gas/Sewer	73	73	73	73	73	73	73	73	73	73	73	73	876
Electricity	175	175	175	130	130	125	130	130	130	150	175	175	1,800
Payroll Taxes	277	277	277	277	277	277	277	277	277	277	277	277	3,325
Wages	2,683	2,683	2,683	2,683	4,349	6,016	4,349	3,349	3,349	3,349	3,349	3,349	42,189
Recruiting/Advertising	0	0	400	150	0	0	0	0	0	0	0	0	550
Accounting	70	70	70	70	70	70	70	70	720	70	70	70	1,490
Banquet Expense	0	0	0	0	0	0	950	675	675	0	0	0	2,300
Meetings Expense	10	10	45	10	30	35	10	230	35	240	10	245	910
Chamber Mktg Svs	69	69	69	69	69	69	69	69	69	69	69	69	825
Donations	0	0	0	0	100	300	100	0	50	0	50	0	600
Golf Tournament Costs	0	0	0	1,200	1,000	1,000	0	0	0	0	0	0	3,200
Office Supplies	49	49	49	49	49	49	163	49	49	49	49	49	699
Web Services	65	65	65	65	65	65	65	65	65	65	65	65	780
Total Expenses	3,592	3,592	4,027	4,897	6,333	8,200	8,077	5,109	6,514	4,464	4,309	4,494	63,610
Net Income	(1,867)	(1,867)	4,558	(129)	(1,625)	4,569	(5,852)	(1,257)	3,144	(1,379)	(2,484)	4,191	0

ELOY CHAMBER OF COMMERCE

As of February 28, 2021

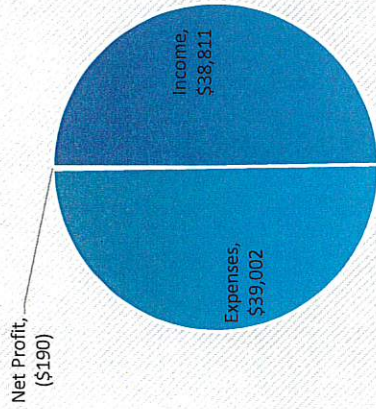
	Month				Year			
	Actual	Budget	Variance	% Variance	Actual	Budget	Variance	% Variance
Revenues								
Dues	\$1,295	\$1,325	(\$30)	-2.3%	\$10,310	\$12,930	(\$2,620)	-20.3%
City Funding	\$6,500	\$0	\$6,500	6500.0%	\$19,500	\$13,000	\$6,500	50.0%
Fundraisers*	\$0	\$1,263	(\$1,263)	-100.0%	\$6,760	\$11,879	(\$5,119)	-43.1%
Other Income**	\$310	\$0	\$310	310.0%	\$2,241	\$3,094	(\$853)	-27.6%
Total Income	\$8,105	\$2,588	\$5,517	213.2%	\$38,811	\$40,903	(\$2,092)	-5.1%
Total Expenses	\$4,253	\$5,606	\$1,352	24.1%	\$39,002	\$42,684	\$3,683	8.6%
Net Profit/(Loss)	\$3,851	(\$3,018)	\$6,869	-227.6%	(\$190)	(\$1,781)	\$1,590	-89.3%
								-1368

*Includes annual banquet and golf tournament

**Includes 50/50 donations, business luncheons and mixers attendance fees, rebates/refunds

Note: Annual budget revised to reflect month-to-month breakdown.

YTD Results



Average Monthly Expenses +	\$4,875
Average Monthly Income +	\$4,851
Average Net Profit/(Loss)	(\$24)
+ Based on YTD Actuals	

Month End Cash On Hand	\$13,818
Previous Month End Cash on Hand	\$9,221

PREPARED BY:

Smadala

TREASURER

2021 ANNUAL REPORT

ENTITY INFORMATION

ENTITY NAME: ELOY CHAMBER OF COMMERCE, INC.
ENTITY ID: 13467240
ENTITY TYPE: Domestic Nonprofit Corporation
CHARACTER OF BUSINESS: PROFESSIONAL, COMMERCIAL, INDUSTRIAL, OR TRADE
AUTHORIZED SHARES:
ISSUED SHARES:

