



See a Social Security Number? Say Something!  
Report Privacy Problems to <https://public.resource.org/privacy>  
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form 990

## Return of Organization Exempt From Income Tax

OMB No 1545-0047

2008

Open to Public  
InspectionDepartment of the Treasury  
Internal Revenue ServiceUnder 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

A For the 2008 calendar year, or tax year beginning

07/01, 2008, and ending

06/30, 2009

B Check if applicable Address change Name change Initial return Termination Amended return Application pending	C Name of organization THE COMMERCIAL CLUB FOUNDATION Doing Business As Number and street (or P O box if mail is not delivered to street address) 21 S. CLARK STREET City or town, state or country, and ZIP + 4 CHICAGO, IL 60603			D Employer identification number 36-3406446
				E Telephone number (312) 853-1200
				G Gross receipts \$ 3,880,388.
				H(a) Is this a group return for affiliates? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
				H(b) Are all affiliates included? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
				If "No," attach a list (see instructions)
				H(c) Group exemption number ►
I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) ► (Insert no.)	4947(a)(1) or	527	J Website: ► WWW.COMMERCIALCLUBCHICAGO.COM	
K Type of organization <input checked="" type="checkbox"/> Corporation	Trust	Association	Other ►	L Year of formation 1985 M State of legal domicile IL

## Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities THE COMMERCIAL CLUB FOUNDATION WAS ORGANIZED TO ASSIST IN FUNDING CERTAIN ACTIVITIES OF THE CIVIC COMMITTEE AND ITS AFFILIATES IN ITS MISSION TO STIMULATE AND ENCOURAGE THE GROWTH OF THE AREA'S ECONOMY.		
	2 Check this box ► <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets		
Revenue	3 Number of voting members of the governing body (Part VI, line 1a)	3	3
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	2
Expenses	5 Total number of employees (Part V, line 2a)	5	NONE
	6 Total number of volunteers (estimate if necessary)	6	4
Net Assets or Fund Balances	7a Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	NONE
	b Net unrelated business taxable income from Form 990-T, line 34	7b	NONE
		Prior Year	Current Year
	8 Contribution and grants (Part VIII, line 1h)	4,342,000.	3,802,000.
	9 Program service revenue (Part VIII, line 2g)	NONE	NONE
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	63,767.	78,388.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	NONE	NONE
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,405,767.	3,880,388.
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	2,750,598.	2,505,803.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	NONE	NONE
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	40,317.	52,261.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	NONE	NONE
	b Total fundraising expenses, Part IX, column (D), line 25 ► 38,834		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	309,303.	642,867.
	18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	3,100,218.	3,200,931.
	19 Revenue less expenses Subtract line 18 from line 12	1,305,549.	679,457.
		Beginning of Year	End of Year
	20 Total assets (Part X, line 16)	2,838,195.	3,247,502.
	21 Total liabilities (Part X, line 26)	340,068.	54,817.
	22 Net assets or fund balances Subtract line 21 from line 20	2,498,127.	3,192,685.

## Part II Signature Block

Sign Here 1 MAR 2010 Use Only	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 R. EDEN MARTIN Type or print name and title PRESIDENT	Date 7/12/10
	Preparer's signature ►		
Paid Preparer's Use Only	Preparer's signature ► Am M Petri	Date 2/3/10	Check if self-employed <input checked="" type="checkbox"/>
	Firm's name (or yours if self-employed), address, and ZIP + 4 ► GRANT THORNTON LLP 175 W. JACKSON BLVD. STE. 2000 CHICAGO, IL 60604	EIN ► 36-6055558	Preparer's identifying number (see instructions)
		Phone no ► 312-856-0200	

May the IRS discuss this return with the preparer shown above? (See instructions) X Yes No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

JSA  
BE1010 2000

Form 990 (2008)

BTGASL 649R

1426799

5

**Part III Statement of Program Service Accomplishments (see instructions)**

1 Briefly describe the organization's mission:

SEE STATEMENT 12 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No

If "Yes" describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  No

If "Yes," describe these changes on Schedule O.

4 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.

4a (Code: \_\_\_\_\_) (Expenses \$ 3,043,073. including grants of \$ 2,505,803. ) (Revenue \$ 3,895,489. )

FUNDS CERTAIN ACTIVITIES OF THE CIVIC COMMITTEE OF THE COMMERCIAL CLUB OF CHICAGO AND ITS AFFILIATED AND RELATED ENTITIES IN ITS MISSION TO STIMULATE AND ENCOURAGE THE GROWTH OF THE AREA'S ECONOMY AND ITS ABILITY TO PROVIDE FOR ITS PEOPLE.

4b (Code: \_\_\_\_\_) (Expenses \$ 92,328. including grants of \$ NONE ) (Revenue \$ NONE )

PURSUES LEGISLATIVE ACTIONS ON BEHALF OF THE AFFILIATED AND RELATED ORGANIZATIONS RELATED TO AVIATION, EDUCATION, STATE FINANCE AND OTHER POLICY MATTERS AFFECTING THE ECONOMIC VITALITY OF THE CITY OF CHICAGO AND THE SURROUNDING REGION.

4c (Code: \_\_\_\_\_) (Expenses \$ \_\_\_\_\_ including grants of \$ \_\_\_\_\_ ) (Revenue \$ \_\_\_\_\_ )

4d Other program services. (Describe in Schedule O.)

(Expenses \$ \_\_\_\_\_ including grants of \$ \_\_\_\_\_ ) (Revenue \$ \_\_\_\_\_ )

4e Total program service expenses ► \$ 3,135,401. (Must equal Part IX, Line 25, column (B).)

