Department of the Treasury

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.

OMB No. 1545-0047 Open to Public Inspection

JUL 1, 2010 and ending JUN 30, A For the 2010 calendar year, or tax year beginning Check if applicable: C Name of organization D Employer identification number CHAMBER OF COMMERCE OF SAN LUIS OBISPO, Address change INC. Name change Doing Business As 95-1505534 Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Termin-ated 1039 CHORRO STREET (805)781-2777 Amended 1,052,763. City or town, state or country, and ZIP + 4 G Gross receipts \$ Applica-tion pending 93401 SAN LUIS OBISPO, CA H(a) Is this a group return F Name and address of principal officer: ERMINA KARIM Yes X No for affiliates? 1039 CHORRO STREET, SAN LUIS OBISPO, CA 934 H(b) Are all affiliates included? __Yes ___No 6) ◀ (insert no.) 4947(a)(1) or 527 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: TO PROMOTE THE ECONOMIC AND Governance COMMUNITY WELL-BEING OF SAN LUIS OBISPO VIA PROGRAMS AND PROJECTS TO 2 Check this box > if the organization 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 Number of independent voting members of the governing body (Part VI, line 1b) 21 Activities & Total number of individuals employed in calendar year 2010 (Part V, line 2a) 21 5 6 Total number of volunteers (estimate if necessary) 1506 7 a Total unrelated business revenue from Part VIII, column (C), line 12 0. 7a b Net unrelated business taxable income from Form 990-T, line 34 0. **Current Year** 8 Contributions and grants (Part VIII, line 1h) 622,578. 458,193. Revenue 397,397. 533,854. 9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 8,071. 13,873. 67,435. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 37,988. 1,095,481. 1,043,908. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 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) 0. 0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 668,300. 715,983. 0. 0. b Total fundraising expenses (Part IX, column (D), line 25) 388,739. 347,385. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 1,057,039. 1,063,368. 38,442. -19,460. 19 Revenue less expenses. Subtract line 18 from line 12 Pag **Beginning of Current Year** End of Year 20 Total assets (Part X, line 16) 491,507. 476,291. 4,444. 21 Total liabilities (Part X, line 26) 200. 491,307. 22 Net assets or fund balances. Subtract line 21 from line 20 471,847. 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. Signature of officer Sign ERMINA KARIM, PRESIDENT/CEO Here Type or print name and title Check Print/Type preparer's name Preparer's signature Paid FRED W. BOGART, CPA self-employed Firm's name GLENN BURDETTE Preparer Firm's EIN Firm's address 1150 PALM STREET Use Only SAN LUIS OBISPO, CA 93401 Phone no. 805-544-1441

May the IRS discuss this return with the preparer shown above? (see instructions)

4e Total program service expenses

032002
12-21-10

Form 990 (2010)

(Expenses \$

Other program services. (Describe in Schedule O.)

including grants of \$

65,138.

) (Revenue \$

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes " complete Schedule A			х
2	If "Yes," complete Schedule A	1 2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			Λ
	public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	X	
6	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,			77
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	7	_	X
0	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			1000000
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	10.00		BIRTH
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
Ь	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			77
_	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	11b		_X_
ŭ	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	44-		х
d	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	11c		Δ
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
40	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	40		v
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16		_X_
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	47		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII. lines	17		
	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that		11000000	
	operate one or more hospitals must attach audited financial statements (see instructions)	20b		
			000	

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Part IV Checklist of Required Schedules (continued)

			Yes	No
	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		X
	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		х
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		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
1	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
	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
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		х
	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
	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		X
	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	77
	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	-	X
	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Yes X No			
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			1
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	(0040)

