EXTENDED TO 5/15/14

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)

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

OMB No. 1545-0047

A F	or the	2012 calendar year, or tax year beginning JUL I, ZULZ and	enaing U	UN 30, ZUI3					
	Check if applicable	CHAMBER OF COMMERCE OF BIEN HOLD OBIDIO	0,	D Employer identific	cation number				
X	Addres change								
	Name change			95-1505534					
	Initial return Termin- ated	Training and one of	Room/suite	E Telephone number (805	781-2777				
	Amend	City, town, or post office, state, and ZIP code		G Gross receipts \$	1,319,856.				
	Application	SAN LUIS OBISPO, CA 93401		H(a) Is this a group re					
	pendin	F Name and address of principal officer: ERMITINA KAKIM		for affiliates?	Yes X No				
		SAME AS C ABOVE		H(b) Are all affiliates inc	luded? Yes No				
		mpt status:	or 527	4 " ""	list. (see instructions)				
<u>J \</u>	Nebsite	e:▶N/A		H(c) Group exemptio					
		organization: X Corporation Trust Association Other	L Year	of formation: 1905 N	1 State of legal domicile; CA				
Pa	art I	Summary	DOMORE	TITE ECONOM	TO AND				
Activities & Governance	9	Briefly describe the organization's mission or most significant activities: TO P. COMMUNITY WELL-BEING OF SAN LUIS OBISPO	VIA PF	ROGRAMS AND	PROJECTS TO				
EL S		Check this box 🕨 📖 if the organization discontinued its operations or dispo	sed of more		ssets.				
iove				3	21				
<u>ಇ</u>	100	Number of independent voting members of the governing body (Part VI, line 1b)			21				
ies	26,4800	Total number of individuals employed in calendar year 2012 (Part V, line 2a)			19				
ivit		Total number of volunteers (estimate if necessary)			150				
Act		Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.				
10.000	bl	Net unrelated business taxable income from Form 990-T, line 34	7	7ь					
				Prior Year 477,884.	Current Year 711, 205.				
ne		Contributions and grants (Part VIII, line 1h)		543,107.	548,626.				
Revenue	9 1	Program service revenue (Part VIII, line 2g)		2,851.	-21,442.				
Re		Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	67-	64,373.	58,792.				
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,088,215.	1,297,181.				
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.				
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.				
w		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	F 16000 647 S S C F 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	680,066.	683,203.				
Expenses	16a I	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.				
ber	b.	Total fundraising expenses (Part IX, column (D), line 25)	0.						
Щ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		351,832.					
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,031,898.					
	19	Revenue less expenses. Subtract line 18 from line 12		56,317.	164,008.				
200			В	eginning of Current Year					
sets	20	Total assets (Part X, line 16)		639,989.	1,031,523.				
Net Assets o	21	Total liabilities (Part X, line 26)		106,730.	334,256.				
		Net assets or fund balances. Subtract line 21 from line 20		533,259.	697,267.				
	art II	Signature Block							
		Ities of perjury, I declare that I have examined this return, including accompanying schedule			y knowledge and belief, it is				
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of w	nich prepare	r nas any knowledge.					
		Signature of officer		I Date					
Sig		ERMINA KARIM, PRESIDENT/CEO							
Hei	re	Type or print name and title							
		Print/Type preparer's name Preparer's signature	Т	Date Check	PTIN				
Pai	н	MICAL W. BOVEE, CPA		if self-employ	m01022107				
	parer	Firm's name GLENN BURDET'TE		Firm's EIN	95-2772601				
	Only	Firm's address 1150 PALM STREET		1					
		SAN LUIS OBISPO, CA 93401		Phone no. 8	05-544-1441				
Ma	v the IF	RS discuss this return with the preparer shown above? (see instructions)		1,	X Yes No				
	001 12-1		ions.		Form 990 (2012)				

CHAMBER OF COMMERCE OF SAN LUIS OBISPO,

Form	990 (2012) INC. 95-1505534 Page 2
Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
	TO PROMOTE THE ECONOMIC AND COMMUNITY WELL-BEING OF SAN LUIS OBISPO
	VIA PROGRAMS AND PROJECTS TO EDUCATE THE PUBLIC, PROVIDE CREATIVE
	BUSINESS LEADERSHIP AND FACILIATE EFFECTIVE COORDINATION IN SOLVING
	COMMUNITY PROBLEMS AND INITIATING CONSTRUCTIVE ACTION.
2	Did the organization undertake any significant program services during the year which were not listed on
2	AND THE PARTY OF T
	the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.
3	
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	GOOD MORNING SLO-BUSINESS BREAKFAST PROGRAM THAT IS INFORMATIONAL AND
	PROMOTIONAL.
4b	(Code:) (Expenses \$ including grants of \$ (Revenue \$)
	ANNUAL DINNER-ANNUAL INSTALLATION OF THE BOARD ABOUT 400 PEOPLE ATTEND
4c	(Code:) (Expenses \$
	GREEN AWARDS LIUNCHEON
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ▶
	Form 990 (2012)
23200	