STATUTORY AGENT INFORMATION

STATUTORY AGENT NAME: DAVID A FITZGIBBONS III
PHYSICAL ADDRESS: 1115 COTTON WOOD LANE , CASA GRANDE, AZ 85122
MAILING ADDRESS: 1115 COTTON WOOD LANE , CASA GRANDE, AZ 85122

KNOWN PLACE OF BUSINESS

Att: mark benner, Eloy Chamber, 3725 N Camelot Street, ELOY, AZ 85131

PRINCIPAL OFFICE ADDRESS

PRINCIPAL INFORMATION

Chairman of the Board of Directors: WILLIAM PITMAN - 3725 N Camelot Street, ELOY, AZ, 85131, USA - bill.pitman@yahoo.com - Date of Taking Office: 02/28/2018

Director: Daniel Snyder - 5254 N. Arrowhead Drive, ELOY, AZ, 85131, USA - bearingsandlubes@Q.com - Date of Taking Office: 03/01/2019

Director: ISABEL E MORALES - 1300 E FLORENCE BLVD., CASA GRANDE, AZ, 85122, USA - Isabel.Morales@greatwesternbank.com - Date of Taking Office: 11/07/2016

Director: KEVIN PETERSEN - 3369 E Queen Creek Road, TEMPE, AZ, 85287, USA - kevin@PPMLand.com - Date of Taking Office: 02/27/2020

Director: Lori Davis-Hill - Banner Medical Center, 1800 E. Florence Blvd., CASA GRANDE, AZ, 85122, USA - Lori.Davishill@bannerhealth.com - Date of Taking Office: 08/29/2019

Director: NATHANIEL SMITH - 318 N Olive Ave., CASA GRANDE, AZ, 85122, USA - nathanielfsmith@msn.com - Date of Taking Office: 02/24/2016

Director: Richard Rosales - 50 N. Brown Ave., CASA GRANDE, AZ, 85122, USA - richard.rosales@APS.com - Date of Taking Office: 02/28/2019

Director: TERRI ACKLAND - 5375 W. Posse Drive, ELOY, AZ, 85131, USA - terri.ackland@centralaz.edu - Date of Taking Office: 07/26/2018

Secretary: MARK BENNER - 10295 N BURRIS ROAD, CASA GRANDE, AZ, 85122, USA - markbenner@eloychamber.org - Date of Taking Office: 08/05/2014

Vice-President: TODD THOMAS - 1250 E ARICA ROAD, ELOY, AZ, 85131, USA - todd.thomas@corecivic.com - Date of Taking Office: 02/28/2018

SIGNATURE

Secretary: Mark Benner - 04/01/2021

Form **990-T****Exempt Organization Business Income Tax Return**
(and proxy tax under section 6033(e))

OMB No. 1545-0047

2019For calendar year 2019 or other tax year beginning 7/01, 2019, and ending 6/30, 2020▶ Go to www.irs.gov/Form990T for instructions and the latest information.

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Department of the Treasury
Internal Revenue ServiceOpen to Public Inspection for
501(c)(3) Organizations Only

A ☐ Check box if address changed B Exempt under section ☒ 501(c)(6) ☐ 408(e) ☐ 220(e) ☐ 408A ☐ 530(a) ☐ 529(a)	Print or Type	☐ Check box if name changed and see instructions. Eloy Chamber of Commerce 3725 N Camelot St Eloy, AZ 85131	D Employer identification number (Employees' trust, see instructions.) 86-0292290 E Unrelated business activity code (See instructions.) 713200
C Book value of all assets at end of year 14,652.	F Group exemption number (See instructions.) ▶ G Check organization type: ☒ 501(c) corporation ☐ 501(c) trust ☐ 401(a) trust ☐ Other trust		
H Enter the number of the organization's unrelated trades or businesses. ▶ <u>2</u> Describe the only (or first) unrelated trade or business here ▶ <u>Eloy Chamber Bus. of Dir.</u> If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III–V.			
I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ... ☐ Yes ☒ No If 'Yes,' enter the name and identifying number of the parent corporation ... ▶			
J The books are in care of ▶ <u>Mark Benner</u> Telephone number ▶ <u>520 466-3411</u>			