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Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable) Albert		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
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 21			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	a del		
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	real entires	X
b	If "Yes," enter the name of the foreign country: ►			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			v
	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 transaction?	5b	-	Δ_
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	6-		х
1	any contributions that were not tax deductible? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6a		22
D		6b		
7	were not tax deductible? Organizations that may receive deductible contributions under section 170(c).	USD COLUMN	HUNGE	SAME TO
7 a	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?	7a	2747/03/3	E-VIORDED
b		7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	<u> </u>		
-	to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	150		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	1200	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a	-	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	la de la constanta	1000000
10	Section 501(c)(7) organizations. Enter:			
a	The state of the s			
b				
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against			
D				
40-	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	100000	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a	Andrew Section	A Section Con-
u	Note. See the instructions for additional information the organization must report on Schedule O.	A TUE		
h	Enter the amount of reserves the organization is required to maintain by the states in which the			
J	organization is licensed to issue qualified health plans	1013		
С				
14a		14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
		Forn	990	(2010)

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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.

	Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	复数		
b	Enter the number of voting members included in line 1a, above, who are independent 1b 2:			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a		х
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following:			
а	The governing body?	8a	X	SERVICE
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	0.0		
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		_	
	· · · · · · · · · · · · · · · · · · ·		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	103	X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,	100		
_	and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	65976	MARKE	
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	х	Datpi
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise	120		
-	to conflicts?	12b	х	1
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120		
7676	in Schedule O how this is done	12c		х
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent	0656	340000	analah
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	218885	X	enthe.
h	Other officers or key employees of the organization	15a	X	-
J	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)	15b	A	isiahka
165	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
0		222		x
Ь	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation	16a	2007/10/20/20	A
D	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
		120,521		
Sec	exempt status with respect to such arrangements? tion C. Disclosure	16b	1	<u> </u>
17	List the states with which a copy of this Form 990 is required to be filed ▶CA			
18	the state of the s	_ (-
10	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available public inspection. Indicate how you make these available. Check all that apply.	e tor		
10			2.0	
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy,	and fina	ancial	
20	statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiz CYNDI SILVA @ CHAMBER OF COMMERCE - (805) 781-2777	ation:		
	1039 CHORRO STREET, SAN LUIS OBISPO, CA 93401			

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

Check if Schedule O contains a response to any question in this Part VII

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

- 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.

(A)	(B)	(C)		(D)	(E)	(F)				
Name and Title	Average hours per	Position (check all that apply)		Reportable compensation	Reportable compensation	Estimated amount of				
	week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional frustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
MICHAEL GUNTHER										200
CHAIR OF THE BOARD	5.00	X						0.	0.	0.
KRISTEN YETTER								6		
TREASURER	5.00	X						0.	0.	0.
TIM WILLIAMS										
VICE CHAIR, LEGISLATIVE AF	5.00	X				<u>_</u>		0.	0.	0.
JOHN EWAN										April 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
PAST CHAIR	2.00	X				L		0.	0.	0.
BRUCE RAY									_	
VICE CHAIR, ECONOMIC DEVEL	5.00	X				_		0.	0.	0.
CLINT PEARCE	0.00									
BOARD COUNSEL	2.00	X		_	_	┡		0.	0.	0.
CHARLENE ROSALES	F 00	1,,								_
VICE CHAIR MEMBERSHIP/OPER	5.00	X		_	_	 	_	0.	0.	0.
RUSS LEVANWAY	5.00	x						0.	0.	_
VICE CHAIR COMMUNITY AFFAI	3.00	Δ	-	-	_	-	_	0.	0.	0.
ERIK JUSTESEN DIRECTOR	5.00	x						0.	0.	_
AMY KARDEL	3.00	Δ		-			_	U •	0.	0.
DIRECTOR	1.00	x						0.	0.	0.
SUSAN OPAVA	1.00		-	-	\vdash	_	- 187	0.	0.	0.
DIRECTOR	1.00	x						0.	0.	0.
MISSY REITNER-CAMERON	1.00	11	-	\vdash		-	-	0.	0.	0.
DIRECTOR	1.00	x						0.	0.	0.
ANITA ROBINSON			-	\vdash	\vdash	\vdash	_			
DIRECTOR	1.00	x						0.	0.	0.
PIERRE RADEMAKER		 		-		-	_			<u> </u>
DIRECTOR	1.00	x						0.	0.	0.
JOHN SPATAFORE										
DIRECTOR	1.00	X						0.	0.	0.
TICK STOLLMEYER		1	1			\vdash				
DIRECTOR	1.00	x						0.	0.	0.
BRIAN TALLEY						1				
DIRECTOR	1.00	x						0.	0.	0.
032007 12-21-10			-	-	-	•		* * * * * * * * * * * * * * * * * * *		Form 990 (2010)