Form	990 (2012) INC. 95-1505	534	P	age 3
Par	t 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	1		х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			32 (25)
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 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 for which 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	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or 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 temporarily restricted endowments, permanent endowments, 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			
	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	
b	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 10? If "Yes," complete Schedule D, Part VII	11b		х
С	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	11c		x
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	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		Х
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 and XII	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization 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	16		X
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	17		х
40	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	-17		
18	1c and 8a? If "Yes," complete Schedule G, Part II	18		х
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	50,112	х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

3

Page 4

Part IV Checklist of Required Schedules (continued)

M.C. COLOR			100,000	F Samuel
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the		Yes	No
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			X
23	column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	22		_A
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			v
240	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23		X
270	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		
	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		
b	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, highest 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
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	1		
	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
С	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	00-		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c 29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29		Λ
-	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?	30		
(A)	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		X
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
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	x	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, 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	35b		=
36	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		
07	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
37	THE PERSON OF TH	37		X
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	31		
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	31		

95-1505534

	Check if Schedule O contains a response to any question in this Part V				Ш
250		1 1 2		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 9			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable				
С	Did the organization comply with backup withholding rules for reportable payments to vendors and i		lurere!	v	
0-	(gambling) winnings to prize winners? Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	I I	1c	X	rections
Za	filed for the calendar year ending with or within the year covered by this return	2a 19			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax retu		2b	х	
Б	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction		20	STEELER OF	
За	Division by the feature best of the control of the		За	2012/02	х
	Market and the second s		3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other		0.5		
	financial account in a foreign country (such as a bank account, securities account, or other financial		4a		Х
b	If "Yes," enter the name of the foreign country: ▶	***************************************	100 E		
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	action?	5b		Х
C	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 to	he organization solicit			
			6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	tions or gifts			
	were not tax deductible?	***************************************	6b		
7	Organizations that may receive deductible contributions under section 170(c).	1967 W 88 88 80 10			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was a second propert	as required			
	to file Form 8282?	Z. I	7c		No. of the last
	If "Yes," indicate the number of Forms 8282 filed during the year		数数		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contains the		7e 7f	_	
f	If the organization received a contribution of qualified intellectual property, did the organization file F				
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	1	7g 7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. D			He and	SELECT.
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at		8		Entroces.
9	Sponsoring organizations maintaining donor advised funds.		in the		#HEE
а	Did the organization make any taxable distributions under section 4966?		9a	paraticus.	Naday (12)
ь	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
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:	T 1			
а	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)	11b			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1	12a	Stanton acre	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		REHE		RESERVE OF
а	Is the organization licensed to issue qualified health plans in more than one state?		13a	Name of the last	1475 FE 21
r	Note. See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the	106			
_	organization is licensed to issue qualified health plans Enter the amount of reserves on hand	13b			
	Did the organization receive any payments for indoor tanning services during the tax year?	13c	14-	HESSES.	Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu.	le O	14a 14b	<u> </u>	
<u>.</u>				990	(2012)
					,

Form 990 (2012) 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. X Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 21 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision X of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? X Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X 7a more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a b Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c X Did the organization have a written whistleblower policy? 13 Х 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent 15 persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a b Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X 16a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Upon request X Own website X Another's website Other (explain in Schedule O) Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the organization: JAZMIN CORTEZ @ CHAMBER OF COMMERCE - (805) 781-2777 895 MONTEREY STREET, SAN LUIS OBISPO, CA