## Part IV Checklist of Required Schedules

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A . . . . .

2 Is the organization required to complete Schedule B, Schedule of Contributors? . . . . .

3 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 . . . . .

4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II . . . . .

5 Sections 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 . . . . .

6 Did the organization maintain any donor advised funds or any 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 . . . . .

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 . . . . .

8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III . . . . .

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 credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV . . . . .

10 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V . . . . .

11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable . . . . .

12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII . . . . .

13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .

14a Did the organization maintain an office, employees, or agents outside of the U.S.? . . . . .

  b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I . . . . .

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, Part II . . . . .

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, Part III . . . . .

17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I . . . . .

18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II . . . . .

19 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III . . . . .

20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H . . . . .

21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II . . . . .

22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III . . . . .

23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J . . . . .

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 questions 24b-24d and complete Schedule K. If "No," go to question 25 . . . . .

  b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .

  c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .

  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .

25a 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 . . . . .

  b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part II . . . . .

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 III . . . . .

27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part IV . . . . .

	Yes	No
1	X	
2	X	
3		X
4	X	
5		
6		X
7		X
8	X	
9		X
10		X
11	X	
12	X	
13		X
14a	X	
14b		X
15		X
16		X
17		X
18		X
19		X
20		X
21	X	
22		X
23		X
24a		X
24b		
24c		
24d		
25a		X
25b		X
26		X
27		X

**Part IV Checklist of Required Schedules (continued)**

	<b>Yes</b>	<b>No</b>
28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a	X
b Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b	X
c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? 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	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	X
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 section 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, 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 <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	X

Form 990 (2008)

## Part 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	1
1b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . . . . .	1b	NONE
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	NONE
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . . . . .	2b	
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)		
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? . . . . .	3a	X
b 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	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 Financial Accounts.		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .	5a	X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? . . . . .	5b	X
c If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? . . . . .		
6a Did the organization solicit any contributions that were not tax deductible? . . . . .	6a	X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .		
7 Organizations that may receive deductible contributions under section 170(c).		
a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75? . . . . .	7a	X
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 was required to file Form 8282? . . . . .	7c	X
d If "Yes," indicate the number of Forms 8282 filed during the year . . . . .	7d	
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .	7e	X
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? . . . . .	7f	X
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? . . . . .	7g	
8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? . . . . .	7h	
9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.	8	X
a 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	
10 Section 501(c)(7) organizations. Enter:		
a 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:		
a 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	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? . . . . .	12a	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year . . . . .	12b	

**Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)**
**Section A. Governing Body and Management**

		Yes	No
For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, process, or changes in Schedule O. See instructions.			
1a	1b	3	
1a	1b	2	
2		X	
3		X	
4		X	
5		X	
6		X	
7a		X	
7b		X	
8a		X	
8b		X	
9a		X	
9b		X	
10		X	
11		X	
1a	1b	3	
2		X	
3		X	
4		X	
5		X	
6		X	
7a		X	
7b		X	
8a		X	
8b		X	
9a		X	
9b		X	
10		X	
11		X	

**Section B. Policies**

		Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13		
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done		
13	Does the organization have a written whistleblower policy?		
14	Does the organization have a written document retention and destruction policy?		
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision		
a	The organization's CEO, Executive Director, or top management official?		
b	Other officers or key employees of the organization?		
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 taxable entity during the year?		
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		
16a		X	
16b			
12a		X	
12b		X	
12c		X	
13		X	
14		X	
15a		X	
15b		X	
16a		X	
16b			

**Section C. Disclosure**

17	List the states with which a copy of this Form 990 is required to be filed ► <u>IL</u>					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available Check all that apply					
	<input type="checkbox"/>	Own website	<input checked="" type="checkbox"/>	Another's website	<input checked="" type="checkbox"/>	Upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial 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 organization ► <u>MS. CORDELIA C MEYER 21 S. CLARK ST. STE. 3120 CHICAGO, IL 60603</u> <u>312-853-1200</u>					

## **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. 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, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- 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 compensate any officer, director, trustee, or key employee.

**Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)**

1b Total ..... ► NONE 544,812. NONE

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ► **NONE**

3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual . . . . .

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual . . . . .

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person . . . . .

---

**Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

	(A) Name and business address	(B) Description of services	(C) Compensation
SEE STATEMENT 2			

## Part VIII Statement of Revenue

		(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	1a Federated campaigns . . . . .	1a			
	b Membership dues . . . . .	1b			
	c Fundraising events . . . . .	1c			
	d Related organizations . . . . .	1d			
	e Government grants (contributions) . . . . .	1e			
	f All other contributions, gifts, grants, and similar amounts not included above . . . . .	1f	3,802,000.		
	g Noncash contributions included in lines 1a-1f \$				
	h Total. Add lines 1a-1f . . . . . ►		3,802,000.		
Program Service Revenue	2a	Business Code			
	b				
	c				
	d				
	e				
	f All other program service revenue . . . . .				
	g Total. Add lines 2a-2f . . . . . ►		NONE		
	3 Investment income (including dividends, interest, and other similar amounts) . . . . . ►		81,654.		81,654.
4 Income from investment of tax-exempt bond proceeds . . . . . ►		NONE			
5 Royalties . . . . . ►		NONE			
6a Gross Rents . . . . .	(i) Real	(ii) Personal			
b Less: rental expenses . . . . .					
c Rental income or (loss) . . . . .					
d Net rental income or (loss) . . . . . ►			NONE		
7a Gross amount from sales of assets other than inventory . . . . .	(i) Securities	(ii) Other			
b Less: cost or other basis and sales expenses . . . . .	-3,266.				
c Gain or (loss) . . . . .	NONE				
d Net gain or (loss) . . . . . ►	-3,266.				-3,266.
8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18. . . . . a					
b Less: direct expenses . . . . . b					
c Net income or (loss) from fundraising events . . . . . ►		NONE			
9a Gross income from gaming activities. See Part IV, line 19 . . . . . a					
b Less: direct expenses . . . . . b					
c Net income or (loss) from gaming activities . . . . . ►		NONE			
10a Gross sales of inventory, less returns and allowances . . . . . a					
b Less: cost of goods sold . . . . . b					
c Net income or (loss) from sales of inventory. . . . . ►		NONE			
Miscellaneous Revenue		Business Code			
11a					
b					
c					
d All other revenue . . . . .					
e Total. Add lines 11a-11d . . . . . ►		NONE			
12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e . . . . . ►		3,880,388.			78,388.