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Part VII Section A. Officers, Directors, Tr	ustees Key F	mnl	OVO	20 2	had	High	noct	Componented Empley	(continued)	
(A)	(B)	T	Oye	:5, a	C)	nıyı	iest	(D)		(5)
Name and title	Average	(C) Position						Reportable	(E) Reportable	(F)
	hours per	(check all that apply)						compensation	compensation	Estimated amount of
	week	_		Т	<u> </u>	Т	Ė	from	from related	other
	(describe	trustee or director						the	organizations	compensation
	hours for	bord	981		l	sated		organization	(W-2/1099-MISC)	from the
	related organizations	nste	Itrus		92	npen		(W-2/1099-MISC)		organization
	in Schedule	1 13	tiona	L	nploy	stcor				and related
	0)	Individu	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
BILL THOMA		\vdash		H	F			TO CARLO SERVICE SERVI		
DIRECTOR	1.00	x						0.	0.	0.
HILLARY TROUT						1		The second secon		
DIRECTOR	1.00	X						0.	0.	0.
MATTHEW WOOD	1 00	1						100		
DIRECTOR	1.00	X				_		0.	0.	0.
RON YUKELSON DIRECTOR	1.00	x		l			ļ		0	
DAVE GARTH	1.00	^	-	\vdash	-	-	<u> </u>	0.	0.	0.
SECRETARY	40.00			x		x		£ 122 nns	0.	0.
		-	1	-	H	122		(<u></u>	0.
							Г			***************************************
				L						
								1000000		
	ļ	-	-	<u> </u>						
1b Sub-total	4	_			_			3 144,000.	0.	0.
c Total from continuation sheets to Part V	II. Section A			•••••		•		0.	0.	0.
d Total (add lines 1b and 1c)								14 TAA OOR	0.	0.
2 Total number of individuals (including but i	not limited to th	nose	liste	ed al	bove	e) wi	no re	eceived more than \$100		
compensation from the organization									todo in reportable	1
										Yes No
3 Did the organization list any former officer	, director or tru	stee	e, ke	y em	olqr	yee,	or h	nighest compensated en	ployee on	
line 1a? If "Yes," complete Schedule J for					,.					3 X
4 For any individual listed on line 1a, is the s	um of reportab	le co	omp	ensa	ation	and	d oth	her compensation from t	the organization	
and related organizations greater than \$15	0,000? If "Yes,	" co	mpl	ete S	Sche	edule	e J f	or such individual		4 X
5 Did any person listed on line 1a receive or	accrue compe	nsat	ion t	rom	any	unr/	elat	ed organization or indivi	dual for services	
rendered to the organization? If "Yes," con Section B. Independent Contractors	nplete Schedul	e J t	for s	uch	pers	son .	••••			5 X
	mpopostod in	-J								
 Complete this table for your five highest co the organization. NONE 	impensated in	aehe	Bride	ant C	OHL	acic	ors t	nat received more than	\$100,000 of compens	ation from
(A)							T	(B)		(C)
Name and business	address							Description of s	ervices C	ompensation
Marie Control of the										
							-			
		100		-			\dashv			
							1			
2 Total number of independent contractors (including but n	ot li	mite	d to			ted	above) who received m	ore than	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
\$100,000 in compensation from the organi	zation >		- 10)			450	
										Form 990 (2010)