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)	T .	A, 112.		C)	npo	iiou	(D)	(E)	(F)
Name and Title	Average			Pos	ition	١		Reportable	Reportable	Estimated
	hours per	box	not c	ss pe	rson	is bol	th an	compensation	compensation	amount of
	week	offi	cer ar	ıd a d	irecto	or/trus	itee)	from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	ii ii	a 2			ated		organization	(W-2/1099-MISC)	from the
	related	ıstee	Inste		a	bens		(W-2/1099-MISC)		organization
	organizations below	nal fri	onal		ploye	com		1	,	and related
	line)	Individual trustee or director	institutional trustee	Officer	Key emplayee	Highest compensated employee	Former			organizations
(1) KRISTEN YETTER	5.00	트	드	6	32	宝品	윤			
CHAIR OF THE BOARD		X		x				0.	0.	0.
(2) CHRIS RICHARDSON	1.00							A A		
CHAIR APPOINTEE		Х	,	X				0,	0.	0.
(3) CHERYL CUMING	5,00			100	1				7	
VICE CHAIR COMMUNITY AFFAIRS		X		X	1	100		10.	0.	0.
(4) DONNA LEWIS	75.00			屬						
VICE CHAIR MEMBERSHIP/OPERATIONS		X		X				0.	0.	0.
(5) PIERRE RADEMAKER	5.00			200		25000				
VICE CHAIR, ECONOMIC DEVELOPMENT		X		X				0.	0.	0.
(6) TIM WILLIAMS	5.00									
VICE CHAIR, LEGISLATIVE AFFAIRS		X		X				0.	0.	0.
(7) HILLARY TROUT	5.00									
TREASURER		X		X				0.	0.	0.
(8) BRUCE RAY	2.00									
BOARD COUNSEL		X						0.	0.	0.
(9) RUSS LEVANWAY	2.00								1000	
PAST CHAIR		X						0.	0.	.0.
(10) AMY KARDEL	1.00		1.2.15.0							* ***
DIRECTOR		X						0.	0.	0.
(11) BARRY VANDERKELEN	1.00									
DIRECTOR		X	١.					0.	0.	0.
(12) BETSY KINSLEY	1.00									
DIRECTOR		X						0.	0.	0.
(13) BOB STETS	1.00									
DIRECTOR		X						0.	0.	0.
(14) CANDY MARKWITH	1.00								7	
DIRECTOR		X						0.	0.	0.
(15) DAVE JUNKE	1.00									
DIRECTOR		X						0.	0.	0.
(16) ERIK JUSTESEN	1.00				0-120					
DIRECTOR	11.2.2.2.3.1.2.2	X						0.	0.	0.
(17) KATHY EPPRIGHT	1.00									
DIRECTOR		X						0.	0.	0.
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Part VII Section A. Officers, Directors, Tru (A)	(B)			(C	;)		VIII. 1217	(D)	(E)	77	(F)
Name and title	Average hours per week	box	not ch , unles cer an	s per	more son i	than d	n an	Reportable compensation from	Reportable compensation from related		Estim amou oth	nt of
	(list any hours for related organizations	Individual trustee or director	Institutional trustee		oyee	Highest compensated employee		the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from organia	the zation lated
	below line)	Individua	Institutio	Officer	Key employee	Highest c employee	Former				organiz	ations
(18) KERRY MORRIS DIRECTOR	1.00	x						0.		0.		0.
(19) MARCO RIZZO DIRECTOR	1.00	x						0.	1	0.		0.
(20) MISSY REITNER-CAMERON	1.00											
DIRECTOR (21) RICK STOLLMEYER	1.00	X						0.		0.		0.
DIRECTOR	1.00	x						0.		0.		0.
(22) ERMINA KARIM	40.00											-:
PRESIDENT/CEO		_		X		_		•		0.		
										1		
	-	\vdash			_					+		
		1000	TOTAL D								,	
	1		7				PERTO		7			
1b Sub-total						D			and the second s	0.		
c Total from continuation sheets to Part	/II, Section A				ļ			U.		0.	_	0.
d Total (add lines 1b and 1c)	not limited to the	ากระ	uefe	of alt	2016	al wit	no re	eceived more than \$100.0		-	1	
compensation from the organization	not infinted to t	1000	HOLD	iu ui	JUV.		10 11	socived more trial of so,	оо оттеропале			1
										E	Ye	s No
3 Did the organization list any former office line 1a? If "Yes," complete Schedule J for										Ī	3	x
4 For any individual listed on line 1a, is the	sum of reportab	le c	ompe	ensa	ition	and	d oth	ner compensation from th	e organization			
and related organizations greater than \$1											4	X
5 Did any person listed on line 1a receive or rendered to the organization? If "Yes," co.											5	x
Section B. Independent Contractors												
1 Complete this table for your five highest of		0.3%								ensa	ation from	п
the organization. Report compensation for (A)	r the calendar y	/ear	endi	ng w	vith	or w	ithir	the organization's tax ye (B)	ear.		(C)	
Name and busines	s address	N	ONE	3				Description of se	rvices	Co	ompensa	ition
	<u> </u>						\neg					
	Windows						_		4			
							_					
0 T. I	(including but r	not li	mite	d to	tho	co lic	-ted	above) who received me	ro then	el bie	Self-she	
2 Total number of independent contractors \$100,000 of compensation from the organ		101 11	THIC	u to		0	31GU	above) who received mo	ne utan			

