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Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

2000

2008

OMB No 1545-0047

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

Open to Public Inspection

A Fo	r the 2	2008 calend	lar yea	r, or tax year beginning 09-01-2008 C Name of organization	and ending 08-31-200	9	D Employer ide	ntification number		
_		oplicable Plea	ase IRS	HOLLAND AREA CHAMBER OF COMMERC						
_	dress ch	labe	el or	FOUNDATION Doing Business As			38-2476780 E Telephone nu	E Telephone number		
_	me char	typ	ntor e. See				(616) 392-2	389		
_	tial retur	Ins	ecific truc-	Number and street (or P O box if mail is 272 E 8TH ST	s not delivered to street addre	ss) Room/suite	G Gross receipts			
_	mınatıo	1	ns.							
_	ended r			City or town, state or country, and ZIP + HOLLAND, MI 49423	+ 4					
App	olication	pending				_				
			F Nam JANEC	ne and address of Principal Officer			s a group return			
				BTH ST		affilia	tes?	⊤Yes ▼ No		
		•		ND,MI 49423		H(b) Are all	affiliates include	d?		
i la	x-exem	pt status 🔽	501(c)	(3) ◀ (insert no)	527	-		See instructions)		
W	eb site	e: >				H(c) Grou	p Exemption Nur	nber 🟲		
	e of ora	anization 🔽 (Cornorati	on		L Year of For	mation 1983 M	State of legal domicile MI		
Гур	e or org	dinzacion j	согроган	ony trusty association y other p		TE Teal of Tol	mation 1909 14 c	state of legal dofficile. Fit		
Da	rt I	Summar								
Pa				e organization's mission or most sic	inificant activities					
,,		,		/IDUAL, MEMBER, AND CORPORA	,	ТОГСОММИ	JNITY			
<u> </u>										
sauvellidilice										
<u> </u>	2	Check this l	box 🏲	if the organization discontinued its	operations or disposed o	of more than 2	5% of its assets			
	3	Number of v	oting n	nembers of the governing body (Par	t VI, line 1a)		з _	25		
5 7	4	Number of I	ndepen	dent voting members of the governi	ng body (Part VI, line 1	o)	. 4 _	25		
	5	Total numbe	erofen	nployees (Part V , line 2a)			5 _	0		
Avanmus a	6	Total numbe	erofvo	lunteers (estimate if necessary) .		6 _	40			
t				ted business revenue from Part VII		7a _	0			
	ь	Net unrelate	ed busi	ness taxable income from Form 990	D-T, line 34		7b			
a l						or Year	Current Year			
	8			I grants (Part VIII, line 1h)		11,175	4,484			
eua	9	-		revenue (Part VIII, line 2g)				(
Revenue	10			ne (Part VIII, column (A), lines 3, 4	•		7,489	3,130		
_	11		-	art VIII, column (A), lines 5, 6d, 8d id lines 8 through 11 (must equal P				(
	12	12)	iiue —ac	ad imes o tillough II (must equal r	art viii, column (A), m	6	18,664	7,614		
	13	Grants and	l sımıla	r amounts paid (Part IX, column (A), lines 1–3)			C		
	14	Benefits pa	aid to o	r for members (Part IX, column (A),	, line 4)			C		
Ø	15	,	therco	mpensation, employee benefits (Pa	rt IX, column (A), lines	5 –		C		
Expenses	16a	10)	al fund	raising fees (Part IX, column (A), lii	ne 11e)					
⊕	ь			penses, Part IX, column (D), line 25 0	\					
Ф	17	•		Part IX, column (A), line 25 <u> </u>			33,683	7,392		
	18	·		add lines 13–17 (must equal Part I			33,683	7,392		
	19			enses Subtract line 18 from line 1			-15,019	222		
s %			·· F			Beginni	ng of Year	End of Year		
9 <u>m</u>	20	Total asse	ts (Par	t X, line 16)			191,083	159,245		
36	21			Part X, line 26)				133,213		
net Assets ta Fund Balances	22		•	d balances Subtract line 21 from li	ne 20		191,083	159,245		
	1100	Signatu					131,003	133,213		
	T			rjury, I declare that I have examined this re	eturn, including accompanying	schedules and s	tatements, and to th	ne best of my knowledge		
				correct, and complete Declaration of prepar						
Plea Sign		****** Signature	of office			2010- Date	01-05			
lere		'			Date					
		JANE CLAI Type or p								
		F			Date	Check If	Preparer's PTIN (See Gen Inst \		
ام: ۱۵		Preparer's signature	DAVID	W SIDES	2010-01-14	self-	Fiehaisi S S I III (;	oce dell Hist)		
Paid Prans	arer's		(· ·	L DELONG & BROWER SO		empolyed 🕨 🦵				
•	arer's Only	Firm's name (if self-employ	ed),	P			EIN Þ			
, (Only	address, and	ZIP + 4	238 HOOVER BLVD SUITE 10	Dhone at 1 12					
				HOLLAND, MI 49423			Phone no 🕨 (61	<u>'</u>		
lav 1	tha TD	S discuss th	ic rotiii	rn with the preparer shown above? (See instructions)			Vas I No		

Cat No 11282Y

Part III Statement of Program Service Accomplishments (See the instructions.)

4e	Total program service expenses \$	7,39	2 Must equal Part IX, Li	ne 25, column (B).	
4d	Other program services (Describe (Expenses \$	in Schedule O) including grants of	f\$) (Revenue \$)
4d	Other program services (Describe	In Schedule O)			
4c	(Code) (Expenses \$	\$	ıncludıng grants of \$) (Revenue \$)
	_				
4b	(Code) (Expenses \$ PROMOTE & MAINTAIN A FAVORABLE BUSIN		including grants of \$) (Revenue \$)
	SILENT OBSERVER HELPS TO SOLVE SERIOU ACTUAL OR SUSPECTED CRIMES	S LOCAL CRIMES BY PRO	VIDING A METHOD FOR PRIVA	IE CIIIZENS IO ANONYMOUSLY	' SHARE EYEWITNESS REPORTS O
4a	(Code) (Expenses \$	\$ 2,034	ıncludıng grants of \$) (Revenue \$)
4	Describe the exempt purpose achieve Section 501(c)(3) and (4) organization others, the total expenses, and reven	ons and 4947(a)(1) t	trusts are required to rep		
	services?				⊤Yes ▼ No
3	If "Yes," describe these new services Did the organization cease conductin		t changes in how it condu	ıcts any program	
2	Did the organization undertake any s the prior Form 990 or 990-EZ? .	ignificant program se	ervices during the year w	nich were not listed on	┌ Yes ┌ No
	Briefly describe the organization's mission CHANNELS INDIVIDUAL, MEMBER, AND CORPO	RATE GIFTS FOR BENEFI	T OF COMMUNITY		

Part IV	Check	dist of	Required	Schedules
	CIICCE	11136 01	NC dull Cd	Schodules

			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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		No
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	3		No
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		No
5	Section $501(c)(4)$, $501(c)(5)$, and $501(c)(6)$ organizations. Is the organization subject to the section $6033(e)$ notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
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.	6		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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	9		No
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt[4]{3}$	10		Νο
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	11		Νο
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.	12	Yes	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		No
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	14b		No
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? <i>If "Yes," complete Schedule F, Part II</i>	15		Νο
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	16		Νο
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νo
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νο
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	21		Νο
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	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		No
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	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
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 I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
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 III	27		No

Part IV Checklist of Required Schedules (Continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	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			
		28a		Νο
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		Νο
С	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		Νο
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νο
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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		No
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	Yes	
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	Yes	
36	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		Νο
37	Did the organization conduct more than 5 percent 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		No

Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal			
	of U.S. Information Returns. Enter -0- if not applicable			
	1a 0			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
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			
Ь	If at least one is reported in 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.	2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this			
	return?	3a		Νo
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		N o
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, <i>Report of Foreign Bank and</i>			
	Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νο
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			
	Tax Shelter Transaction?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6b		
7	were not tax deductible?	OD.		
	Did the organization provide goods or services in exchange for any guid pro quo contribution of \$75 or	7a		No
a	more?	74		
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		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		Νo
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		Νo
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	76		N. a
	required?	7h		No
8	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have			
	excess business holdings at any time during the	8		No
9	year?			
	Did the organization make any taxable distributions under section 4966?	9a		No
a b	Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b		No
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
•	facilities			
11	Section 501(c)(12) organizations Enter			
	Gross income from members or shareholders			
đ	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)....................................			
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	Α.	Governing	Body	and	Management

				Yes	No
	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstant processes, or changes in Schedule O. See instructions.	es,			
1a	Enter the number of voting members of the governing body 1a	25			
Ь	Enter the number of voting members that are independent 1b	25			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with a other officer, director, trustee, or key employee?	- 1	2		Νο
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		3		Νο
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 $^\circ$ filed?	vas	4		Νο
5	Did the organization become aware during the year of a material diversion of the organization's assets? .		5		Νo
6		6		Νo	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of governing body?		7a		Νo
Ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		7b		Νo
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
а	the governing body?		8a	Yes	
b	each committee with authority to act on behalf of the governing body?	· L	8b	Yes	
9a	Does the organization have local chapters, branches, or affiliates?		9a		Νo
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters affiliates, and branches to ensure their operations are consistent with those of the organization?		9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organization must describe in Schedule O the process, if any, the organization uses to review the Form 990		10	Yes	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		11		Νο

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
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			
а	The organization's CEO, Executive Director, or top management official?	15a	Yes	
b	Other officers or key employees of the organization?	15b		No
	Describe the process in Schedule O			
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?	16a		No
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?	16b		

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed MI
- Section 6104 requires an organization to make its Form 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 own website.

 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. See Additional Data Table.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

JANE CLARK 272 E 8TH ST HOLLAND,MI 49423 (616) 392-2389

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

Check this box if the organization did not compensate any officer, director, trustee or key employee

- * List all of the organization's **current** officers, directors, trustees (whether individuals or organizations) and key employees 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, or 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

The check this box in the organization and i	(B) Average hours per week	(C) Position (check all that apply)							(E)	(F)
(A) Name and Title		Individual Trustee or Chrector	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
							-			

Part VII Continued

			(C) Position (check all that apply)							(E)		(F)
	(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	amoun comp fro organiz re	mated t of other ensation m the ation and lated izations
										+		
								 		110.27	4	22 522
1b	Total									110,37	4	23,523
2	Total number of individuals (including							n ¢ 1	OO OOO in reportat	l Na		
2	Total number of individuals (includir compensation from the organization	ng those in 1						n \$1	00,000 in reportat	le	<u> </u>	
2		ng those in 1						n \$1	00,000 in reportab	l Ple	Ye	s No
3		ng those in 1	a) who	recei	ved	mor	e thar	/ee,	or highest compen			
	Did the organization list any former on line 1a? <i>If</i> " <i>Yes</i> ," <i>complete Schedu</i> For any individual listed online 1a, is organization and related organization	officer, directive J for such	a) who	ruste	ved e, k	ey e	employ	/ee, • and	or highest compen	sated employee	3	N o
3	Did the organization list any former on line 1a? If "Yes," complete Schedu For any individual listed online 1a, is organization and related organization individual	officer, directle J for such sthe sum of ns greater the sum of ns greater the sum of the	etor or t individu reporta nan \$15	ruste ual ble c	e, k	ey e	employ ation (es, "co	ee, • and omp	or highest compen other compensation lete Schedule J for s	sated employee In from the uch		
3	Did the organization list any former on line 1a? <i>If</i> " <i>Yes</i> ," <i>complete Schedu</i> For any individual listed online 1a, is organization and related organization	officer, directive J for such as the sum of	a) who	ruste ual ble c 0,00	ved e, k omp 0? ;	ey e ens	employ ation (es," co	ee, and omp	or highest compen other compensation lete Schedule J for s other compensation	sated employee In from the uch	3	N o
3 4 5	Did the organization list any former on line 1a? If "Yes," complete Scheduler For any individual listed online 1a, is organization and related organization individual	officer, directle J for such sthe sum of ns greater the sum of ns	a) who	ruste ual ble c 0,00	ved e, k omp 0? ;	ey e ens	employ ation (es," co	ee, and omp	or highest compen other compensation lete Schedule J for s other compensation	sated employee In from the uch	4	No No
3 4 5	Did the organization list any former on line 1a? If "Yes," complete Schedu For any individual listed online 1a, is organization and related organization individual	officer, directle J for such as the sum of t	a) who	ruste ual ble c 0,00 ensa	omp 0?	ey e eens (f "Y froi	employ ation (es," co many erson	and omp	or highest compension other compensation of the compensation of th	sated employee on from the uch for services	4	No No
3 4 5	Did the organization list any former on line 1a? If "Yes," complete Schedu For any individual listed online 1a, is organization and related organization individual	officer, directle J for such as the sum of t	a) who	ruste ual ble c 0,00 ensa	omp 0?	ey e eens (f "Y froi	employ ation (es," co many erson	and omp	or highest compensation other compensation is a second compensation of the compensatio	sated employee on from the uch for services	3 4 5	N o
3 4 5	Did the organization list any former on line 1a? If "Yes," complete Schedu For any individual listed online 1a, is organization and related organization individual	officer, directle J for such as the sum of t	a) who	ruste ual ble c 0,00 ensa	omp 0?	ey e eens (f "Y froi	employ ation (es," co many erson	and omp	or highest compensation other compensation is a second compensation of the compensatio	sated employee In from the uch for services	3 4 5	No No No
3 4 5	Did the organization list any former on line 1a? If "Yes," complete Schedu For any individual listed online 1a, is organization and related organization individual	officer, directle J for such as the sum of t	a) who	ruste ual ble c 0,00 ensa	omp 0?	ey e eens (f "Y froi	employ ation (es," co many erson	and omp	or highest compensation other compensation is a second compensation of the compensatio	sated employee In from the uch for services	3 4 5	No No No
3 4 5	Did the organization list any former on line 1a? If "Yes," complete Schedu For any individual listed online 1a, is organization and related organization individual	officer, directle J for such as the sum of t	a) who	ruste ual ble c 0,00 ensa	omp 0?	ey e eens (f "Y froi	employ ation (es," co many erson	and omp	or highest compensation other compensation is a second compensation of the compensatio	sated employee In from the uch for services	3 4 5	No No No

Part Statement of Revenue VIII

					(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
<u> </u>	1a	Federated camp	paigns 1a	1				314
gifts, grants ilar amounts	ь	Membership du	es . 1b					
°, g	С	Fundraising eve	ents 1 c					
養	d	Related organiz	ations 1d					
<u>₹</u>	e	Government grants	s (contributions) 1e					
F 호	f	All other contribution	ons, gifts, grants, and 1f	4,484				
章套	g		butions included in					
Contributions, and other simil								
ರ ಕ	h	Total (Add lines	s 1a-1f)		4,484			
<u>a</u>				Business Code				
Ke II	2a							
윤	Ь							
MCe	С							
37	d							
E	e							
Program Serwce Revenue	f	All other progra	im service revenue					
<u>추</u>	g	Total. Add lines	s 2a-2f	 s				
	3		ome (ıncludıng dıvıden					
			nounts)		1,860			1,860
	4		tment of tax-exempt bond	<u>.</u>				
	5	Royalties						
	6a	Gross Rents	(ı) Real	(II) Personal				
	ь	Less rental						
	c	expenses Rental income						
	_	or (loss)	// \	<u> </u>				
	d	Net rental incor	me or (loss) (i) Securities	(II) O ther				
	7a	Gross amount	1,270	(II) O tilel				
		from sales of assets other						
	ь	than inventory Less cost or						
	"	other basis and sales expenses						
	c	Gain or (loss)	1,270					
	d	Net gaın or (los	s)		1,270			1,270
	8a	Gross income fi events (not incl	luding					
Other Revenue		See Part IV, lın	reported on line 1c)					
e B			a					
ā.	ь		penses b					
₽	С		loss) from fundraising	events 🗠				
_	9a	See part IV, lın	ule G if total exceeds					
	ь		a penses b loss) from gaming acti					
	10a	Gross sales of i		villes				
		returns and allo	owances . a					
	b		oods sold b	entory •				
	С	Miscellaneous	loss) from sales of inv	Business Code				
	11a	scenaneous		Dasiness code				
	ь	_						
	c							
		A II a U						
	d	All other revenu	ue s 11a-11d					
	12	Total Revenue	Add lines 1h, 2g, 3, 4	\$. 5. 6d. 7d. 8c.	7,614			3,130
	1 -	9c 10c and 11	le	, -,, , ., ., .,				· ·