		(2010) INC.			211 2 (1901) 2010 (1901) 2010 (1901) 2011 (1901) 2011	CHARLES SANDERS COMMITTEE	95-1505	534 Page 9
Pa	rt VII	II Statement of Reven	iue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts		Federated campaigns	100000	4E1 000				
E E		Membership dues		451,928.				
fts,		Fundraising events						
igi.		Related organizations						
Sie		Government grants (contributions) All other contributions, gifts, grant						
her	1	similar amounts not included abov		6,265.				
를		Noncash contributions included in lines		0,2001				
9 8		Total. Add lines 1a-1f			458,193.			
				Business Code				
g	2 a	MANAGEMENT CONT	RACTS	541610	387,400.	387,400.		E TOTAL TOTAL SEE SEEDS TO THE SEEDS
e Ķ	b	PROGRAMS/SPEC P	ROJECTS	561499	146,454.	146,454.		
Selle	c							
le la	d							
Program Service Revenue	е							
۱ ۳	f	EPART TO DETERMINE AND THE RESERVE OF THE RESERVE OF THE PART OF T		A CONTRACTOR OF THE PARTY OF TH	E22 0E4			
-		Total. Add lines 2a-2f			533,854.	Manager Clause to 3	The second of the second	
	3	Investment income (including			7,728.			7,728.
	4	other similar amounts)			7,720.			7,720.
1	5	Royalties						
1	5	noyalues	(i) Real	(ii) Personal				
	6.8	Gross Rents		(ii) i croonar		7 W 102		
		Less: rental expenses						
		: Rental income or (loss)						
		Net rental income or (loss)		>				
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory		15,000.				
	b	Less: cost or other basis		0 055				
		and sales expenses		8,855.				
		Gain or (loss)		6,145.	C 14E	C 14F		
		Net gain or (loss)		······ •	6,145.	6,145.		
E E	8 8	Gross income from fundraisin						
Ver		including \$ contributions reported on line						
Other Revenue		Part IV, line 18	41 - 600 PH 5000 - 100, THE STREET					
ther	F	Less: direct expenses		;				
Ó		Net income or (loss) from fund		>				n promovnostanikoviškai
		Gross income from gaming ac						
		Part IV, line 19		a				
	b	Less: direct expenses	t					
	c	Net income or (loss) from gan	ning activities .	. <u></u>				
	10 a	Gross sales of inventory, less						
		and allowances						
		Less: cost of goods sold						
		Net income or (loss) from sale						
	11 a	Miscellaneous Revenu REIMBURSEMENTS	ie.	Business Code 900099	31,002.	31,002.		of the street street.
	11 a	MERCHANIC THRONE		900099	6,985.			+
		MTCOUTT ANDOUG	1040 10 100 1	900099	1.	1.		
	-	All other revenue						
					37,988.			
	12	Total revenue. See instructions.			1,043,908.		0	7,728.
03200								Form 990 (2010)

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	not include amounts reported on lines 6b, 3b, 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		A 480 - 40 - 40 - 40 - 40 - 40 - 40 - 40		
	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				
3	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				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	604,304.			
8	Pension plan contributions (include section 401(k)				224
	and section 403(b) employer contributions)				<u> </u>
9	Other employee benefits	59,624.			
10	Payroll taxes	52,055.	0.0e-0.00 (57 0.0		
11	Fees for services (non-employees):				
а	Management				
	Legal	65.			
	Accounting	3,850.			
d	Lobbying			- Los II-E BILLYELS DIGWANNENNE A	CC 20000 11042011042011042011042
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology		31		
15	Royalties				
16	Occupancy	58,156.			
17	Travel				
18	Payments of travel or entertainment expenses		,		
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	6,425.			
20	Interest	112.			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	8,281.			7.5
23	Insurance				
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24f. If line				
	24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule 0.)				
а	PROGRAMS/SPECIAL PROJEC	80,950.			
b	INSURANCE	50,521.			
C	FUNCTIONAL EXPENSES	40,414.			
d	STAFF EXPENSE	17,958.			
e	COMPUTER SERVICE/SUPPOR	9,881.		 	
f	All other expenses	70,772.			
	Total functional expenses. Add lines 1 through 24f	1,063,368.			
25 26	Joint costs. Check here Jif following SOP	_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
20	98-2 (ASC 958-720). Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

032010 12-21-10

INC.

