Form **990**

Department of the Treasur Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

2009
Open to Public Inspection

and ending JUN 30, 2010 JUL 1, 2009 A For the 2009 calendar year, or tax year beginning D Employer identification number C Name of organization Check if CHAMBER OF COMMERCE OF SAN LUIS OBISPO, use IRS Address change label or INC. print or Name change type. 95-1505534 Doing Business As Initial Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Specific 039 CHORRO STREET Termin-(805)781-2777 Instruc-Amended return 1,095,481. City or town, state or country, and ZIP + 4 G Gross receipts \$ Applica-tion pending SAN LUIS OBISPO, CA 93401 H(a) Is this a group return F Name and address of principal officer:DAVID GARTH Yes X No for affiliates? 1039 CHORRO STREET, SAN LUIS OBISPO, CA 934 H(b) Are all affiliates included? Yes Tax-exempt status: X 501(c) (6 If "No," attach a list. (see instructions) J Website: ▶ N/A H(c) Group exemption number ▶ K Form of organization: X Corporation Trust Association Other > L Year of formation: 1905 M State of legal domicile; CA | Part I | Summary Briefly describe the organization's mission or most significant activities: THE ORGANIZATION IS ORGANIZED TO Activities & Governance PROMOTE THE ECONOMIC, SOCIAL, CIVIC, AND CULTURAL WELFARE OF THE SAN Check this box Implication discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 21 21 Number of independent voting members of the governing body (Part VI, line 1b) 4 22 Total number of employees (Part V, line 2a) 5 150 6 Total number of volunteers (estimate if necessary) 6 7a Total gross unrelated business revenue from Part VIII, column (C), line 12 0. 7a 0. b Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 609,449 622,578. 8 Contributions and grants (Part VIII, line 1h) Revenue 361,368 397,397. 9 Program service revenue (Part VIII, line 2g) 11,151 8,071. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 67,435. 78,751. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,060,719. 1,095,481. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 742,226. 668,300. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 359,035. 388,739. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 1,057,039. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 1,101,261. -40,542.38,442. Revenue less expenses. Subtract line 18 from line 12 og Ses **Beginning of Current Year** End of Year 453,135. 491,507. 20 Total assets (Part X, line 16) 270. 200. 21 Total liabilities (Part X, line 26) 452,865. 491,307. Net assets or fund balances. Subtract line 21 from line 20 Part II Signature Block . Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Signature of officer Date Here DAVID GARTH, OFFICER Type or print name and title Date Check if Preparer's identifying number (see instructions) Preparer's Paid selfsignature employed > Preparer's Firm's name (or GBP&B TAX AND BUSINESS SERVICES. EIN > Use Only yours if self-employed), 1150 PALM STREET SAN LUIS OBISPO, CA 93401 Phone no. ► 805-544-1441 X Yes No May the IRS discuss this return with the preparer shown above? (see instructions)

3

CHAMBER OF COMMERCE OF SAN LUIS OBISPO, 95-1505534 INC. Page 2 Part III Statement of Program Service Accomplishments Briefly describe the organization's mission: PROGRAMS AND PROJECTS TO EDUCATE AND COMMUNICATE TO THE PUBLIC REGARDING THE CITY OF SAN LUIS OBISPO. Did the organization undertake any significant program services during the year which were not listed on Yes X No the prior Form 990 or 990·EZ? If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No If "Yes," describe these changes on Schedule O. Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.) (Revenue \$) (Expenses \$ including grants of \$ 4a (Code: GOOD MORNING SLO-BUSINESS BREAKFAST PROGRAM THAT IS INFORMATIONAL AND 11 SESSIONS WITH 280-300 PEOPLE PER SESSION) (Revenue \$ including grants of \$ 4b (Code:) (Expenses \$ ANNUAL DINNER-ANNUAL INSTALLATION OF THE BOARD ABOUT 400 PEOPLE ATTEND 4c

	0.0000000000000000000000000000000000000	100	=		
(Code:) (Expenses \$	including grants	of \$) (Re	evenue \$)
STATE OF THE CITY-ECONOMIC	FORECAST WITH	LOCAL	REACTION	PANEL 1	SESSION
OF 220 PEOPLE	9-0-0000000				