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1 a Gross receipts or sales... <u>474.</u>				
b Less returns and allowances ...	c Balance ▶	1c	474.	
2 Cost of goods sold (Schedule A, line 7) ...		2		
3 Gross profit. Subtract line 2 from line 1c ...		3	474.	474.
4 a Capital gain net income (attach Schedule D) ...		4a		
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) ...		4b		
c Capital loss deduction for trusts ...		4c		
5 Income (loss) from a partnership or an S corporation (attach statement) ...		5		
6 Rent income (Schedule C) ...		6		
7 Unrelated debt-financed income (Schedule E) ...		7		
8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F) ...		8		
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) ...		9		
10 Exploited exempt activity income (Schedule I) ...		10		
11 Advertising income (Schedule J) ...		11		
12 Other income (See instructions; attach schedule) ...		12		
13 Total. Combine lines 3 through 12 ...		13	474.	0.
				474.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Deductions must be directly connected with the unrelated business income.)			
14 Compensation of officers, directors, and trustees (Schedule K) ...			36.
15 Salaries and wages ...		15	
16 Repairs and maintenance ...		16	
17 Bad debts ...		17	
18 Interest (attach schedule) (see instructions) ...		18	
19 Taxes and licenses ...		19	
20 Depreciation (attach Form 4562) ...	20		
21 Less depreciation claimed on Schedule A and elsewhere on return ...	21a	21b	
22 Depletion ...		22	
23 Contributions to deferred compensation plans ...		23	
24 Employee benefit programs ...		24	
25 Excess exempt expenses (Schedule I) ...		25	
26 Excess readership costs (Schedule J) ...		26	
27 Other deductions (attach schedule) ... <u>See Statement 1</u>		27	237.
28 Total deductions. Add lines 14 through 27 ...		28	273.
29 Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13 ...		29	201.
30 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) ...		30	
31 Unrelated business taxable income. Subtract line 30 from line 29 ...		31	201.

BAA For Paperwork Reduction Act Notice, see instructions.

TEEA0201L 9/19/19

Form 990-T (2019)

Part III Total Unrelated Business Taxable Income

32	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions).	32	1,348.
33	Amounts paid for disallowed fringes.	33	
34	Charitable contributions (see instructions for limitation rules).	34	
35	Total unrelated business taxable income before pre-2018 NOLs and specific deduction. Subtract line 34 from the sum of lines 32 and 33.	35	1,348.
36	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instr.).	36	
37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35.	37	1,348.
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions).	38	1,000.
39	Unrelated business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37, enter the smaller of zero or line 37.	39	348.

Part IV Tax Computation

40	Organizations Taxable as Corporations. Multiply line 39 by 21% (0.21).	40	73.
41	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 39 from: ☐ Tax rate schedule or ☐ Schedule D (Form 1041).	41	
42	Proxy tax. See instructions.	42	
43	Alternative minimum tax (trusts only).	43	
44	Tax on Noncompliant Facility Income. See instructions.	44	
45	Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies.	45	73.

Part V Tax and Payments

46 a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116).	46 a	
b	Other credits (see instructions).	46 b	
c	General business credit. Attach Form 3800 (see instructions).	46 c	
d	Credit for prior year minimum tax (attach Form 8801 or 8827).	46 d	
e	Total credits. Add lines 46a through 46d.	46 e	0.
47	Subtract line 46e from line 45.	47	73.
48	Other taxes. Check if from: ☐ Form 4255 ☐ Form 8611 ☐ Form 8697 ☐ Form 8866 ☐ Other (attach schedule).	48	
49	Total tax. Add lines 47 and 48 (see instructions).	49	73.
50	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3.	50	
51 a	Payments: A 2018 overpayment credited to 2019.	51 a	
b	2019 estimated tax payments.	51 b	
c	Tax deposited with Form 8868.	51 c	
d	Foreign organizations: Tax paid or withheld at source (see instructions).	51 d	
e	Backup withholding (see instructions).	51 e	
f	Credit for small employer health insurance premiums (attach Form 8941).	51 f	
g	Other credits, adjustments, and payments: ☐ Form 2439 ☐ Form 4136 ☐ Other Total ...	51 g	
52	Total payments. Add lines 51a through 51g.	52	0.
53	Estimated tax penalty (see instructions). Check if Form 2220 is attached. ☐	53	
54	Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed.	54	73.
55	Overpayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid.	55	
56	Enter the amount of line 55 you want: Credited to 2020 estimated tax ☐ Refunded ☐	56	