Part IX Statement of Functional Expenses

Do	not include amounts reported on lines 6b, 7b,	1	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
LO	Payroll taxes				
L 1	Fees for services (non-employees)				
а	Management				
b	Legal				
c	Accounting				
d	Lobbying				
e					
f	Investment management fees				
g	Other				
2	Advertising and promotion				
3	Office expenses				
4	Information technology				
5	Royalties				
6	Occupancy				
7	Travel				
8	Payments of travel or entertainment expenses for any Federal, state or local public officials				
9	Conferences, conventions and meetings				
0	Interest				
1	Payments to affiliates				
2	Depreciation, depletion, and amortization				
3	Insurance				
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)				
а	DONATIONS	3,330	3,330		
ь	SILENT OBSERVER EXPENSES	2,034	2,034		
c	INVESTMENT EXPENSE	1,278	1,278		
d	SCHOLARSHIPS	750	750		
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	7,392	7,392	0	
26	Joint Costs. Check Tiffollowing SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and	1,352	1,532		

Part X	Balance	Sheet

			(A) Beginning of year		(E End of	
	1	Cash—non-interest-bearing	49.931	1	Ella ol	48,416
	2	Savings and temporary cash investments	40,001	2		
	3	Pledges and grants receivable, net		3		
	4	Accounts receivable, net		4		
	5			4		
		Receivables from current and former officers, directors, trustees, key employees or other related parties <i>Complete Part II of Schedule L</i>		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 sale or use		8		
ţ	9	Prepaid expenses and deferred charges		9		
Assets	10a	Land, buildings, and equipment cost basis				
*	b	Less accumulated depreciation Complete Part VI of Schedule D	-	10c		
	11	Investments—publicly traded securities	141,152	11		110,829
	12	Investments—other securities See Part IV, line 11 <i>Complete Part VII of Schedule D</i>		12		
	13	Investments—program-related See Part IV, line 11 Complete Part VIII of Schedule D .		13		
	14	Intangible assets		14		
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule		15		_
	16	D Total assets. Add lines 1 through 15 (must equal line 34)	191.083	16		159,245
	17	Accounts payable and accrued expenses .	101,000	17		100,240
	18	Grants payable		18		
	19	Deferred revenue		19		
	20	Tax-exempt bond liabilities		20		
S.	21	·		21		
Liabilities	22	Escrow account liability Complete Part IV of Schedule D		21		
ja.		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		25		
	26	Total liabilities. Add lines 17 through 25	0	26		
	- -	Organizations that follow SFAS 117, check here ▶ ▼ and complete lines 27				
ses		through 29, and lines 33 and 34.				
ank	27	Unrestricted net assets	177,401	27		144,863
Balance	28	Temporarily restricted net assets	13,682	28		14,382
N	29	Permanently restricted net assets		29		
Fund		Organizations that do not follow SFAS 117, check here ► ☐ and complete lines 30 through 34.				
or,	30	Capital stock or trust principal, or current funds		30		
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31		
355	32	Retained earnings, endowment, accumulated income, or other funds		32		
	33	Total net assets or fund balances	191,083	33		159,245
Net	34	Total liabilities and net assets/fund balances	191,083			159,245
	1 57	Total habilities and net assets/fully bulghess in it is it is	101,000			,2-10
Pa	rt XI	Financial Statements and Reporting			Yes	No

Seek VI	Financial	Statements		Danastina
yarr XI	Financial	Statements	ana	Renortina

1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νο
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
С	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	Yes	
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		Νο
b	If "Yes," did the organization undergo the required audit or audits?	3b		

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As Filed Data -

DLN: 93493014009000

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

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.

Open to Public Inspection

HOLLAN FOUND		EA CHAMBER OI	FCOMMERCE					38	-2476780)		
Par	tΙ	Reason	for Public Cl	harity Status (to be co	mpleted	by all or	ganızatıo	ns) (See	Instruct	ions)		
The or	ganız			ation because it is (Please						•		
1	Γ	A church, c	A church, convention of churches, or association of churches described in Section 170(b)(1)(A)(i).									
2	Γ	A school de	escribed in Sect	ion 170(b)(1)(A)(ii). (Attac	ch Schedu	ıle E)						
3	\sqcap	A hospital	or a cooperative	e hospital service organizati	on describ	bed in Sec	tion 170(E	o)(1)(A)(i	ii). (Attac	h Schedul	le H)	
4	Γ	A medical i	research organi	zation operated in conjuncti	on with a l	hospital de	escribed ii	Section	170(b)(1)	(A)(iii). E	nter the	
		hospital's r	name, city, and	state								
5	Γ	An organiza	ation operated f	or the benefit of a college or	universit	y owned o	r operated	by a gove	ernmental	unit desci	rıbed ın	
		Section 170	D(b)(1)(A)(iv).	(Complete Part II)								
6	Γ	A federal, s	tate, or local go	overnment or governmental	unıt descr	ıbed ın Se	ct ion 170((b)(1)(A)	(v).			
7	굣	Anorganiza	ation that norma	ally receives a substantial p	art of its s	support fro	m a govei	rnmental u	ınıt or fron	n the gene	ral public	
		described i	n Section 170(b	o)(1)(A)(vi) (Complete Par	tII)							
8	Γ	A communi	ty trust describ	ed in Section 170(b)(1)(A)	(vi) (Com	plete Par	tII)					
9	Γ	Anorganiza	ation that norma	ally receives (1) more than	331/3% o	fits supp	ort from co	ontribution	ns, membe	rship fees	, and gro	ss
		receipts fro	m activities rel	ated to its exempt functions	s—subject	to certair	exceptio	ns, and (2) no more	than 331/	'3% of	
		ıts support	from gross inve	estment income and unrelate	ed busines	s taxable	ıncome (l	ess sectio	on 511 tax	k) from bus	sınesses	
		acquired by	the organization	on after June 30, 1975 See	Section 5	09(a)(2).	(Complete	e Part III)			
10	Γ	An organiza	atıon organızed	and operated exclusively to	test for p	ublic safe	ty See Se	ct ion 509((a)(4). (Se	ee instruct	tions)	
11	Γ	An organiza	atıon organızed	and operated exclusively fo	r the bene	fit of, to p	erform the	functions	of, or to o	arry out t	he purpos	ses of
				orted organizations describe						Section 5	09(a)(3).	Check
		a T		type of supporting organiza		omplete li - Function			h d	Γ τ _{νη} ς	III - Oth	
•	_		•	rtify that the organization is								
е	,	•	- '	agers and other than one or			•			•	•	
		section 50		- -		,					()(-	-,
f		_		d a written determination fro	m the IRS	that it is	a Type I,	Type II o	r Type III	supportin	ng organiz	atio <u>n,</u>
_		check this		the ergonization accepts	danu aift.	ar aantribi	itian fram	anu af tha				ı
g		following pe		as the organization accepted	u any gni	סו כסוונווטי	ation from	any or the	:			
				r indirectly controls, either a	alone or to	gether wi	th persons	describe	d ın (ıı)		Yes	No
		and (III) bel	ow, the governi	ng body of the the supported	d organiza	tion?				11g	(i)	
		(ii) a family	/ member of a p	erson described in (i) above	?					11g(ii)	
		(iii) a 35%	controlled enti	ty of a person described in (i) or (ii) al	bove?				11g(iii)	
h		Provide the	following inforr	nation about the organizatio	ns the org	janization	supports				'	
		ame of	(ii) EIN	(iii) Type of organization	(iv) I	s the	(v) Did y	ou notify	(vi) I	s the	(vii) Am	
		orted		(described on lines 1-9		ation in	_	nization		ation in	supp	ort?
Organization above or IRC section col (i) listed in in col (i) of your col (i) organized (See Instructions)) your governing support? in the U.S.?												
document?												
	Yes No Yes No											

Total

Support Schedule for Organizations Described in IRC 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.)