				- Automotive Control	

					(46)
1900-00-00-00-00-00-00-00-00-00-00-00-00-			7/AV		
Other program services. (Describe in Schedule O.)			W 100511000H		
Other program convices (Becombe in Consecute City					

Total program service expenses ► \$

Form 990 (2009)

including grants of \$

) (Revenue \$

Part IV | Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A X Is the organization required to complete Schedule B, Schedule of Contributors? 2 X Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I X 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II ... 4 4 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III X 5 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D. Part I 6 X 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II X 7 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III X 8 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 9 X Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V X 10 Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X X as applicable _____ 11 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX. Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X. Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII. X 12 12A Was the organization included in consolidated, independent audited financial statements for the tax year? No Yes Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E X 13 14a Did the organization maintain an office, employees, or agents outside of the United States? X 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I X 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals 16 located outside the United States? If "Yes," complete Schedule F, Part III X 16 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX. column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I X 17 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II X 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III X 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule H Form 990 (2009)

Form 990 (2009) INC .

Part IV | Checklist of Required Schedules (continued)

Today Scann	and the second s			
01	Did the organization report more than \$5,000 of grants and other excitations to accompany to the contract of t		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,	21		
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
ь	disqualified person during the year? If "Yes," complete Schedule L, Part I Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	25a		
D	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	200		
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			
	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	<u> </u>	Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	-		х
31	contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations?	30	\vdash	- 1
٠.	If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	X	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
22	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	1		
00	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?		70"	
-	Note. All Form 990 filers are required to complete Schedule O.	38	X	

Par	t V Statements Regarding Other IRS Filings and Tax Compliance				
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of				
	U.S. Information Returns. Enter -0- if not applicable	1a	0		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eportable gaming			
	(gambling) winnings to prize winners?		1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	2a	22		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	rns?	2b	- CHARGE TO	Х
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see		100,000		
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered		3a		X
			Waste.	1000-1100	
	At any time during the calendar year, did the organization have an interest in, or a signature or other				
	financial account in a foreign country (such as a bank account, securities account, or other financial	8	4a		X
b	If "Yes," enter the name of the foreign country: ▶				
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign	Bank and	通道		
	Financial Accounts.				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans-				X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Reg.				
	Tax Shelter Transaction?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did t				
	any contributions that were not tax deductible?		ба		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribu		96 50		
	were not tax deductible?		6b	0	
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	goods and services			
	provided to the payor?				<u> </u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it v	vas required			
	to file Form 8282?		7c		
	If "Yes," indicate the number of Forms 8282 filed during the year				
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a	personal	2018		
	benefit contract?				<u> </u>
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit confidence of the organization of the organizat			₩	
9770	For all contributions of qualified intellectual property, did the organization file Form 8899 as required			-	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-	100000000000000000000000000000000000000	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting or	1974 Av. 1984 Av. 198	1135.0		
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have ex-	cess business holding	-1.000.00		
	at any time during the year?		8	2 130000	Action 6
9	Sponsoring organizations maintaining donor advised funds.		27,030		
а	Did the organization make any taxable distributions under section 4966?			-	
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b	-	
10	Section 501(c)(7) organizations. Enter:	I I	n est		
а	Initiation fees and capital contributions included on Part VIII, line 12	Village and the second	260		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:	1 1			
а	Gross income from members or shareholders	11a			100
b	Gross income from other sources (Do not net amounts due or paid to other sources against	é			
	amounts due or received from them.)	11b	228	E HEATER	
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1 1	12a	5 500,000	CONTRACTOR OF
<u>b</u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		000	(0000)
			Forr	n 990	(2009)