Part VI Statements Regarding Certain Activities and Other Information (see instructions)

57	At any time during the 2019 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If 'Yes,' the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If 'Yes,' enter the name of the foreign country here.	Yes	No
			X
58	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If 'Yes,' see instructions for other forms the organization may have to file.		X
59	Enter the amount of tax-exempt interest received or accrued during the tax year \$ 0.		

Sign Here	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) is based on all information of which preparer has any knowledge.			
	Signature of officer	Date	CEO	May the IRS discuss this return with the preparer shown below (see instructions)? ☒ Yes ☐ No
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check ☒ If self-employed PTIN
	Leon Potter	Leon Potter		P00639404
	Firm's name	Firm's EIN		
	Firm's address	Phone no.		
	Master Tax Advisors	33-0948782		
	43539 W Roth Rd			
	Maricopa, AZ 85138			

Schedule A – Cost of Goods Sold. Enter method of inventory valuation ▶

1 Inventory at beginning of year.....	1		6 Inventory at end of year.....	6	
2 Purchases.....	2		7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2.....	7	
3 Cost of labor.....	3				
4a Additional section 263A costs (attach schedule)	4a				
b Other costs (attach sch).....	4b		8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?.....	Yes	No
5 Total. Add lines 1 through 4b.....	5				X

Schedule C – Rent Income (From Real Property and Personal Property Leased With Real Property) (see instructions)

1 Description of property		
(1)		
(2)		
(3)		
(4)		
2 Rent received or accrued		
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total	Total	
(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A)..... ▶		(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)..... ▶

Schedule E – Unrelated Debt-Financed Income (see instructions)

1 Description of debt-financed property		2 Gross income from or allocable to debt-financed property	3 Deductions directly connected with or allocable to debt-financed property	
			(a) Straight line depreciation (attach sch)	(b) Other deductions (attach schedule)
(1)				
(2)				
(3)				
(4)				
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5 Average adjusted basis of or allocable to debt-financed property (attach schedule)	6 Column 4 divided by column 5	7 Gross income reportable (column 2 x column 6)	8 Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
Totals..... ▶			Enter here and on page 1, Part I, line 7, column (A).	Enter here and on page 1, Part I, line 7, column (B).
Total dividends-received deductions included in column 8..... ▶				

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Schedule F — Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1 Name of controlled organization	2 Employer identification number	Exempt Controlled Organizations			
		3 Net unrelated income (loss) (see instructions)	4 Total of specified payments made	5 Part of column 4 that is included in the controlling organization's gross income	6 Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7 Taxable income	8 Net unrelated income (loss) (see instructions)	9 Total of specified payments made	10 Part of column 9 that is included in the controlling organization's gross income	11 Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
			Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A).	Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).

Totals

Schedule G — Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1 Description of income	2 Amount of income	3 Deductions directly connected (attach schedule)	4 Set-asides (attach schedule)	5 Total deductions and set-asides (column 3 plus column 4)
(1)				
(2)				
(3)				
(4)				
		Enter here and on page 1, Part I, line 9, column (A).	Enter here and on page 1, Part I, line 9, column (B).	

Totals ▶

Schedule I — Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expenses directly connected with production of unrelated business income	4 Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute columns 5 through 7.	5 Gross income from activity that is not unrelated business income	6 Expenses attributable to column 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
		Enter here and on page 1, Part I, line 10, column (A).	Enter here and on page 1, Part I, line 10, column (B).			Enter here and on page 1, Part II, line 25.