**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).**

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(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 . . . . .	2,505,803.	2,505,803.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22 . . . . .	NONE			
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 . . . . .	NONE			
4 Benefits paid to or for members . . . . .	NONE			
5 Compensation of current officers, directors, trustees, and key employees . . . . .	35,072.	9,506.		25,566.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .	NONE			
7 Other salaries and wages . . . . .	9,134.	1,730.		7,404.
8 Pension plan contributions (include section 401 (k) and section 403(b) employer contributions). . . . .	1,649.			1,649.
9 Other employee benefits . . . . .	4,237.	1,659.		2,578.
10 Payroll taxes . . . . .	2,169.	532.		1,637.
11 Fees for services (non-employees):				
a Management . . . . .	NONE			
b Legal . . . . .	NONE			
c Accounting . . . . .	12,116.		12,116.	
d Lobbying . . . . .	92,328.	92,328.		
e Professional fundraising services. See Part IV, line 17	NONE			
f Investment management fees . . . . .	9,895.		9,895.	
g Other . . . . .	523,843.	523,843.		
12 Advertising and promotion . . . . .	NONE			
13 Office expenses . . . . .	105.		105.	
14 Information technology. . . . .	NONE			
15 Royalties. . . . .	NONE			
16 Occupancy . . . . .	3,885.		3,885.	
17 Travel . . . . .	NONE			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	NONE			
19 Conferences, conventions, and meetings . . . . .	NONE			
20 Interest . . . . .	NONE			
21 Payments to affiliates . . . . .	NONE			
22 Depreciation, depletion, and amortization . . . . .	NONE			
23 Insurance . . . . .	NONE			
24 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.)				
a -----				
b -----				
c -----				
d -----				
e -----				
f All other expenses -----				
25 Total functional expenses. Add lines 1 through 24f	3,200,931.	3,135,401.	26,696.	38,834.
26 Joint Costs. Check here ► <input type="checkbox"/> If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation . . . . .				

## Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing . . . . .	3,023	1	11,594
	2 Savings and temporary cash investments . . . . .	927,414	2	1,615,168
	3 Pledges and grants receivable, net . . . . .		3	
	4 Accounts receivable, net . . . . .	18,484	4	15,711
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L . . . . .		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L . . . . .		6	
	7 Notes and loans receivable, net . . . . .		7	
	8 Inventories for sales or use . . . . .		8	
	9 Prepaid expenses and deferred charges . . . . .	437	9	690
	10a Land, buildings, and equipment. cost basis . . . . .	10a		
	b Less: accumulated depreciation. Complete Part VI of Schedule D. . . . .	10b		10c
	11 Investments - publicly traded securities . . . . .	427,659	11	641,325
	12 Investments - other securities. See Part IV, line 11 . . . . .	1,451,178	12	953,014
	13 Investments - program-related. See Part IV, line 11 . . . . .		13	
	14 Intangible assets . . . . .		14	
	15 Other assets. See Part IV, line 11 . . . . .	10,000	15	10,000
	16 Total assets. Add lines 1 through 15 (must equal line 34) . . . . .	2,838,195	16	3,247,502
Liabilities	17 Accounts payable and accrued expenses . . . . .	10,040	17	NONE
	18 Grants payable . . . . .		18	
	19 Deferred revenue . . . . .		19	
	20 Tax-exempt bond liabilities . . . . .		20	
	21 Escrow account liability. Complete Part IV of Schedule D . . . . .		21	
	22 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	
	24 Unsecured notes and loans payable. . . . .		24	
	25 Other liabilities. Complete Part X of Schedule D . . . . .	330,028	25	54,817
	26 Total liabilities. Add lines 17 through 25. . . . .	340,068	26	54,817
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets . . . . .	2,498,127	27	3,192,685
	28 Temporarily restricted net assets . . . . .		28	
	29 Permanently restricted net assets . . . . .		29	
	Organizations that do not follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds . . . . .		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund . . . . .		31	
	32 Retained earnings, endowment, accumulated income, or other funds . . . . .		32	
	33 Total net assets or fund balances . . . . .	2,498,127	33	3,192,685
	34 Total liabilities and net assets/fund balances . . . . .	2,838,195	34	3,247,502

## Part XI Financial Statements and Reporting

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? . . . . .	2a	X
b	Were the organization's financial statements audited by an independent accountant? . . . . .	2b	X
c	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? . . . . .	2c	X
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? . . . . .	3a	X
b	If "Yes," did the organization undergo the required audit or audits? . . . . .	3b	

**SCHEDULE A**  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No. 1545-0047

**2008**

Open to Public  
Inspection

Name of the organization

THE COMMERCIAL CLUB FOUNDATION

Employer identification number

36-3406446

**Part I Reason for Public Charity Status** (All organizations must complete this part.) (see instructions)

The organization is not a private foundation because it is: (Please check only one organization.)