Page 6

INC.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sec	tion A. Governing Body and Management							
×		AK .	- 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10				Yes	No
1a	Enter the number of voting members of the governing body	1	а		21			
b	Enter the number of voting members that are independent	1	b		21			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	ip w	ith an	y other				
	officer, director, trustee, or key employee?				2	:		_X_
3	Did the organization delegate control over management duties customarily performed by or under the	he d	lirect s	upervision	2			
	of officers, directors or trustees, or key employees to a management company or other person? \dots					_		X
4	Did the organization make any significant changes to its organizational documents since the prior Fo				1000	-		X
5	Did the organization become aware during the year of a material diversion of the organization's asset	ets?			355	-		X
6	Does the organization have members or stockholders?				6	1		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more m				450			
	governing body?					_		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other pe				7	b	44 57 (0) 25	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken	n du	ring th	e year				
	by the following:				253		77	
а	The governing body?					-	X	
b	Each committee with authority to act on behalf of the governing body?				8	b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re-							77
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O				9	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal F	Reve	enue C	lode.)				202
22						_	Yes	No X
	Does the organization have local chapters, branches, or affiliates?				10)a		Λ
Ь	If "Yes," does the organization have written policies and procedures governing the activities of such				٠,			
						1 1	X	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before	miri	g ine i	Offit?			71 71207	
(Careerine)	Describe in Schedule O the process, if any, used by the organization to review this Form 990. Does the organization have a written conflict of interest policy? If "No," go to line 13				44	2a	X	
12a	Are officers, directors or trustees, and key employees required to disclose annually interests that co				··· ├ '	ea	<u></u>	
D	to conflicts?				12	2Ь	X	
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If							7.
	in Schedule O how this is done					2c	77	X
13	Does the organization have a written whistleblower policy?					3	X	77
14	Does the organization have a written document retention and destruction policy?				1	4	*36970389	X
15	Did the process for determining compensation of the following persons include a review and approve		y inde	ependent				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision				23			
а	The organization's CEO, Executive Director, or top management official					5a	X	
b	Other officers or key employees of the organization	•••••			1	5b	X	g, antolia
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)							
тба	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange				3.5	夏製	ESTE	х
442	taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to ev.					6a	TESTS FOR	
D	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization to ever in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization to ever in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization to ever in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization to ever in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization to ever in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization to ever in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization to ever in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization to ever in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization to ever in joint venture arrangements are also taken to be a safeguard to			100				
		100			4	6b		NO SE
Sec	exempt status with respect to such arrangements? tion C. Disclosure		*******		1	ן מפ		
17	List the states with which a copy of this Form 990 is required to be filed ►CA							
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (5	01/c\(3\s only\ avail:	able for	-		
.0	public inspection. Indicate how you make these available. Check all that apply.	. , ,	-51(0)(ojo ornyj avalle	.D.O 101			
	Some website Another's website Upon request							
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents,	COL	iflict o	interest polic	v. and	fina	ncial	
	statements available to the public.	JUIT			,, unu	10	, rojai	
20	State the name, physical address, and telephone number of the person who possesses the books	and	recor	ds of the orga	nizatio	n: 🕨	. 7	
	CYNDI SILVA @ CHAMBER OF COMMERCE - (805) 781-277		. 5501	5o orga			-	
	1039 CHORRO STREET, SAN LUIS OBISPO, CA 93401							
					C.	orm	000	ופחחפו

Page 7

INC.