	(Complete only if you chec	ked the box or	n line 5, /, or	8 of Part I.)			
P	ublic Support						
Cal	endar 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")	29,543	25,002	13,842	9,975	5,754	84,116
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 line 1-3	29,543	25,002	13,842	9,975	5,754	84,116
5	The portion of total contribution by each						
	person (other than a government unit or publicly supported organization) included on line 1 that exceed 2% of the amount shown on line 11, column (f)						
6	Public Support subtract line 5 from line						84,116
T	otal Support					l	
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	A mounts from line 4	29,543	17,491	13,842	9,975	5,754	84,116
8	Gross income from interest, dividends,	,	,	,	,	,	,
	payments received on securities loans, rents, royalties and income from similar sources	2,813	17,491	7,526	8,100	1,860	37,790
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)						121,906
12	Gross receipts from related activities, etc	(See instruction	s)			12	
13 C	First Five Years. If the Form 990 is for the organization, check this box and stop here omputation of Public Support Perc		st, second, third	l, fourth, or fifth t	tax year as a 50	D1(c)(3)	▶ ┌
14	Public Support Percentage for 2008 (line 6	column (f) dıvıd	ed by line 11 co	lumn (f))		14	69.000 %
15	Public Support Percentage for 2007 Sched	ule A , Part IV - A	, lıne 26f			15	73.945 %
	33 1/3% Test - 2008. If the organization did and stop here. The organization qualifies as 33 1/3% Test - 2007. If the organization did	s a publicly supp d not check the b	orted organizatio oox on line 13 oi	on 16a, and line 1	·		
	box and stop here. The organization qualifies 10% Facts and Circumstances Test - 2008. more, and if the organization meets the "facts and circumstances Test - 2007. more, and if the organization meets the "facts and circumstances Test - 2007. more, and if the organization meets the "facts and circumstances Test - 2007.	If the organizations to the sand circumstications and circumstications a	on did not check ances" test, che corganization qu on did not check ances" test, che	a box on line 13 ck this box and ialifies as a publ a box on line 13 ck this box and	stop here. Explictly supported of 3, 16a, 16b, or 3 stop here. Expl	ain in Part IV ho organization 17a and line 15 ain in Part IV ho	ow the Francis 10% or ow
18	Private Foundation. If the organization did						- -,

Pa	Support Schedule for On (Complete only if you ched				(2)		
	ction A. Public Support		_	,			
Cale	ndar 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						
2	include any "unusual grants ") Gross receipts from admissions,						
2	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						
6	Total Add lines 1-5						
7a	A mounts included on lines 1, 2, and 3						
	received from disqualified persons Amounts included on lines 2 and 3						
D	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						
С	Total of lines 7a and 7b						
8	Public Support (Substract line 7c from						
_	line 6)						
То	tal Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	A mounts 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 30 June, 1975		+				
С	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)						
13	Total Support (Add lines 9, 10c, 11 and						
	12)						
14	First Five Years If the Form 990 is for the	organızatıon's fı	rst, second, thir	d, fourth, or fifth	ntax year as a 5	01(c)(3) organı	zation,
	check this box and stop here						▶ □
	manufaction of Dublic Compact Days						
15	mputation of Public Support Perc Public Support Percentage for 2008 (line		dod by line 12 o	olumn (fl)		T 4= T	
			•	.orumin (1))		15	
16	Public Support Percentage for 2007 Sche	dule A , Part IV -	A, line 27g			16	
		D					
Co	mputation of Investment Income Investment Income Percentage for 2008 (ne 13 column /f	<u> </u>	17	
				-	"	17	
ΤQ	Investment Income Percentage from 2007	ocnequie A , Pa	TLIV-A, IINE 2/	H		18	

19a 33 1/3% 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 **33 1/3% 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

Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2008

▶□

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

Schedule A (Form 990 or 990-EZ) 2008

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public

itorria	TO COLLEGE COLLEGE		Ziiopediioii
HOL	me of the organization LAND AREA CHAMBER OF COMMERCE INDATION		Employer identification number 38-2476780
Pa	rt I Organizations Maintaining Donor A organization answered "Yes" to Form 99		
	organization answered Tes to Form 5.	(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 adv funds are the organization's property, subject to the	-	oradvised Yes V No
6	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the bei		·
Dai	impermissible private benefit? rt II	if the organization answered "Ves" t	
1	Purpose(s) of conservation easements held by the of Preservation of land for public use (e.g., recreated Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a quality	rganization (check all that apply) ion or pleasure) Preservation of an Preservation of ce	historically importantly land area
	on the last day of the tax year		
			Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easement	ts	2b
C	Number of conservation easements on a certified h	istoric structure included in (a)	2c
d	Number of conservation easements included in (c)	acquired after 8/17/06	2d
3	Number of conservation easements modified, transf	erred, released, extinguished, or terminate	ed by the organization during
	the taxable year 🕨		
4	Number of states where property subject to conserv	ation easement is located ►	
5	Does the organization have a written policy regardin enforcement of the conservation easements it holds		ations, and Yes V No
6	Staff or volunteer hours devoted to monitoring, inspe	ecting and enforcing easements during the	year 🕨
7	A mount of expenses incurred in monitoring, inspect	ng, and enforcing easements during the ye	ear ► \$
8	Does each conservation easement reported on line 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	2(d) above satisfy the requirements of sec	tion Yes V No
9	In Part XIV, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation ease	the footnote to the organization's financial	•
Par	Complete if the organization answered	"Yes" to Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fil	l for public exhibition, education or researc	ch in furtherance of public service,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these item	public exhibition, education, or research in	•
	(i) Revenues included in Form 990, Part VIII, line 1	L	▶ \$
	(ii) Assets included in Form 990, Part X		► \$
2	If the organization received or held works of art, hist following amounts required to be reported under SFA		or financial gain, provide the
а	Revenues included in Form 990, Part VIII, line 1		► \$
b	Assets included in Form 990, Part X		► \$