1  A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).  
 2  A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)  
 3  A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.)  
 4  A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:  
 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)  
 6  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).  
 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)  
 8  A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)  
 9  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)  
 10  An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions)  
 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.  
 a  Type I      b  Type II      c  Type III - Functionally Integrated      d  Type III - Other  
 e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).  
 f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box   
 g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  
 (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?   
 (ii) A family member of a person described in (i) above?   
 (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(i)		X
11g(ii)		X
11g(iii)		X

h Provide the following information about the organizations the organization supports.

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule A (Form 990 or 990-EZ) 2008

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**  
 (Complete only if you checked the box on line 5, 7, or 8 of Part I.)
**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . .		3,017,000.	3,969,500.	4,342,000.	3,802,000.	15,130,500.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
3 The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
4 Total. Add lines 1-3 . . . . .	3,017,000.	3,969,500.	4,342,000.	3,802,000.	15,130,500.	
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . . . .						
6 Public support. Subtract line 5 from line 4. . . . .						15,130,500.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4. . . . .		3,017,000.	3,969,500.	4,342,000.	3,802,000.	15,130,500.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . . . .	25,697.	34,774.	44,844.	63,717.	78,388.	247,420.
9 Net income from unrelated business activities, whether or not the business is regularly carried on . . . . .						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) . . . . .						
11 Total support. Add lines 7 through 10 . . . . .						15,377,920.
12 Gross receipts from related activities, etc. (See instructions.) . . . . .					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here . . . . . ► <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) . . . . .	14	98.39 %
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f . . . . .	15	96.14 %
16a 33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization . . . . . ► <input checked="" type="checkbox"/>		
b 33 1/3% support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization . . . . . ► <input type="checkbox"/>		
17a 10%-facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a or 16b, and line 14 is 10% or more, and if the organization meets the "fact-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization . . . . . ► <input type="checkbox"/>		
b 10%-facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ► <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . . ► <input type="checkbox"/>		

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**  
 (Complete only if you checked the box on line 9 of Part I.)
**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . .						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose . . . . .						
3 Gross receipts from activities that are not an unrelated trade or business under section 513 . . . . .						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
5 The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
<b>6 Total. Add lines 1-5 . . . . .</b>						
<b>7a Amounts included on lines 1, 2, and 3 received from disqualified persons . . . . .</b>						
<b>b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 . . . . .</b>						
<b>c Add lines 7a and 7b. . . . .</b>						
<b>8 Public support (Subtract line 7c from line 6.) . . . . .</b>						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6. . . . .						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . . .						
c Add lines 10a and 10b . . . . .						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on . . . . .						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . . . . .						
<b>13 Total support. (Add lines 9, 10c, 11, and 12.) . . . . .</b>						
<b>14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. . . . . ► <input type="checkbox"/></b>						

**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) . . . . .	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g . . . . .	16	%

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) . . . . .	17	%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h . . . . .	18	%
19a 33 1/3% support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization . . . . . ► <input type="checkbox"/>		
b 33 1/3% support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization . . . . . ► <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . . . . ► <input type="checkbox"/>		

**Part IV** **Supplemental Information.** Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

158

8E1222 1 000

BTGASL 649R

1426799

**Schedule A (Form 990 or 990-EZ) 2008**

**Department of the Treasury  
Internal Revenue Service**

## For Organizations Exempt From Income Tax Under section 501(c) and section 527

► To be completed by organizations described below.

► Attach to Form 990 or Form 990-EZ.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(cy)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes." to Form 990, Part IV, line 5 (Proxy Tax), then

• Section 501(c)(4), (5), or (6) organizations: Complete Part III

Name of organization <b>THE COMMERCIAL CLUB FOUNDATION</b>	Employer Identification number <b>36-3406446</b>
---	---

To be completed by all organizations exempt  
See the instructions for Schedule C for details

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV  
2 Political expenditures . . . . . ► \$  
3 Volunteer hours

**Part I-B To be completed by all organizations exempt under section 501(c)(3).**

See the instructions for Schedule C for details.

1 Enter the amount of any excise tax incurred by the organization under section 4955 . . . . . ► \$  
2 Enter the amount of any excise tax incurred by organization managers under section 4955 . . . . . ► \$  
3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? . . . . .  
4a Was a correction made? . . . . .  
b If "Yes," describe in Part IV

**Part I-C To be completed by all organizations exempt under section 501(c), except section 501(c)(3).**

See the instructions for Schedule C for details.

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities . . . . . ► \$ \_\_\_\_\_

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities . . . . . ► \$ \_\_\_\_\_

3 Total of direct and indirect exempt function expenditures. Add lines 1 and 2 and enter here and on Form 1120-POL, line 17b . . . . . ► \$ \_\_\_\_\_

4 Did the filing organization file **Form 1120-POL** for this year? . . . . .  Yes  No

5 State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. Enter the amount paid and indicate if the amount was paid from the filing organization's funds or were political contributions received and promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

**Part II-A To be completed by organizations exempt under section 501(c)(3) that filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details.**
**A** Check   if the filing organization belongs to an affiliated group.