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if the organization did not (A)	compensate an (B)	у сц	rren	t off	-	, dire	cto	r, or trustee. (D)	(E)	(F)
Name and Title	Average			Posi				Reportable	Reportable	Estimated
Name and This	hours	(ci				app	ly)	compensation	compensation	amount of
	per week	Individual trustee or director	ector		nsaled		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations	
JEANNE POTTER	1 00									•
DIRECTOR	1.00	X	_	<u> </u>	_	<u> </u>		0.	0.	0.
RUSS LEVANWAY	1 00							_	0.	
DIRECTOR	1.00	X	_			-	_	0.	0.	0.
MICHAEL GUNTHER VICE CHAIR, LEGISLATIVE AFFAIRS	5.00	x						0.	0.	0.
TOM LEBENS										
PAST CHAIR	2.00	X						0.	0.	0.
RON YUKELSON										
VICE CHAIR, ECONOMIC DEVEL	5.00	X						0.	0.	0.
JOHN EWAN									- AN	3500-1
CHAIR OF THE BOARD	5.00	X						0.	0.	0.
CHARLENE ROSALES									_	1
VICE CHAIR MEMBERSHIP/OPER	5.00	X				_	_	0.	0.	0.
ALI SEMON VICE CHAIR COMMUNITY AFFAIRS	5.00	x						0.	0.	0.
KATHI MAIN	3.00	11	-			┿	-	··	0.	
DIRECTOR	1.00	x						0.	0.	0.
ANITA ROBINSON	 		-	-	1-					
DIRECTOR	1.00	x						0.	0.	0.
BRUCE RAY							Т			
DIRECTOR	1.00	X						0.	0.	0.
MISSY REITNER-CAMERON			T							
DIRECTOR	1.00	X						0.	0.	0.
CLINT PEARCE										
TREASURER	2.00	X						0.	0.	0.
BOB STETS									_	_
BOARD COUNSEL	2.00	X	_	_			_	0.	0.	0.
RICK STOLLMEYER	1 00							_	_	_
DIRECTOR	1.00	X	-	_	_	_	<u> </u>	0.	0.	0.
KRISTEN YETTER	1 00									
DIRECTOR	1.00	X	-	-	1	-	1	0.	0.	0.
BRIAN TALLEY	1 1 00	\								
DIRECTOR 932007 02-04-10	1.00	X			_	1_	_	0.	0.	Form 990 (2009)

932007 02-04-10

-	TAT	-	•	

	990 (2009) INC •			_				_		32-130	2004	± Pa	age 8
Par	t VII Section A. Officers, Directors, Tru		nplo	oyee	s, a	nd F	ligh	est	Compensated Employ	ees (continued)			
	(A) Name and title	(B) Average hours	(cl	heck	Posi all t	ition		ly)	(D) Reportable compensation	(E) Reportable compensation		(F) Estimate Imount	
		per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	or a	other mpensa from the ganizati nd relati ganizatie	e ion ed
BILL	тнома												
DIRE	CTOR	1.00	X						0.	0	•		0.
	ICIA WILMORE									_		088	-
DIRE		1.00	X				L		0.	0	•		0.
	BILLING	1 00	x							,			^
CHID	VISCI	1.00	Δ	-	_		-	-	0.	0	•		0.
DIRE		1.00	x						0.	0			0.
	GARTH	2,00	-	\vdash	\vdash				ļ .	·	•		<u> </u>
SECR	ETARY	40.00			х	_	Х		₹ 133.39€.	0	-		0.
3 4 5	Total Total number of individuals (including but no compensation from the organization Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for some for any individual listed on line 1a, is the sound related organizations greater than \$150 Did any person listed on line 1a receive or a the organization? If "Yes," complete Schedulion B. Independent Contractors Complete this table for your five highest contractors	director or truuch individual um of reportab 0,000? If "Yes, accrue compe	istee	e liste	y en ensa ete s	nplo atior Sche	yee, n and edul	or l	highest compensated en her compensation from for such individual ted organization for sen	mployee on the organization vices rendered to	3 4 5		0. 1 No X
	the organization. NONE (A)		•					7	(B)			(C)	
-	Name and business	address		36				_	Description of s	services	Comp	pensatio	n
_													
2	Total number of independent contractors (i \$100,000 in compensation from the organi	150	not li	imite	d to	tho	se li O	sted	d above) who received r	nore than			

CHAMBER OF COMMERCE OF SAN LUIS OBISPO, Form 990 (2009) INC. 95-1505534 Page 9 Part VIII Statement of Revenue (D) Revenue excluded from (A) (B) (C) Total revenue Related or Unrelated exempt function business tax under sections 512, 513, or 514 revenue revenue Contributions, gifts, grants and other similar amounts 1 a Federated campaigns 443,214. b Membership dues c Fundraising events 10 d Related organizations 173,425 e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 5,939 g Noncash contributions included in lines 1a-1f: \$ h Total. Add lines 1a-1f 622,578 **Business Code** 561499 2 a PROGRAMS/SPEC PROJECTS 205,397 205,397. Program Service Revenue **MANAGEMENT CONTRACTS** 541610 192,000. 192,000. f All other program service revenue 397,397. g Total. Add lines 2a-2f Investment income (including dividends, interest, and 8,071 8,071. other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6 a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) . 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 a b Less: direct expenses _____ b c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 a b Less: direct expenses _____ b c Net income or (loss) from gaming activities . 10 a Gross sales of inventory, less returns and allowances _____a b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 40,548. 11 a MEETING INCOME 900099 40,548. b REIMBURSEMENTS 26,717. 900099 26,717. c MISCELLANEOUS 900099 170. 170.