art	Organizations Maintaining Collections of A	rt, His	tori	<u>ical Treasur</u>	es, or Ot	<u>ther</u>	<u> Similar</u>	Assets	(contını	ıed)
3	Using the organization's accession and other records, check a items (check all that apply)	any of th	ne fol	lowing that are	a sıgnıfıca	nt us	e of its col	lection		
а	Public exhibition	d	Γ	Loan or excha	ange progra	ms				
b	Scholarly research	e	Γ	Other						
С	Preservation for future generations									
ı	Provide a description of the organization's collections and exp Part XIV	olaın hov	w the	y further the or	ganızatıon'	sexe	∍mpt purpo	se in		
5	During the year, did the organization solicit or receive donation assets to be sold to raise funds rather than to be maintained a						lar	☐ Yes	. F.	lo
ar	Trust, Escrow and Custodial Arrangements				ızatıon ar	ารพย	red "Yes"	' to Form	990,	
_	Part IV, line 9, or reported an amount on Form									
•	Is the organization an agent, trustee, custodian or other interrincluded on Form 990, Part X?	mediary	TOT C	ontributions or	otnerasse	ets n	ot	┌ Yes	· F	lo
b	If "Yes," explain why in Part XIV and complete the following ta	able								
								A mount		
5	Beginning balance					1c				
d	Additions during the year					1d				
е	Distributions during the year					1e				
F	Ending balance					1f				
1	Did the organization include an amount on Form 990, Part X, I	ıne 21?						☐ Yes	· F	lo
)	If "Yes," explain the arrangement in Part XIV									
a	rt V Endowment Funds. Complete if the organizati	on ans	wer	ed "Yes" to Fo	orm 990,	Part	IV, line 1	LO.		
	(a)Current Year	(b)) Prior	Year (c)Two	Years Back	(d)⊤	hree Years Ba	ack (e) Fou	r Years B	ack_
3	Beginning of year balance	_								
b	Contributions	_								
3	Investment earnings or losses	_								
t	Grants or scholarships	_								
2	Other expenditures for facilities and programs	_								
	Administrative expenses	_								
J	End of year balance	_								
	Provide the estimated percentage of the year end balance held	d as								
1	Board designated or quasi-endowment 🕨									
)	Permanent endowment 🕨									
:	Term endowment 🕨									
1	Are there endowment funds not in the possession of the organ organization by	ıızatıon	that	are held and ad	mınıstered	for t	he	Lv.	N.	_
	(i) unrelated organizations						г	3a(i) Ye	No No	_
	(ii) related organizations						-	3a(ii)	No	_
,	If "Yes" to 3a(II), are the related organizations listed as requi							3Ь	No	_
	Describe in Part XIV the intended uses of the organization's e	ndowme	ent fu	ınds			_		•	_
: T	t VI Investments—Land, Buildings, and Equipm	i ent. S	ee F	orm 990, Par	t X, line :	10.				
	Description of investment			(a) Cost or other asis (investment)	(b)Cost or basis (oth		(c) Depre	ciation (d	l) Book v	alue
	Land		\top							
,	Buildings									
:	Leasehold improvements									
d	Equipment									
e	Other									
	I Add Imag 1s 1s (Column (d) should soud Form 000 Park X sal	luman (D)	1 1	10(=)	1		<u> </u>			

Part VII	Investments-Other Securities. See	Form 990, Part X, line 1	2.	
	(a) Description of security or cateory (including name of security)	(b)Book value		d of valuation ·year market value
Financial d	erivatives and other financial products			
	eld equity interests			
Other				
Total. (Colu	mn (b) should equal Form 990, Part X, col (B) line 12) 🕨			
Down VIII	Investments Duesus Polated Co	a Farm OOO Dart V June	12	
Part VIII	Investments—Program Related. Se			d of valuation
	(a) Description of investment type	(b) Book value		year market value
Total (Colu	mn (b) should equal Form 990, Part X, col (B) line 13)			
Part IX		ne 15.		
	(a) Descri			(b) Book value
Total. (Colu	ımn (b) should equal Form 990, Part X, col.(B) line .	15.)		
	Other Liabilities. See Form 990, Part 3			
	(a) Description of Liability	(b) A mount		
Federal Inc	come Taxes			
]	
]	
]	
			1	
			1	
			1	
-			1	
			1	
Total. (Colum	mn (b) should equal Form 990, Part X, col (B) line 25) 🕨		1	
,,	· · · · · · · · · · · · · · · · · · ·	1		

Part	XI Reconciliation of C	hange in Net Assets from Fori	m 990	to F	inancial Stateme	nts	
1	Total revenue (Form 990, Part	VIII, column (A), line 12)				1	7,614
2	Total expenses (Form 990, Par	t IX, column (A), line 25)				2	7,392
3	Excess or (deficit) for the year	Subtract line 2 from line 1				3	222
4	Net unrealized gains (losses) o	n ınvestments				4	-32,060
5	Donated services and use of fac	cilities				5	
6	Investment expenses					6	
7	Prior period adjustments					7	
8	Other (Describe in Part XIV)					8	
9	Total adjustments (net) Add Iir	nes 4 - 8				9	-32,060
10		per financial statements Combine line	s 3 and	I 9		10	-31,838
Part		evenue per Audited Financial			ts With Revenue p	er Re	turn
1	•	r support per audited financial stateme				1	-24,446
2	A mounts included on line 1 bu	t not on Form 990, Part VIII, line 12					
а	Net unrealized gains on invest	ments	.	2a	-32,060		
b	Donated services and use of fa	acılıtıes	. [2b		1	
c	Recoveries of prior year grants		. [2c		1	
d	Other (Describe in Part XIV)		. [2d]	
e	Add lines 2a through 2d .					2e	-32,060
3	Subtract line ${f 2e}$ from line ${f 1}$.					3	7,614
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line 1					
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b	. L	4a			
b	Other (Describe in Part XIV)			4b			
c	Add lines 4a and 4b					4c	
5		d 4c. (This should equal Form 990, Par				5	7,614
Part		xpenses per Audited Financia			nts With Expenses	s per l	
1		r audited financial statements				1	7,392
2		it not on Form 990, Part IX, line 25		I	I		
a		acılıtıes		2a			
b	· -			2b		-	
с		, Part IX, line 25		2c		-	
d	Other (Describe in Part XIV)		•	2d		┨. │	
е -	Add lines 2a through 2d					2e	
3	Subtract line 2e from line 1.					3	7,392
4		0, Part IX, line 25, but not on line 1:		ا م	I		
а		, ,		4a		-	
b	Other (Describe in Part XIV)		•	4b		ا ہے ا	
с -	Add lines 4a and 4b					4c	
5 Dags	Supplemental Inf	nd 4c. (This should equal Form 990, Pa	irt I, iin	e 18)		5	7,392
Com	plete this part to provide the des	scriptions required for Part II, lines 3, , Part XII, lines 2d and 4b, and Part XI				art XIV ,	, lines 1b and 2b,
	Ident if ier	Return Reference			Explanat	ion	

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As Filed Data -

DLN: 93493014009000

SCHEDULE 0

Department of the Treasury
Internal Revenue Service

(Form 990)

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

Open to Public Inspection

Name of the organization HOLLAND AREA CHAMBER OF COMMERCE FOUNDATION Employer identification number

38-2476780

Identifier Return Reference		Explanation						
ORGANIZATION'S PROCESS USED TO REVIEW FORM 990	1	A COPY OF THE FORM 990 IS DISTRIBUTED AND REVIEWED BY THE EXECUTIVE COMMITTEE IN JANUARY PRIOR TO FILING						

ldentifier	Return Reference	Explanation
ENFORCEMENT OF CONFLICTS POLICY	FORM 990, PAGE 6, PART VI, LINE 12C	ALL DIRECTORS, OFFICERS, AND STAFF WILL SIGN A CONFLICT OF INTEREST POLICY IN JANUARY, AND THESE WILL BE REVIEWED FOR ANY CONFLICTS BY THE PRESIDENT

ldentifier	Return Reference	Explanation
COMPENSATION PROCESS FOR TOP OFFICIAL	FORM 990, PAGE 6, PART VI, LINE 15A	N/A - NO EMPLOYEES ARE COMPENSATED DIRECTLY FROM THIS ORGANIZATION

ldentifier	Return Reference	Explanation
GOVERNING DOCUMENTS DISCLOSURE EXPLANATION	FORM 990, PAGE 6, PART VI, LINE 19	THE FORM 990 IS AVAILABLE TO THE PUBLIC ON THE INTERNET AT WWW GUIDESTAR ORG OTHER GOVERNING DOCUMENTS AVAILABLE UPON REQUEST

DLN: 93493014009000

2008

OMB No 1545-0047

Open to Public Inspection

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

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

Related Organizations and Unrelated Partnerships

Name of the organization **Employer identification number** HOLLAND AREA CHAMBER OF COMMERCE FOUNDATION 38-2476780 Part I Identification of Disregarded Entities

(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public chanty status (if section 501(c)(3))	(F) Direct controlling entity
HOLLAND AREA CHAMBER OF COMMERCE 272 E 8TH ST HOLLAND, MI49423 38-0655230		MI	501		NA
For Demonstrate Designation Asta Nation and the Treatment of the Form 200		C-+ N- F012F			C-lI-I- D (F 000) 2000