**B** Check   if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
<b>1a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying) . . . . .			
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying) . . . . .	105,755.	105,755.	
<b>c</b> Total lobbying expenditures (add lines 1a and 1b) . . . . .	105,755.	105,755.	
<b>d</b> Other exempt purpose expenditures . . . . .	3,095,176.	4,597,504.	
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d) . . . . .	3,200,931.	4,703,259.	
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.	310,047.	385,163.	
<b>If the amount on line 1e, column (a) or (b) is:</b>	<b>The lobbying nontaxable amount is:</b>		
Not over \$500,000	20% of the amount on line 1e.		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
Over \$17,000,000	\$1,000,000.		
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f) . . . . .	77,512.	96,291.	
<b>h</b> Subtract line 1g from line 1a. Enter -0- if line g is more than line a . . . . .			
<b>i</b> Subtract line 1f from line 1c. Enter -0- if line f is more than line c . . . . .			
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? . . . . .			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f of the instructions.)

**Lobbying Expenditures During 4-Year Averaging Period**

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
<b>2a</b> Lobbying non-taxable amount	301,018.	337,169.	305,011.	310,047.	1,253,245.
<b>b</b> Lobbying ceiling amount (150% line 2a, column(e))					1,879,868.
<b>c</b> Total lobbying expenditures	78,026.	89,529.	94,147.	105,755.	367,457.
<b>d</b> Grassroots non-taxable amount	75,255.	84,292.	76,253.	77,512.	313,312.
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					469,968.
<b>f</b> Grassroots lobbying expenditures					

**Part II-B** To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details.

	(a)		(b)	
	Yes	No	Amount	
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?				
i Other activities? If "Yes," describe in Part IV				
j Total lines 1c through 1i				
2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				

**Part III-A** To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). See the instructions for Schedule C for details.

Section 501(c)(4) and the instructions for Schedule 3 for Schedules		
	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members? . . . . .	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? . . . . .	2	
3 Did the organization agree to carryover lobbying and political expenditures from the prior year? . . . . .	3	

**Part III-B** To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes." See Schedule C instructions for details.

1	Dues, assessments and similar amounts from members . . . . .	1
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	
a	Current year . . . . .	2a
b	Carryover from last year . . . . .	2b
c	Total . . . . .	2c
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues . . . . .	3
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? . . . . .	4
5	Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4) . . . . .	5

## Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5 and Part II-B, line 1i. Also, complete this part for any additional information

**Part IV Supplemental Information (continued)**

---

**SCHEDULE D**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

OMB No. 1545-0047

**2008**

Open to Public  
Inspection

Name of the organization

THE COMMERCIAL CLUB FOUNDATION

Employer identification number

36-3406446

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year . . . . .		
2 Aggregate contributions to (during year) . . . . .		
3 Aggregate grants from (during year) . . . . .		
4 Aggregate value at end of year . . . . .		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . .  Yes  No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? . . . . .  Yes  No

**Part II Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or pleasure)  Preservation of an historically importantly land area  
 Protection of natural habitat  Preservation of certified historic structure  
 Preservation of open space

2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
2a	
2b	
2c	
2d	

a Total number of conservation easements . . . . .

b Total acreage restricted by conservation easements . . . . .

c Number of conservation easements on a certified historic structure included in (a) . . . . .

d Number of conservation easements included in (c) acquired after 8/17/06 . . . . .

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ►

4 Number of states where property subject to conservation easement is located ►

5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? . . . . .  Yes  No

6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ►

7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ► \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? . . . . .  Yes  No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**  
Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

1b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 . . . . . ► \$ NONE

(ii) Assets included in Form 990, Part X . . . . . ► \$ NONE

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:

a Revenues included in Form 990, Part VIII, line 1 . . . . . ► \$ 3,877,122

b Assets included in Form 990, Part X . . . . . ► \$ 10,000

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2008

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)**

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply).

<b>a</b> <input type="checkbox"/> Public exhibition	<b>d</b> <input type="checkbox"/> Loan or exchange programs
<b>b</b> <input type="checkbox"/> Scholarly research	<b>e</b> <input checked="" type="checkbox"/> Other <u>ONE DONATION OF ARTWORK IN FY08</u>
<b>c</b> <input type="checkbox"/> Preservation for future generations	

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Trust, Escrow and Custodial Arrangements.** Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21?  Yes  No

b If "Yes," explain the arrangement in Part XIV.

**Part V Endowment Funds.** Complete if organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current Year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Investment earnings or losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as.

a Board designated or quasi-endowment ► %

b Permanent endowment ► %

c Term endowment ► %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

Yes	No
3a(i)	
3a(ii)	
3b	

(i) unrelated organizations . . . . .

(ii) related organizations . . . . .

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? . . . . .

4 Describe in Part XIV the intended uses of the organization's endowment funds.

**Part VI Investments - Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land . . . . .				
b Buildings . . . . .				
c Leasehold improvements . . . . .				
d Equipment . . . . .				
e Other . . . . .				

Total. Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).) . . . . . ►

**Part VII Investments - Other Securities. See Form 990, Part X, line 12.**

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Financial derivatives and other financial products . . . . .		
Closely-held equity interests . . . . .		
Other . . . . .		