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Part VIII Statement of Revenue Check if Schedule O contains a response to any question in this Part VIII (D)
Revenue excluded from tax under sections 512, 513, or 514 (C) Unrelated Related or Total revenue exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a 711,205. 1b b Membership dues c Fundraising events 1c d Related organizations 1d e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1f: \$ 711,205 h Total. Add lines 1a-1f **Business Code** 2 a TOURISM/MANAGEMENT CON 541610 328,044. 311,609 16,435. Program Service Revenue PROGRAMS/SPEC PROJECTS 561499 220,582. 220,582. f All other program service revenue 548,626. g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) 1,233 1,233. Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) (i) Securities (II) Other 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis 22,675 and sales expenses 22,675. c Gain or (loss) -22,675. -22,675d 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 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** 11 a REIMBURSEMENTS 900099 35,299. 35,299 b MEETING INCOME 23,200. 900099 23,200. c MISCELLANEOUS 900099 293. 293. d All other revenue e Total. Add lines 11a-11d 58,792. 297,181. 568,308. Total revenue. See instructions. 0. 17,668. 232009 12-10-12 Form 990 (2012)

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Form 990 (2012) INC •
Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All oth	er organizations must co	omplete column (A).	
	Check if Schedule O contains a respon		is Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	122 710			
	trustees, and key employees	133,712.			
6	Compensation not included above, to disqualified			.10	
	persons (as defined under section 4958(f)(1)) and				
-	persons described in section 4958(c)(3)(B)	452,606.			
7	Other salaries and wages Pension plan accruals and contributions (include	432,000.			
8	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	44,112.			-
10	Payroll taxes	52,773.			
11	Fees for services (non-employees):	0277.701			
a	Management			0	
b	Legal				
C	Accounting	4,735.	I A		
d	Lobbying		V		
е	Professional fundraising services See Part IV, line 17	網			
f	Investment management fees			Y	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch (C.)	58,272.			
12	Advertising and promotion				
13	Office expenses	30,624.			
14	Information technology	48,462.			
15	Royalties	04 464			
16	Occupancy	94,464.			
17	Travel				
18	Payments of travel or entertainment expenses			II .	
	for any federal, state, or local public officials	7,662.			
19	Conferences, conventions, and meetings	3,283.			
20 21	Interest Payments to affiliates	3,203.			
22	Depreciation, depletion, and amortization	9,965.			
23	Insurance	40,994.		· · · · · · · · · · · · · · · · · · ·	
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule O.)				
а	PROGRAMS/SPECIAL PROJEC	87,764.			
b	STAFF EXPENSE	28,117.			
C	MANAGEMENT EXPENSES	17,750.			
d	COUNTY PROPERTY TAXES	683.	B 100 A 1 100 A		
е	All other expenses	17,195.			
25	Total functional expenses. Add lines 1 through 24e	1,133,173.			
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				- 10 TO 10 T

Form 990 (2012)
Part X Balance Sheet

	Check if Schedule O contains a response to any question in this Part X	(A)		(B)
		Beginning of year		End of year
1	Cash - non-interest-bearing	200.	1	200.
2	Savings and temporary cash investments	507,376.	2	456,832
3	Pledges and grants receivable, net	000189	3	
4	Accounts receivable, net	22,614.	4	82,135
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees. Complete			
	Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under			
	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary			
2 _	employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
7 8	Notes and loans receivable, net	50,153.	7	51,578
30	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges	14,407.	9	23,397
108	Land, buildings, and equipment: cost or other			
	basis. Complete Part VI of Schedule D 10a 458, 934.			
0.00	Less: accumulated depreciation 10b 45,283.	41,509.	10c	413,651.
11	Investments - publicly traded securities		11	
12	Investments - other securities. See Part IV, line 11	3,730.	12	3,730.
13	Investments - program-related. See Part IV, line 11		13	
14	Intangible assets		14	10.000
15	Other assets. See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	639,989.	16	1,031,523
17	Accounts payable and accrued expenses	71,495.	17	100,692.
18	Grants payable		18	
19	Deferred revenue	35,235.	19	34,557.
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
21 22	Loans and other payables to current and former officers, directors, trustees,			
	key employees, highest compensated employees, and disqualified persons.			
	Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	127,507.
24	Unsecured notes and loans payable to unrelated third parties		24	71,500.
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part X of			
	Schedule D	100 720	25	001 054
26	Total liabilities. Add lines 17 through 25	106,730.	26	334,256.
	Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
27 28 29 30 31 32	complete lines 27 through 29, and lines 33 and 34.	E22 0E0		
27	Unrestricted net assets	533,259.	27	643,667.
28	Temporarily restricted net assets		28	53,600.
29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here			
20	and complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds		30	
32	Paid-in or capital surplus, or land, building, or equipment fund		31	
33	Retained earnings, endowment, accumulated income, or other funds	532 250	32	כחם מכם
34	Total liabilities and net assets/fund balances	533,259.	33	697,267.
104	Total Industrios and not associativity Datatices	639,989.	34	1,031,523.