(A) Name, address, and EIN of related organization	Prim	(B) nary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	incom	(E) lominant le(related, lestment, related)	Share	(F) e of total income	(G) Share of end-of- year assets	(H Disprop allocat	l) ortionate tions?	(I) Code V—UBI amount on Box 20 of K-1	Gene mana part	agıng
										Yes	No		Yes	No
Part IV Identification of R	Related	l Organizations	Taxable as	a Corporation	ı or Tr	ust								
(A) Name, address, and EIN of related organ		(B) Primary activity		(C) Legal domicile (state or foreign country)		(D) Direct contro	olling	(E) Type of entity (C corp, S corp or trust)	(F) Share of total income	end	(G) hare of l-of-yea assets	(H) Percentage r ownership		

Part V Transactions with Related Organizations
--

Schedule	R (Form 990) 2008				Page
Part V	Transactions with Related Organizations				
Not	e. Complete line 1 if any entity is listed in Parts II, III or IV			Υe	es N
1 During	the tax year, did the orgranization engage in any of the following transactions with	h one or more related organizations listed in Parts II-I\	17		
a Red	eipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		1a		N-
b Gif	, grant, or capital contribution to other organization(s)		1b	Ye	es es
c Gift	, grant, or capital contribution from other organization(s)		1c		N
d Loa	ns or loan guarantees to or for other organization(s)		1d	1	N
e Loa	ns or loan guarantees by other organization(s)		1e	\perp	N
f Sal	e of assets to other organization(s)		1f		N
g Pui	chase of assets from other organization(s)		1 g	,	N
h Ex	hange of assets		1h	1	N
i Lea	se of facilities, equipment, or other assets to other organization(s)		<u>1i</u>	lacksquare	N
j Lea	se of facilities, equipment, or other assets from other organization(s)		1j	+	N
k Per	formance of services or membership or fundraising solicitations for other organiza	ation(s)	1k		N
l Per	ormance of services or membership or fundraising solicitations by other organizat	tion(s)	11		N
m Sha	ring of facilities, equipment, mailing lists, or other assets		1m	a T	N
n Sha	aring of paid employees		1n	lacksquare	N
o Rei	mbursement paid to other organization for expenses		10	Ye	es
p Rei	mbursement paid by other organization for expenses		1р		N
q Otl	ner transfer of cash or property to other organization(s)		1q	+	No
-	er transfer of cash or property from other organization(s)		1r	_	N
	ne answer to any of the above is "Yes," see the instructions for information on who	must complete this line, including covered relationship	os and transaction thresholds		
	(A)	(B)	(c)		
	Name of other organization(s)	Transaction type(a-r)	Amount Involved		

	(A) Name of other organization(s)	(B) Transaction type(a-r)	(C) Amount Involved
(1)	HOLLAND AREA CHAMBER OF COMMERCE	В	4,080
(2)	HOLLAND AREA CHAMBER OF COMMERCE	0	884
(3)			
(4)			
(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

									_	
(A) Name, address, and EIN of entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Are all partners section 501(c)(3) organizations?		(E) Share of end-of-year assets	(F) Disproprtionate allocations?		20 of K-1		r J
			Yes	No		Yes	No		Yes	No
			•			•	•	Sabadula	D / Form	000) 2000

HOLLAND AREA CHAMBER OF COMMERCE FINANCIAL STATEMENTS AND SUPPLEMENTARY INFORMATION YEAR ENDED AUGUST 31, 2009

DELONG & BROWERP.C.

CERTIFIED PUBLIC ACCOUNTANTS ■ FINANCIAL CONSULTANTS

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INDEPENDENT AUDITOR'S REPORT

Holland, Michigan December 3, 2009

Board of Directors Holland Area Chamber of Commerce Holland, Michigan

We have audited the accompanying combining statement of financial position of Holland Area Chamber of Commerce as of August 31, 2009, and the related combined statements of activities and cash flows for the year then ended. These financial statements are the responsibility of the Chamber's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Holland Area Chamber of Commerce as of August 31, 2009, and the changes in its net assets and its cash flows for the year then ended in conformity with accounting principles generally accepted in the United States of America.

Our audit was made for the purpose of forming an opinion on the basic financial statements taken as a whole. The supplementary information is presented for purposes of additional analysis and is not a required part of the basic financial statements. The schedules contained on pages 12 through 16 are presented only for supplementary analysis purposes. Such information has been subjected to the auditing procedures applied in the audit of the basic financial statements and we are not aware of any material modifications that should be made thereto. The supplementary information, in our opinion, is fairly stated in all material respects in relation to the basic financial statements taken as a whole.

DELONG & BROWER, P.C.

Defong . Brown Pc

Certified Public Accountants

HOLLAND AREA CHAMBER OF COMMERCE COMBINING STATEMENT OF FINANCIAL POSITION AUGUST 31, 2009

ASSETS	 	 	_	Total All Funds
CURRENT ASSETS				
Cash and Cash Equivalents	\$ 616,855	\$ 48,416	\$	665,271
Accounts Receivable (net of allowances of \$ 30,992)	64,914	-		64,914
Accrued Interest Receivable	6,305	-		6,305
Prepaid Expenses	21,905	-		21,905
Total Current Assets	709,979	48,416		758,395
PROPERTY, PLANT AND EQUIPMENT				
Land	75,000	•		75,000
Building	447,257	-		447,257
Building Improvements	102,761	-		102,761
Furniture and Equipment	212,196	-		212,196
Software	38,390	•		38,390
Less: Accumulated Depreciation	 (579,818)	 -		(579,818)
Net Book Value	 295,786	 -		295,786
OTHER ASSET				
Investments held by Community Foundation	 -	 110,829		110,829
TOTAL ASSETS	\$ 1,005,765	\$ 159,245	\$	1,165,010
LIABILITIES AND NET ASSETS				
CURRENT LIABILITIES				
Accounts Payable	\$ 27,782	\$ -	\$	27,782
Accrued Liabilities	5,180	•		5,180
Deferred Revenue	94,127	-		94,127
Unredeemed Gift Certificates	 44,550	-		44,550
Total Current Liabilities	 171,639	-		171,639
OTHER LIABILITY				
Long-Term Deferred Revenue, net of current portion	 8,344	<u> </u>		8,344
NET ASSETS Unrestricted				
Undesignated	529,996	144,863		674,859
Net Investment in Property, Plant, and Equipment	295,786	-		295,786
Total Unrestricted Net Assets	825,782	 144,863		970,645
Temporarily Restricted	 	 14,382		14,382
Total Net Assets	825,782	159,245		985,027
TOTAL LIABILITIES AND NET ASSETS	\$ 1,005,765	\$ 159,245	\$	1,165,010

The accompanying notes are an integral part of these statements.

HOLLAND AREA CHAMBER OF COMMERCE COMBINED STATEMENT OF ACTIVITIES YEAR ENDED AUGUST 31, 2009

SUPPORT AND REVENUE	<u>Unrestricted</u>	Temporarily Restricted	<u>Total</u>
Contributions	\$ 250	\$ 4,234	\$ 4,484
Membership Investment and Promotions	489,486	· •	489,486
Conferences and Meetings	276,931	-	276,931
Publications and Advertising	31,021	-	31,021
Interest Income	15,288	-	15,288
Management Reimbursements	248,566	-	248,566
Unrealized Loss on Investment	(32,060)	-	(32,060)
Realized Gain on Investment	1,270	-	1,270
Miscellaneous Income	29,909	-	29,909
Net Assets Released from Restrictions	3,534	(3,534)	
Total Support and Revenue	1,064,195	700	1,064,895
EXPENSES			
Program Services			
Promotion and Extension	9,966	-	9,966
Membership Meetings	33,723	-	33,723
Business and Community Development	289,008	-	289,008
Publications	2,215		2,215
Total Program Services	334,912	-	334,912
Supporting Services	792,363		792,363
Total Expenses	1,127,275	-	1,127,275
INCREASE (DECREASE) IN NET ASSETS	(63,080)	700	(62,380)
NET ASSETS - SEPTEMBER 1, 2008	1,033,725	13,682	1,047,407
NET ASSETS - AUGUST 31, 2009	\$ 970,645	\$ 14,382	\$ 985,027