Total. (Column (b) should equal Form 990, Part X, col (B) line 12) ►

**Part VIII Investments - Program Related. See Form 990, Part X, line 13.**

**Total. (Column (b) should equal Form 990, Part X, col (B) line 13 )** ►

**Part IX Other Assets. See Form 990, Part X, line 15.**

**Total. (Column (b) should equal Form 990, Part X, col (B) line 15 )**

**Part X** **Other Liabilities. See Form 990, Part X, line 25.**

(a) Description of liability	(b) Amount	
Federal income taxes		
<b>DUE TO AFFILIATES: CIVIC COMMITTEE</b>	<b>54,817</b>	

**Total. (Column (b) should equal Form 990, Part X, col (B) line 25.)** ►

54.817

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

**Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements**

1	Total revenue (Form 990, Part VIII, column (A), line 12) . . . . .	1	3,880,388.
2	Total expenses (Form 990, Part IX, column (A), line 25) . . . . .	2	3,200,931.
3	Excess or (deficit) for the year. Subtract line 2 from line 1 . . . . .	3	679,457.
4	Net unrealized gains (losses) on investments . . . . .	4	-15,101.
5	Donated services and use of facilities . . . . .	5	
6	Investment expenses . . . . .	6	
7	Prior period adjustments . . . . .	7	
8	Other (Describe in Part XIV) . . . . .	8	
9	Total adjustments (net) Add lines 4-8 . . . . .	9	-15,101.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9 . . . . .	10	664,356.

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

1	Total revenue, gains, and other support per audited financial statements . . . . .	1	3,895,489.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments . . . . .	2a	15,101.
b	Donated services and use of facilities . . . . .	2b	
c	Recoveries of prior year grants . . . . .	2c	
d	Other (Describe in Part XIV) . . . . .	2d	
e	Add lines 2a through 2d . . . . .	2e	15,101.
3	Subtract line 2e from line 1 . . . . .	3	3,880,388.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a	
b	Other (Describe in Part XIV) . . . . .	4b	
c	Add lines 4a and 4b . . . . .	4c	
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12) . . . . .	5	3,880,388.

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

1	Total expenses and losses per audited financial statements . . . . .	1	3,200,931.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities . . . . .	2a	
b	Prior year adjustments . . . . .	2b	
c	Losses reported on Form 990, Part IX, line 25 . . . . .	2c	
d	Other (Describe in Part XIV) . . . . .	2d	
e	Add lines 2a through 2d . . . . .	2e	
3	Subtract line 2e from line 1 . . . . .	3	3,200,931.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a	
b	Other (Describe in Part XIV) . . . . .	4b	
c	Add lines 4a and 4b . . . . .	4c	
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.) . . . . .	5	3,200,931.

**Part XIV Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.

DONATED ARTWORK

-----

-----

-----

THE ORGANIZATION HAS ONE PIECE OF FINE ARTWORK DONATED TO THE

ORGANIZATION. THIS PIECE WAS CREATED AS PART OF THE ESTABLISHMENT OF

CHICAGO METROPOLIS 2020, A RELATED ORGANIZATION.

-----

-----

-----

**Part XIV Supplemental Information (continued)**



**Part III Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I line 2 and any other additional information

SCHEDULE I. PART I. LINE 2

## PROCESS FOR MONITORING GRANT FUNDS

THE COMMERCIAL CLUB FOUNDATION GIVES PRIORITY TO AFFILIATED AND RELATED

## ORGANIZATIONS

סימני איסוף ותבונת נתונים בפיזיולוגיה של המוח

MOVIMENTO

Schedule I (Form 990) 2008

## Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

**2008**

Open to Public Inspection

Name of the organization

THE COMMERCIAL CLUB FOUNDATION

Employer identification number

36-3406446

### Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items

<input type="checkbox"/>	First-class or charter travel	<input type="checkbox"/>	Housing allowance or residence for personal use
<input type="checkbox"/>	Travel for companions	<input type="checkbox"/>	Payments for business use of personal residence
<input type="checkbox"/>	Tax indemnification and gross-up payments	<input type="checkbox"/>	Health or social club dues or initiation fees
<input type="checkbox"/>	Discretionary spending account	<input type="checkbox"/>	Personal services (e.g., maid, chauffeur, chef)

b If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain . . . . .

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? . . . . .

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

<input type="checkbox"/>	Compensation committee	<input type="checkbox"/>	Written employment contract
<input type="checkbox"/>	Independent compensation consultant	<input type="checkbox"/>	Compensation survey or study
<input checked="" type="checkbox"/>	Form 990 of other organizations	<input type="checkbox"/>	Approval by the board or compensation committee

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a.

a Receive a severance payment or change of control payment? . . . . .

b Participate in, or receive payment from, a supplemental nonqualified retirement plan? . . . . .

c Participate in, or receive payment from, an equity-based compensation arrangement? . . . . .

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

**Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.**

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

a The organization? . . . . .

b Any related organization? . . . . .

If "Yes" to line 5a or 5b, describe in Part III.

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

a The organization? . . . . .

b Any related organization? . . . . .

If "Yes" to line 6a or 6b, describe in Part III.

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III . . . . .

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III . . . . .

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2008

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use Schedule J-1 if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

**Note.** The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

Name of the organization

THE COMMERCIAL CLUB FOUNDATION

Employer identification number

36-3406446

FORM 990, PART VI, LINE 1BVOTING MEMBERSDIRECTOR, R. EDEN MARTIN OF THE COMMERCIAL CLUB FOUNDATION BOARD OFDIRECTORS IS NOT CONSIDERED INDEPENDENT BECAUSE HE RECEIVES COMPENSATIONFROM A RELATED ORGANIZATION.

Name of the organization

THE COMMERCIAL CLUB FOUNDATION

**Employer identification number**

36-3406446

FORM 990, PART VI, LINE 3

## DELEGATION OF MANAGEMENT DUTIES

THE MANAGEMENT STAFF IS CHARGED WITH RUNNING THE DAY TO DAY OPERATIONS OF

## THE FOUNDATION.

**Name of the organization**

THE COMMERCIAL CLUB FOUNDATION

**Employer Identification number**

36-3406446

FORM 990, PART VI, LINE 7A

## ELECTION OF GOVERNING BODY

THE OFFICERS/DIRECTORS OF THE FOUNDATION ARE VOTED ON BY THE MEMBERS OF

THE COMMERCIAL CLUB OF CHICAGO.