Totals ▶

Schedule J — Advertising Income (see instructions)**Part I Income From Periodicals Reported on a Consolidated Basis**

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5 Circulation income	6 Readership costs	7 Excess readership costs (col. 6 minus col. 5, but not more than col. 4).
(1)						
(2)						
(3)						
(4)						

Totals (carry to Part II, line (5)) ▶

Part II **Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5 Circulation income	6 Readership costs	7 Excess readership costs (col. 6 minus col. 5, but not more than col. 4).
(1)						
(2)						
(3)						
(4)						
Totals from Part I						
Totals, Part II (lines 1– 5)	Enter here and on page 1, Part I, line 11, column (A)	Enter here and on page 1, Part I, line 11, column (B).				Enter here and on page 1, Part II, line 26.

Schedule K – Compensation of Officers, Directors, and Trustees (see instructions)

1 Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
Mark Benner	CEO	.001 %	36.
		%	
		%	
		%	
Total. Enter here and on page 1, Part II, line 14.			36.

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Form 990-T (2019)

Request for Taxpayer Identification Number and Certification

Give Form to the
requester. Do not
send to the IRS.

► Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type.
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

Eloy Chamber of Commerce

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only **one** of the following seven boxes.

☐ Individual/sole proprietor or single-member LLC ☒ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate

☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ►

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is **not** disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

☐ Other (see Instructions) ►

4 Exemptions (codes apply only to certain entities, not individuals; see Instructions on page 3):

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.

3725 N Camelot Street

6 City, state, and ZIP code

Eloy, Arizona 85131

7 List account number(s) here (optional)

Requester's name and address (optional)

City of Eloy

Harvey Krauss

Eloy, AZ 85131

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

____ - ____ - ____

or

Employer identification number

8 6 - 0 2 9 2 2 9 0

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign
Here

Signature of
U.S. person ►

Date ►

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (Interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding*, later.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting*, later, for further information.

Note: If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
- An estate (other than a foreign estate); or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

In the cases below, the following person must give Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States.

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity;
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust; and
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Pub. 515, *Withholding of Tax on Nonresident Aliens and Foreign Entities*).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items.

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

Backup Withholding

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 24% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the instructions for Part II for details),
3. The IRS tells the requester that you furnished an incorrect TIN,
4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See *Exempt payee code*, later, and the separate Instructions for the Requester of Form W-9 for more information.

Also see *Special rules for partnerships*, earlier.

What is FATCA Reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See *Exemption from FATCA reporting code*, later, and the Instructions for the Requester of Form W-9 for more information.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account; for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Line 1

You must enter one of the following on this line; **do not** leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account (other than an account maintained by a foreign financial institution (FFI)), list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9. If you are providing Form W-9 to an FFI to document a joint account, each holder of the account that is a U.S. person must provide a Form W-9.

a. **Individual.** Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

Note: ITIN applicant: Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040/1040A/1040EZ you filed with your application.

b. **Sole proprietor or single-member LLC.** Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or "doing business as" (DBA) name on line 2.

c. **Partnership, LLC that is not a single-member LLC, C corporation, or S corporation.** Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.

d. **Other entities.** Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on line 2.

e. **Disregarded entity.** For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a "disregarded entity." See Regulations section 301.7701-2(c)(2)(iii). Enter the owner's name on line 1. The name of the entity entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on line 2, "Business name/disregarded entity name." If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, you may enter it on line 2.

Line 3

Check the appropriate box on line 3 for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box on line 3.

IF the entity/person on line 1 is a(n) . . .	THEN check the box for . . .
• Corporation	Corporation
• Individual • Sole proprietorship, or • Single-member limited liability company (LLC) owned by an individual and disregarded for U.S. federal tax purposes.	Individual/sole proprietor or single-member LLC
• LLC treated as a partnership for U.S. federal tax purposes, • LLC that has filed Form 8832 or 2553 to be taxed as a corporation, or • LLC that is disregarded as an entity separate from its owner but the owner is another LLC that is not disregarded for U.S. federal tax purposes.	Limited liability company and enter the appropriate tax classification. (P= Partnership; C= C corporation; or S= S corporation)
• Partnership	Partnership
• Trust/estate	Trust/estate

Line 4, Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space on line 4 any code(s) that may apply to you.

Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space in line 4.

1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) If the account satisfies the requirements of section 401(f)(2)

2—The United States or any of its agencies or instrumentalities

3—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities

4—A foreign government or any of its political subdivisions, agencies, or instrumentalities

5—A corporation

6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession

7—A futures commission merchant registered with the Commodity Futures Trading Commission

8—A real estate investment trust

9—An entity registered at all times during the tax year under the Investment Company Act of 1940

10—A common trust fund operated by a bank under section 584(a)

11—A financial institution

12—A middleman known in the investment community as a nominee or custodian

13—A trust exempt from tax under section 664 or described in section 4947

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 7
Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 4
Payments over \$600 required to be reported and direct sales over \$5,000 ¹	Generally, exempt payees 1 through 5 ²
Payments made in settlement of payment card or third party network transactions	Exempt payees 1 through 4

¹ See Form 1099-MISC, Miscellaneous Income, and Its Instructions.

² However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

Exemption from FATCA reporting code. The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) written or printed on the line for a FATCA exemption code.

A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)

B—The United States or any of its agencies or instrumentalities

C—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities

D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i)

E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i)

F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state

G—A real estate investment trust

H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940

I—A common trust fund as defined in section 584(a)

J—A bank as defined in section 581

K—A broker

L—A trust exempt from tax under section 664 or described in section 4947(a)(1)

M—A tax exempt trust under a section 403(b) plan or section 457(g) plan

Note: You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns. If this address differs from the one the requester already has on file, write NEW at the top. If a new address is provided, there is still a chance the old address will be used until the payor changes your address in their records.

Line 6

Enter your city, state, and ZIP code.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS Individual Taxpayer Identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN.

If you are a single-member LLC that is disregarded as an entity separate from its owner, enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note: See *What Name and Number To Give the Requester*, later, for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at www.SSA.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/Businesses and clicking on Employer Identification Number (EIN) under Starting a Business. Go to www.irs.gov/Forms to view, download, or print Form W-7 and/or Form SS-4. Or, you can go to www.irs.gov/OrderForms to place an order and have Form W-7 and/or SS-4 mailed to you within 10 business days.

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note: Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if item 1, 4, or 5 below indicates otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see *Exempt payee code*, earlier.

Signature requirements. Complete the certification as indicated in items 1 through 5 below.

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), ABLE accounts (under section 529A), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account) other than an account maintained by an FFI	The actual owner of the account or, if combined funds, the first individual on the account ¹
3. Two or more U.S. persons (joint account maintained by an FFI)	Each holder of the account
4. Custodial account of a minor (Uniform Gift to Minors Act)	The minor ²
5. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee ¹
b. So-called trust account that is not a legal or valid trust under state law	The actual owner ¹
6. Sole proprietorship or disregarded entity owned by an individual	The owner ³
7. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(i)(A))	The grantor ⁴
For this type of account:	Give name and EIN of:
8. Disregarded entity not owned by an individual	The owner
9. A valid trust, estate, or pension trust	Legal entity ⁴
10. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
11. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
12. Partnership or multi-member LLC	The partnership
13. A broker or registered nominee	The broker or nominee

For this type of account:	Give name and EIN of:
14. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
15. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulations section 1.671-4(b)(2)(i)(B))	The trust

¹ List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

² Circle the minor's name and furnish the minor's SSN.

³ You must show your individual name and you may also enter your business or DBA name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

⁴ List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships*, earlier.

***Note:** The grantor also must provide a Form W-9 to trustee of trust.

Note: If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records From Identity Theft

Identity theft occurs when someone uses your personal information such as your name, SSN, or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Pub. 5027, Identity Theft Information for Taxpayers.

Victims of identity theft who are experiencing economic harm or a systemic problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes. Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs.gov. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at spam@uce.gov or report them at www.ftc.gov/complaint. You can contact the FTC at www.ftc.gov/idtheft or 877-IDTHEFT (877-438-4338). If you have been the victim of identity theft, see www.IdentityTheft.gov and Pub. 5027.