HOLLAND AREA CHAMBER OF COMMERCE COMBINED STATEMENT OF CASH FLOWS YEAR ENDED AUGUST 31, 2009

OPERATING ACTIVITIES	
Decrease in Net Assets	\$ (62,380)
Adjustments to Reconcile Change in Net Assets to	
Net Cash Provided by Operating Activities	
Depreciation and Amortization	50,716
Unrealized Loss on Investments	32,060
Realized Gain on Investments	(1,270)
(Increase) Decrease in Operating Assets:	
Accounts Receivable	(34,461)
Accrued Interest Receivable	(6,305)
Prepaid Expenses	1,529
Increase (Decrease) in Operating Liabilities:	
Accounts Payable	841
Accrued Liabilities	(1,801)
Deferred Revenue	(6,884)
Unredeemed Gift Certificates	 44,518
Net Cash Provided by Operating Activities	 16,563
INVESTING ACTIVITIES	
Purchase of Investment	(466)
Additions to Property, Plant and Equipment	 (2,953)
Net Cash Used For Investing Activities	 (3,419)
FINANCING ACTIVITIES	
Decrease in Long-Term Deferred Revenue	 (3,166)
NET INCREASE IN CASH	9,978
CASH AT BEGINNING OF PERIOD	 655,293
CASH AT END OF PERIOD	\$ 665,271

NOTE 1: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Holland Area Chamber of Commerce (the "Chamber") is a non-profit organization, which seeks to build an exceptional community, advocate for a strong business climate, and provide value to our members.

Basis of Accounting

Assets, liabilities, revenue and expenses are recognized on the accrual basis of accounting. Membership investment and promotions are recognized as revenue when billed. Members are billed at various times during the year depending on the anniversary date of the member's original membership date.

Basis of Presentation

The Chamber presents its financial position and activities according to three classes of net assets unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets.

Contributions

Contributions received are recorded as unrestricted, temporarily restricted, or permanently restricted support, depending on the existence or nature of any donor restrictions. Support that is restricted by the donor is reported as an increase in unrestricted net assets if the restriction expires in the reporting period in which the support is recognized. All other donor-restricted support is reported as an increase in temporarily or permanently restricted net assets depending on the nature of the restriction. When a restriction expires (that is, when a stipulated time restriction ends or purpose restriction is accomplished), temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions.

Cash and Cash Equivalents

The Chamber considers all highly liquid investments with an original maturity of three months or less to be cash or cash equivalents.

Property, Plant, and Equipment

Property, plant, and equipment are stated at cost. Major improvements and additions are capitalized, while ordinary maintenance and repairs are expensed. Management annually reviews these assets to determine whether carrying values have been impaired. Depreciation is computed using the straight-line method over the estimated useful lives of the related assets, which range from 5 to approximately 30 years.

Allowance for Uncollectible Dues

Accounts receivable are due from business and professional members in the community. The Chamber maintains reserves for potential credit losses and such losses, in the aggregate, have not exceeded management's expectations.

NOTE 1: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Use of Estimates

The preparation of the financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and the disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of income and expenses during the reporting period. Actual results could differ from those estimates.

Donated Services and Materials

No amounts have been reflected in the financial statements for donated services, as there is no basis upon which to measure the value of these services, however, a substantial number of volunteers have donated significant amounts of their time in connection with the Chamber's program services. In addition, various materials have been donated to be given away as raffle or door prizes. These amounts have not been valued as they are not deemed material.

Income Taxes

The Chamber is exempt from federal income taxes under Internal Revenue Code Section 501(c)(6) Any unrelated business income generated by the Chamber is subject to income tax. The Chamber Foundation is exempt from federal income taxes under Internal Revenue Code Section 501(c)(3)

NOTE 2: DEPOSITS

At August 31, 2009, the carrying amount of the Chamber's deposits with financial institutions, excluding petty cash, was \$ 664,855 and the bank balance was \$ 684,893. The balance of the petty cash account at August 31, 2009 was \$ 416. Of the bank balance, \$ 679,103 was covered by Federal Depository Insurance and \$ 5,790 was uninsured and uncollateralized. All deposits are carried at cost.

A summary of the deposits and petty cash in total by type are:

	arrying Amount	Bank <u>Balance</u>		
Checking Accounts and Petty Cash	\$ 96,861	\$	110,636	
Money Market Accounts	288,410		288,410	
Certificates of Deposit	 280,000		285,847	
Total Cash and Cash Equivalents	\$ 665,271	\$	684,893	

NOTE 3: PROPERTY, PLANT, AND EQUIPMENT

The following is a summary of property, plant, and equipment and related accumulated depreciation as of August 31, 2009:

Land Building Building Improvements Furniture, fixtures and equipment Software Total Property, Plant and Equipment Less accumulated depreciation	\$	75,000 447,257 102,761 212,196 38,390 875,604 579,818
Less accumulated depreciation Net property, plant and equipment	<u> </u>	<u>579,818</u> <u>295,786</u>

Depreciation expense was \$50,716 for the year ended August 31, 2009.

NOTE 4: INVESTMENTS AND FAIR VALUE OF FINANCIAL INSTRUMENTS

During February 2005, the Chamber Foundation established the Holland Area Chamber of Commerce Foundation Founding Fund at The Community Foundation of the Holland/Zeeland Area with an initial investment of \$135,000. The balance in this fund is reported at fair market value, as calculated and reported by the Community Foundation, based on quoted market prices. The investments are a portion of the total portfolio held by the Community Foundation which was valued at \$32,201,839 at August 31, 2009. The Chamber Foundation's share of the portfolio as of August 31, 2009 is as follows:

			Fair		Carrying	
		Cost	<u>Value</u>	<u>Value</u>		
Unrestricted ⁻						
Community Foundation	\$	122,539	\$ 110,829	\$	110,829	

The following schedule summarizes the investment return and its classification in the statement of activities for the year ended August 31, 2009.

	<u>Unrestricted</u>			orarily ricted	nently ricted	<u>Total</u>		
Ordinary Income	\$	1,746	\$	-	\$ •	\$	1,746	
Realized Gains Unrealized Losses		1,270 (32,060)			<u>-</u>		1,270 (32,060)	
Total Investment Return	\$	(29,044)	\$	_	\$ 	\$	(29,044)	

NOTE 4: INVESTMENTS AND FAIR VALUE OF FINANCIAL INSTRUMENTS (CONTINUED)

Financial Instruments

The following methods and assumptions were used by the Chamber in estimating its fair value disclosures for financial instruments:

- Cash and cash equivalents: The carrying amounts reported in the statement of financial position approximate fair values because of the short maturities of those instruments.
- Long-term and endowment investments: The fair values of investments are based on quoted market prices for those or similar investments

Fair Value Measurements

The following table presents the Chamber's fair value hierarchy for the financial assets measured at fair value on a recurring basis:

Fair Value Measurements at Reporting Date Using:

	F	air Value	Quoted Prices In Active Markets For Identical Assets (Level 1)		witl C	ernal Models n Significant observable Market arameters (Level 2)	Internal Models with Significant Unobservable Market Parameters (Level 3)	
Short-term Investments Long-term Investments	\$	8,533 102,296	\$	8,533 46,245	\$	55,023	\$	1,028
Endowment Investments		-		-		•		-

NOTE 5: LEASES

The Chamber leased two copy machines requiring monthly payments of \$ 168 and \$ 323 plus a per copy charge. The leases are scheduled to end in December, 2010.

Future minimum lease payments are as follows:

Year Ended	_ Amount					
August 31, 2010	\$ 5,892					
August 31, 2011	1,964					

NOTE 6: DEBT

The Chamber has available a \$ 200,000 unsecured revolving line of credit which expires March 1, 2010. Interest is charged on borrowings at 1/2% under the bank's prime rate, which was 3.25% at August 31, 2009. The line was not utilized during the year ended August 31, 2009. The balance was zero at August 31, 2009.

