



Due: March 6, 2017

Include all financial activity from January 1, 2016 through and including December 31, 2016. Please send the completed report to: **The DeMolay Office**, **186 Tremont Street**, **Boston**, **MA 02111**.

All DeMolay Chapters, Parents/Mothers' Clubs, Preceptories, Squire Manors and Courts must complete this report. The Rules and Regulations of DeMolay International require that DeMolay international collect this information in each Jurisdiction.

CHAPTER (Club, Court, etc.):					
LOCATION:					
TAX ID# (FID):					
CHAPTER ID #:					
NAME AND ADDRESS OF PERSON COMPLETING THIS REPOR	Г:				
Name:					
Address:					
City: State:					
Home Phone:					
Cell Phone:					
Email:					
NAME OF INDIVIDUALS LISTED AS SIGNATORIES ON ACCOUNTS: (List all)					
ALL CHECKS MUST HAVE (CHECK ONE):					
One Signature					
Two Signatures					





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CASH IN THE BANK – January 1, 2016	
Income: Per Capita Dues Contributions: (list those over \$250 individually)	
Investments (Interest and Dividends) Fund Raising Projects: (list those over \$250 individually)	
Other TOTAL INCOME:	
Disbursements: Salary Travel Expense Publications Telephone Utilities Insurance Depreciation Printing and Stationery Office Supplies Postage Taxes Rent Entertainment Fund Raising Miscellaneous: Other: (please specify)	
TOTAL DISBURSEMENTS:	
Total Cash in Bank, December 31, 2016	





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NAME OF BANKS AND THE ACCOUNT NUMBERS WHERE THE ORGANIZATION'S ACCOUNTS RESIDE:

1.	Name of Financial Institution: _	
	Address:	
	City/State/Zip:	
	Account(s) #:	
2.	Name of Financial Institution:	
	Address:	
	City/State/Zip:	
	Account(s) #:	
3.	Name of Financial Institution: _	
	Address:	
	City/State/Zip:	
	Account(s) #:	

FORM 990

The IRS has revised the rules concerning non-profit organizations filing Form 990-N for the tax year 2016. Any organization with receipts *less* than \$25,000 <u>MUST</u> file a Form 990-N by May 15, 2017. This task may be accomplished at: <u>http://www.irs.gov/app/ePostcard</u>.

The Form 990-N requests the Chapter's EIN number, the tax year (2016) that we are filing form, the legal name (DeMolay International) and your Chapter's mailing address (usually the Masonic Hall you meet in). It requests other names (ie Frank S. Land Chapter) and the name and address of the "principal" officer. (The name and address of the advisor filing the form.)

If you have any questions or need assistance performing this task for your Chapter please call the DeMolay Office at 617-426-6040 x 4231.

Upon completion of the on-line filing, please print and attach a copy of the IRS or ePostcard acknowledgement.





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OPTION:			
If you want the DeMolay Office to perform this task for you, please provide the following information:			
Did the Chapter properly file last year? Yes No			
Name of Responsible Officer used last year:			
Log-on Password:			

I have been informed of this requirement:

_____ Your Initials here.

<u>Changes to the Rules and Regulations of DeMolay International as of June 2010</u>: The position of Chapter Treasurer will no longer be elected by the members. It is now a position like that of the Scribe—appointed by the Advisory Council to serve at their pleasure. The position may be held by an Active DeMolay who is at least 18 years old, or an Advisor, but, it should be someone who lends stability to the position. The change was adopted to conform to modern banking laws. The Treasurer and the Scribe positions may be held by the same Advisor.

I attest to the accuracy of this report.

Signed: ______ Print Name: ______