Visit www.irs.gov/identitytheft to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.

Short Form
Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2019Department of the Treasury
Internal Revenue ServiceUnder 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.

▶ Go to www.irs.gov/Form990EZ for instructions and the latest information.**Open to Public Inspection****A** For the **2019** calendar year, or tax year beginning **7/01**, **2019**, and ending **6/30**, **2020****B** Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C

Eloy Chamber of Commerce
 3725 N Camelot St
 Eloy, AZ 85131

D Employer identification number

86-0292290

E Telephone number

(520) 466-3411

F Group Exemption Number ▶**G** Accounting Method: ☒ Cash ☐ Accrual Other (specify) ▶**I** Website: ▶ N/A**H** Check ☒ if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF).**J** Tax-exempt status (check only one) — ☐ 501(c)(3) ☒ 501(c)(6) (insert no.) ☐ 4947(a)(1) or ☐ 527**K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other**L** Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B)) are \$500,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$ **58,973.****Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (see the instructions for Part I)Check if the organization used Schedule O to respond to any question in this Part I. ☒

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	40,419.
	2	Program service revenue including government fees and contracts	2	288.
	3	Membership dues and assessments	3	16,465.
	4	Investment income	4	
	5a	Gross amount from sale of assets other than inventory	a	
	5b	Less: cost or other basis and sales expenses	5b	
	5c	Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a)	5c	
	6	Gaming and fundraising events:		
	6a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	474.
	6b	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	
6c	Less: direct expenses from gaming and fundraising events	6c	237.	
6d	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		
7b	Less: cost of goods sold	7b		
7c	Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a)	7c		
8	Other revenue (describe in Schedule O) See Schedule O	8	1,564.	
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	58,736.	
Expenses	10	Grants and similar amounts paid (list in Schedule O)	10	235.
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	41,874.
	13	Professional fees and other payments to independent contractors	13	2,295.
	14	Occupancy, rent, utilities, and maintenance	14	1,069.
	15	Printing, publications, postage, and shipping	15	44.
	16	Other expenses (describe in Schedule O) See Schedule O	16	21,593.
	17	Total expenses. Add lines 10 through 16	17	67,110.
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 9)	18	-8,374.
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	23,447.
	20	Other changes in net assets or fund balances (explain in Schedule O)	20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	15,073.

BAA For Paperwork Reduction Act Notice, see the separate instructions.Form **990-EZ** (2019)

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	22,932.	13,727.
23 Land and buildings		
24 Other assets (describe in Schedule O) See Schedule O	925.	925.
25 Total assets	23,857.	14,652.
26 Total liabilities (describe in Schedule O) See Schedule O	410.	-421.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	23,447.	15,073.

Part III Statement of Program Service Accomplishments (see the instructions for Part III)Check if the organization used Schedule O to respond to any question in this Part III. ☒

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

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

Expenses

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

28 See Schedule O		
(Grants \$) If this amount includes foreign grants, check here ☐	28 a	
29		
(Grants \$) If this amount includes foreign grants, check here ☐	29 a	
30		
(Grants \$) If this amount includes foreign grants, check here ☐	30 a	
31 Other program services (describe in Schedule O)		
(Grants \$) If this amount includes foreign grants, check here ☐	31 a	
32 Total program service expenses (add lines 28a through 31a)	32	

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated — see the instructions for Part IV)Check if the organization used Schedule O to respond to any question in this Part IV. ☐

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (If not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Mark Benner CEO	40	36,018.	0.	0.
Bill Pitman Chairman	4	0.	0.	0.
Todd Thomas Vice President	2	0.	0.	0.
Isabel Morales Treasurer	1.5	0.	0.	0.
Terri Ackland Director	1	0.	0.	0.
Nat Smith Director	1	0.	0.	0.
Dan Snyder Director	1	0.	0.	0.
Richard Rosales Director	1	0.	0.	0.
Lori Davis-Smith Director	1	0.	0.	0.
Kevin Petersen Director	1	0.	0.	0.

Mark R. Bens CEO - 3/23/2021