				(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing			200.	1	197.
2	Savings and temporary cash investments			445,574.	2	431,005.
3	Pledges and grants receivable, net				3	· · · · · · · · · · · · · · · · · · ·
4	Accounts receivable, net	_		4		
5	Receivables from current and former officers, di					
	employees, and highest compensated employee					
	of Schedule L	ñ		var svortet ette ette ette ette ette ette ette	5	
6	Receivables from other disqualified persons (as					
	4958(f)(1)), persons described in section 4958(c		1/2			
1	employers and sponsoring organizations of sec					
1	employees' beneficiary organizations (see instru	2.000	202 5		6	ADJUST TO SERVE IN THE
3 7	Notes and loans receivable, net				7	
7 8	Inventories for sale or use				8	
9	Prepaid expenses and deferred charges					
	Land, buildings, and equipment: cost or other	i i			9	
104		400	135 009			
	basis. Complete Part VI of Schedule D Less: accumulated depreciation	108	93 650	42,003.	45500	41 250
				42,003.	10c	41,359
11	Investments - publicly traded securities			3,730.	11	2 720
12	Investments - other securities. See Part IV, line			3,730.	12	3,730
13	Investments - program-related. See Part IV, line				13	
14	Intangible assets		·····	·	14	
15	Other assets. See Part IV, line 11			491,507.	15	176 201
16	Total assets. Add lines 1 through 15 (must equ			491,307.	16	476,291
17	Accounts payable and accrued expenses				17	
18	Grants payable				18	
19	Deferred revenue	••••••	·····		19	
20	Tax-exempt bond liabilities			1	20	
21 22	Escrow or custodial account liability. Complete				21	
22	Payables to current and former officers, director					
	highest compensated employees, and disqualif	ied person:	s. Complete Part II			
•	of Schedule L				22	
23	Secured mortgages and notes payable to unrela				23	
24	Unsecured notes and loans payable to unrelate			000	24	
25	Other liabilities. Complete Part X of Schedule D			200.	25	4,444
26	Total liabilities. Add lines 17 through 25			200.	26	4,444
- 1	Organizations that follow SFAS 117, check he	ere 🕨 L	X and complete			
3	lines 27 through 29, and lines 33 and 34.		2			
27	Unrestricted net assets			491,307.	27	471,847
28	Temporarily restricted net assets			28		
29	Permanently restricted net assets		29			
3	Organizations that do not follow SFAS 117, c	heck here	▶ ☐ and			
5	complete lines 30 through 34.					
27 28 29 30 31 32	Capital stock or trust principal, or current funds				30	
31	Paid-in or capital surplus, or land, building, or ed	quipment fu	und		31	
32	Retained earnings, endowment, accumulated in			1 1	32	
33	Total net assets or fund balances			491,307.	33	471,847
34	Total liabilities and net assets/fund balances			491,507.		476,291

Form 990 (2010)

Pai	t XI Reconciliation of Net Assets							
	Check if Schedule O contains a response to any question in this Part XI							
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,04					
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,063,368				
3	Revenue less expenses. Subtract line 2 from line 1	3			60.			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	49	91,3	07.			
5	Other changes in net assets or fund balances (explain in Schedule O)	5		DESIGN TABLE	0.			
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	4'	71,8	47.			
Pai	TXII Financial Statements and Reporting							
	Check if Schedule O contains a response to any question in this Part XII							
				Yes	No			
1	Accounting method used to prepare the Form 990: X Cash Accrual Other		100					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.	121					
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?							
b	Were the organization's financial statements audited by an independent accountant?			X				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the		Delegation and the contract of					
	review, or compilation of its financial statements and selection of an independent accountant?		20		X			
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch							
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a						
	separate basis, consolidated basis, or both:							
	Separate basis X Consolidated basis Both consolidated and separate basis							
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	dit					
	Act and OMB Circular A-133?	_	3a		X			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ		dit					
2 2 2 2	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.							
			For	n 990	(2010)			