Name of the organization

THE COMMERCIAL CLUB FOUNDATION

Employer identification number

36-3406446

FORM 990, PART VI, LINE 10REVIEW OF FORM 990MANAGEMENT AND THE TREASURER REVIEW A DRAFT VERSION OF THE FORM 990.SUBSEQUENT TO THEIR REVIEW, MANAGEMENT AND THE TREASURER, ALONG WITH THEORGANIZATION'S DIRECTOR OF FINANCE DISCUSS THE DRAFT VERSIONS WITH THETAX PREPARERS INCLUDING ANY QUESTIONS OR NECESSARY REVISIONS. BASED ONFEEDBACK FROM THAT MEETING, THE FORM 990 IS REVISED AS NECESSARY. THEBOARD WILL RECEIVE A COPY OF THE FORM 990 PRIOR TO FILING WITH THE IRS.

Name of the organization

THE COMMERCIAL CLUB FOUNDATION

Employer Identification number

36-3406446

FORM 990, PART VI, LINE 12CMONITORING CONFLICT OF INTERESTTRANSACTIONS THAT INVOLVE A BOARD MEMBER OR OFFICER ARE ASSESSED TODETERMINE IF A CONFLICT OF INTEREST EXISTS. THE DECISIONS REGARDING IF ACONFLICT EXISTS IS DETERMINED BY THE GOVERNING COMMITTEES OF THEORGANIZATION. IF A CONFLICT IS IDENTIFIED (NONE IDENTIFIED TO DATE), THEMEMBER THAT IT RELATES TO IS ASKED TO ABSTAIN FROM THE CONVERSATION ANDANY RELATED DECISIONS MADE. ALTHOUGH THE ORGANIZATION DOES NOT HAVE AFORMAL POLICY THAT REQUIRES AN ANNUAL COMPLETION OF A CONFLICT OFINTEREST STATEMENT, EACH OFFICER, DIRECTOR AND KEY EMPLOYEE IS REQUIREDTO DISCLOSE ON A CONTEMPORANEOUS BASIS WHEN A CONFLICT ARISES.

**Name of the organization**

THE COMMERCIAL CLUB FOUNDATION

**Employer Identification number**

36-3406446

FORM 990, PART VI, LINE 13

## WHISTLEBLOWER POLICY

AT THIS TIME, THE COMMERCIAL CLUB FOUNDATION DOES NOT HAVE A WRITTEN

WHISTLE BLOWER POLICY, HOWEVER, THE ORGANIZATION HAS AN OPEN DOOR POLICY

- TO ENCOURAGE FEEDBACK FROM ALL EMPLOYEES - UPON THE AUDITOR'S RECENT

- RECOMMENDATION - THE ORGANIZATION HAS TAKEN IMPLEMENTING A WRITTEN POLICY

UNDER ADVISEMENT AND WILL WORK TO DEVELOP A DOCUMENTED POLICY.

Name of the organization

THE COMMERCIAL CLUB FOUNDATION

Employer identification number

36-3406446FORM 990, PART VI, LINE 14DOCUMENT RETENTION POLICYAT THIS TIME, THE COMMERCIAL CLUB FOUNDATION DOES NOT HAVE A WRITTENDOCUMENT RETENTION POLICY, HOWEVER, IT FOLLOWS THE MINIMUM IRS GUIDELINESFOR DOCUMENT RETENTION. UPON THE AUDITORS' RECENT RECOMMENDATIONS THEORGANIZATION HAS TAKEN IMPLEMENTING A WRITTEN DOCUMENT RETENTION POLICYUNDER ADVISEMENT AND WILL WORK TO DEVELOP A DOCUMENTED POLICY.

Name of the organization

THE COMMERCIAL CLUB FOUNDATION

Employer identification number

36-3406446

FORM 990, PART VI, LINE 15BCOMPENSATION APPROVALCOMPENSATION FOR THE CHIEF EXECUTIVE OFFICER OF THE ORGANIZATION WASESTABLISHED BY A REVIEW OF OTHER LIKE-KIND ORGANIZATIONS PRIOR TO HISDATE OF HIRE. PERFORMANCE AND INCREASES ARE REVIEWED ANNUALLY ON THEANNIVERSARY DATE OF HIRE AND BUDGETED FOR IN THE ANNUAL OPERATING BUDGETWHICH IS APPROVED BY THE OFFICERS AND DIRECTORS OF THE ORGANIZATION. ANINCREASE FOR THE CEO OF THE ORGANIZATION WAS LAST GIVEN ON JULY 1, 2008.THE ORGANIZATION WILL BE ADOPTING A PROCESS OF INDEPENDENT REVIEW TO BECOMPLETED BY THE TREASURER AND CHAIRMAN OF THE BOARD.

Name of the organization

THE COMMERCIAL CLUB FOUNDATION

Employer identification number

36-3406446FORM 990, PART VI, LINE 19DOCUMENTS AVAILABLE TO PUBLICTHE ORGANIZATION DOES NOT MAKE THEIR FINANCIAL STATEMENTS, BY-LAWS, ORCONFLICT OF INTEREST POLICY AVAILABLE TO THE PUBLIC.