9

67,435

1,095,481.

d All other revenue

Total revenue. See instructions.

e Total. Add lines 11a-11d

464,832.

8,071.

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	ot include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members	0117-001-151858-14			
5	Compensation of current officers, directors,			1	
	trustees, and key employees				
3	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	578,077.			
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	39,271.			
9	Other employee benefits				
0	Payroll taxes	50,952.			
1	Fees for services (non-employees):				
а	Management		•		
b	Legal				
C	Accounting	2,840.			
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
2	Advertising and promotion				
3	Office expenses				
4	Information technology				
5	Royalties				
6	Occupancy	60,079.			
7	Travel				
В	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	12,092.			
0	Interest				· P
1	Payments to affiliates				
2	Depreciation, depletion, and amortization	7,467.	en e		
3	Insurance				2000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 -
4	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	PROGRAMS/SPECIAL PROJEC	94,148.		Control of the Contro	manage to the second of the post of the second of the
b	INSURANCE	49,681.			
C	FUNCTIONAL EXPENSES	41,170.	200 A 8 0000 TO		
d	CONTRACT LABOR	18,189.			
a e	STAFF EXPENSE	15,685.			
0025		87,388.			
f	All other expenses Total functional expenses. Add lines 1 through 24f	1,057,039.			MANUAL SECTION
5	Joint costs. Check here Jif following	±,001,000.			
6	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
	concanonal campaign and iditoralsing solicitation		L		Form 990

INC.

		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	215.	1	200.
2		399,720.	2	445,574.
3			3	
4	The state of the s		4	
5				
1	employees, and highest compensated employees. Complete Part II			
- 1	of Schedule L	Trace And trace and office and an artistic feet.	5	
6				
	4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete			
	Part II of Schedule L	1200 E 110 270 30 E 17 F 200 10 E 10 E 10 E 10 E	6	
7 ي			7	1000
8 8			8	
£ 9			9	
- 8	a Land, buildings, and equipment: cost or other			
.0	basis. Complete Part VI of Schedule D 10a 164,751.			
	b Less: accumulated depreciation 10b 122,748.	49,470.	10c	42,003
11		20/2100	11	11,000
12		3,730.	12	3,730
13	s or less to the second of the	37730.	13	3,130
14			14	
15			15	
16		453,135.	16	491,507
17		133,133.	17	451,507
18			18	
19			19	
5353				
20			20	
21			21	
22	X BE A 15 TO THE RESEARCH AND THE CONTROL OF THE CO			
21 22	highest compensated employees, and disqualified persons. Complete Part II			
00	of Schedule L		22	
23			23	
24		270.	24	200
25		270.	25	200
26		4/0.	26	200
	Organizations that follow SFAS 117, check here			
27 28 29 30 31 32 32 32 32 32 32 32 32 32 32 32 32 32	lines 27 through 29, and lines 33 and 34.	450 OCE		401 207
27	\$23 Upon 1 100 100 00 20 2 1 100 20 00 10 10 10 10 10 10 10 10 10 10 10 10	452,865.	27	491,307
28	CONTROL OF THE CONTRO		28	
29	***************************************		29	
2	Organizations that do not follow SFAS 117, check here and			
5	complete lines 30 through 34.			
30			30	
į́ 31			31	20
32		450 005	32	404 00=
² 33		452,865.	33	491,307
34	Total liabilities and net assets/fund balances	453,135.	34	491,507

or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Form 990 (2009)

3b