**Name of the organization**

THE COMMERCIAL CLUB FOUNDATION

**Employer identification number**

36-3406446

## PART VII

PART VII AND SCHEDULE J, PART II

THE 2008 FORM 990, SCHEDULE VII AND SCHEDULE J PART II REPORTING IS TO BE

COMPLETED USING CALENDAR YEAR COMPENSATION (JANUARY 1, 2008 - DECEMBER

31, 2008). THE 2007 FORM 990 WAS TO BE COMPLETED USING FISCAL YEAR WAGES.

(JULY 1, 2007 - JUNE 30, 2008). THEREFORE, THE DOUBLE-COUNTING OF

COMPENSATION DURING THE PERIOD OF JANUARY 1, 2008 - JUNE 30, 2008 WILL

CAUSE CUMULATIVE COMPENSATION TO BE OVERSTATED.

## Related Organizations and Unrelated Partnerships

**Department of the Treasury  
Internal Revenue Service**

**Department of the Treasury  
Internal Revenue Service**

Open to Public Inspection

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.  
► See separate instructions.

Name of the organization THE COMMERCIAL CLUB FOUNDATION

## Part I Identification of Disregarded Entities

## Part II Identification of Related Tax-Exempt Organizations

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2008

## Identification of Related Organizations Taxable as a Partnership

## Part IV Identification of Related Organizations Taxable as a Corporation or Trust

## Part V Transactions With Related Organizations

**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV.

1 During the tax year did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a Receipt of (I) interest (II) annuities (III) royalties (IV) rent from a controlled entity . . . . .
- b Gift, grant, or capital contribution to other organization(s) . . . . .
- c Gift, grant, or capital contribution from other organization(s) . . . . .
- d Loans or loan guarantees to or for other organization(s) . . . . .
- e Loans or loan guarantees by other organization(s) . . . . .

- f Sale of assets to other organization(s) . . . . .
- g Purchase of assets from other organization(s) . . . . .
- h Exchange of assets . . . . .
- i Lease of facilities, equipment, or other assets to other organization(s) . . . . .
- j Lease of facilities, equipment, or other assets from other organization(s) . . . . .
- k Performance of services or membership or fundraising solicitations for other organization(s) . . . . .
- l Performance of services or membership or fundraising solicitations by other organization(s) . . . . .
- m Sharing of facilities, equipment, mailing lists, or other assets . . . . .
- n Sharing of paid employees . . . . .
- o Reimbursement paid to other organization for expenses . . . . .
- p Reimbursement paid by other organization for expenses . . . . .
- q Other transfer of cash or property to other organization(s) . . . . .
- r Other transfer of cash or property from other organization(s) . . . . .

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(A) Name of other organization(s)	(B) Transaction type (a-r)	(C) Amount involved
(1) CIVIC CONSULTING ALLIANCE		B	1,000,000.
(2) THE COMMERCIAL CLUB OF CHICAGO		B	980,802.
(3) THE COMMERCIAL CLUB OF CHICAGO		L	23,421.
(4) THE COMMERCIAL CLUB OF CHICAGO		O	66,840.
(5)			
(6)			

## Part VI Unrelated Organizations Taxable as a Partnership

**Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See Instructions regarding exclusion for certain investment partnerships.**

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

=====

THE FOUNDATION WAS ORGANIZED TO ASSIST IN FUNDING CERTAIN ACTIVITIES OF THE CIVIC COMMITTEE OF THE COMMERCIAL CLUB OF CHICAGO (THE "CIVIC COMMITTEE") AND ITS AFFILIATED AND RELATED ENTITIES IN ITS MISSION TO STIMULATE AND ENCOURAGE THE GROWTH OF THE AREA'S ECONOMY AND ITS ABILITY TO PROVIDE FOR ITS PEOPLE.

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

=====

NAME AND ADDRESS

-----

DESCRIPTION OF SERVICES COMPENSATION

-----

ASK PUBLIC STRATEGIES, LLC  
730 N. FRANKLN SUITE 404  
CHICAGO, IL 60654

PR CAMPAIGN

498,144.

TOTAL COMPENSATION

498,144.

=====

FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

=====

DESCRIPTION

-----

ENDING  
BOOK VALUE

-----

TOTALS

3,209,507.

=====

- If you are filing for an **Automatic 3-Month Extension**, complete only Part I and check this box  ► X
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II (on page 2 of this form).

**Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868.

**Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).**

**A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only.**

*All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.*

**Electronic Filing (e-file).** Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on e-file for Charities & Nonprofits.

Type or print  File by the due date for filing your return. See instructions	Name of Exempt Organization  <u>THE COMMERCIAL CLUB FOUNDATION</u>  Number, street, and room or suite no. If a P.O. box, see instructions  <u>21 S. CLARK STREET, #3120</u>  City, town or post office, state, and ZIP code. For a foreign address, see instructions  <u>CHICAGO, IL 60603</u>	Employer identification number  <u>36-3406446</u>
--	--	---

**Check type of return to be filed (file a separate application for each return):**

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-T (corporation)	<input type="checkbox"/> Form 4720
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 5227
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 8870

- The books are in the care of ► CORDELIA MEYER

Telephone No. ► 312 853-1208

FAX No. ► 312 853-1209

- If the organization does not have an office or place of business in the United States, check this box . . . . . ►
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . . . . . If this is for the whole group, check this box . ►  If it is for part of the group, check this box . . ►  and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 02/15, 2010, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

►  calendar year \_\_\_\_\_ or  
►  tax year beginning 07/01, 2008, and ending 06/30, 2009

2 If this tax year is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a \$
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b \$
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c \$

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

**For Privacy Act and Paperwork Reduction Act Notice, see Instructions.**

Form 8868 (Rev. 4-2009)