Interest paid on the line for the year ended August 31, 2009 was \$ 0.

NOTE 7: DEFERRED REVENUE

Deferred revenue represents resources received by the Chamber and the Foundation for activities that have not occurred or dues that have not been earned as of August 31, 2009 These resources will be recognized as revenue in subsequent periods. Deferred revenues at August 31, 2009 are as follows:

Current Liabilities	
Membership Dues	\$ 20,105
Conferences and Meetings	65,701
Unapplied Overpayments	1,754
Residuals	6,042
Website Advertising	 525_
Total Current Liabilities	 94,127
Other Liabilities	
Long-Term Membership Dues	 8,344
Total Deferred Revenue	\$ 102,471

NOTE 8: RETIREMENT PLAN

The Chamber has a retirement plan with the American Chamber of Commerce Executives, which covers all employees who complete one year and 1,000 hours of service, and have attained the age of 21. Effective January 1, 2002, the plan was changed to add a 401(k) feature that allows for employee elective deferrals and matching contributions. Effective January 1, 2004 the plan provides for matching contributions up to 5% of employees' wages and an additional 5% Chamber contribution that is not dependent on employee elective deferrals. The total retirement expense for the year ended August 31, 2009 was \$ 45,746.

NOTE 9: GIFT CERTIFICATES

Prior to October 15, 2001, the Chamber administered a gift certificate program referred to as The Chamber received a fee from participating vendors for distributing the gift certificates. There were no gift certificate sales for the year ended August 31, 2009 and redemptions were approximately \$ 695. The liability for this gift certificate program has been utilized in full. Future redemptions are expected to be immaterial and will be expensed as needed.

As of October 15, 2001, the Chamber started a new program through Certifichecks in which commissions were received and no external expenses were incurred. In February 2009, Certifichecks ceased business operations and subsequently declared bankruptcy. This rendered the unredeemed certificates worthless, however, the Chamber management has agreed to honor the certificates. Certificate holders can redeem valid certificates with participating merchants and the Chamber will then reimburse the merchants for certificates received. The Chamber has recorded a liability of \$120,000 to account for the estimated outstanding certificates that were not yet redeemed. As of August 31, 2009, \$75,450 of these certificates has been reimbursed by the Chamber.

NOTE 10: TEMPORARILY RESTRICTED NET ASSETS

Temporarily restricted net assets are available for the following purposes at August 31, 2009:

Silent Observer

12,482

Net assets were released from donor restrictions by incurring expenses satisfying the purpose or time restrictions specified by the program. Total net assets released from restrictions for the year ended August 31, 2009 amounted to \$ 3,534.

NOTE 11: SUBSQUENT EVENTS

The Organization has evaluated all subsequent events through December 3, 2009, the date the financial statements were available to be issued.

SUPPLEMENTARY INFORMATION

HOLLAND AREA CHAMBER OF COMMERCE SCHEDULE OF ACTIVITIES BY FUND YEAR ENDED AUGUST 31, 2009

		Chamber Foundation						
	Holland			Silent Holla		and Young	Total All	
	<u>Chamber</u>	G	eneral	_	Observer	Pro	<u>fessionals</u>	<u>Funds</u>
SUPPORT AND REVENUE								
Contributions	\$ -	\$	250	\$	2,734	\$	1,500	\$ 4,484
Membership Investment								
and Promotions	489,486		-		-		-	489,486
Conferences and Meetings	276,931		-		-		-	276,931
Publications and Advertising	31,021		-		-		-	31,021
Interest Income	13,428		1,860		-		-	15,288
Management Reimbursements	248,566		-		-		-	248,566
Unrealized Loss on Investment	-		(32,060)		-		-	(32,060)
Realized Gain on Investment	-		1,270		-		-	1,270
Miscellaneous Income	29,909		_		-		<u>-</u>	29,909
Total Support and Revenue	1,089,341		(28,680)		2,734		1,500	1,064,895
EXPENSES								
Program Services								
Promotion and Extension	3,852		2,580		2,034		1,500	9,966
Membership Meetings	33,723		-		_		-	33,723
Business and Community								
Development	289,008		-		-		-	289,008
Publications	2,215				<u> </u>			2,215
Total Program Services	328,798	_	2,580		2,034		1,500	334,912
Supporting Services								
Management and General	791,085		1,278				-	792,363
Total Expenses	1,119,883		3,858		2,034		1,500	1,127,275
INCREASE (DECREASE) IN NET ASSETS	(30,542)	1	(32,538)		700		-	(62,380)
NET ASSETS - SEPTEMBER 1, 2008	856,324	<u> </u>	177,401		11,782		1,900	1,047,407
NET ASSETS - AUGUST 31, 2009	\$ 825,782	\$	144,863	\$	12,482	\$	1,900	\$ 985,027

HOLLAND AREA CHAMBER OF COMMERCE SCHEDULES OF ACTIVITIES - HOLLAND CHAMBER YEARS ENDED AUGUST 31, 2009 AND 2008

	(Unaudited) 2009 Budget			2009 Actual		2008 Actual	
SUPPORT AND REVENUE							
Membership Investment and Promotions							
Membership Dues	\$	558,407	\$	549,222 \$		50,079	
New Membership		50,125		32,015		15,465	
Dues Write-Offs		(63,650)		(91,751)		55,546)	
Total Membership Investment and Promotions		544,882		489,486	53	39,998	
Conferences and Meetings							
Early Bird Breakfast		39,145		40,890		10,662	
Annual Dinner		38,500		40,050		54,345	
Golf Outing		18,255		29,075		29,895	
Meet Pete Hoekstra		20,375		21,980	2	20,250	
Governmental Affairs		11,046		11,625		9,354	
All Committee Breakfast		•		-		3,285	
Small Business		14,450		14,425		12,060	
Seminars		11,145		10,695		12,820	
Leadership Holland		44,050		44,966	6	50,875	
Mid Day Forum		-		-		2,077	
Showcase/Trade Show		23,600		26,700	(30,575	
Hamilton Division		1,680		1,298		3,395	
Business Connections		19,900		18,454	•	14,255	
Holland First		3,000		3,000		3,000	
Power Lunch		2,301		3,843		1,894	
Lessons in Leadership		20,625		7,530		15,300	
Membership Orientation		1,000		1,000		-	
Institute for Healing Racism		-		1,400		1,450	
Total Conferences and Meetings		269,072		276,931	31	15,492	
Publications and Advertising							
Computer List Sales		2,625		1,400		3,065	
Website Advertising		11,565		8,363		6,025	
Membership Directory		10,350		10,785	•	10,843	
Cottage Listing		10,095		9,970		9,325	
Publication Sales		-		503		626	
Total Publications and Advertising		34,635		31,021	- : :	29,884	
Management Reimbursements						·	
HEDCOR		4,000		4,000		12,000	
West Michigan Chamber Coalition				•		6,775	
Lakeshore Athena		1,500		2,000		-	
CDC/SBA 504		243,089		242,566	2	73,017	
Total Management Reimbursements		248,589		248,566		91,792	
Miscellaneous			•	<u></u>		<u> </u>	
Gift Certificate Fees		7,718		-		6,796	
Residuals		20,060		29,909	;	20,170	
Gain (Loss) on Sale of Assets		_ = -,		,	·	319	
Interest		17,400		13,428		19,021	
Total Miscellaneous		45,178		43,337		46,306	
TOTAL SUPPORT AND REVENUE	\$	1,142,356	\$	1,089,341	1,2	23,472	

HOLLAND AREA CHAMBER OF COMMERCE SCHEDULES OF ACTIVITIES - HOLLAND CHAMBER (CONTINUED) YEARS ENDED AUGUST 31, 2009 AND 2008

	(Un	2	2009	2008		
EXPENSES	2009	Budget	A	ctual	Actual	
Program Services						
Promotion and Extension						
Conference and Training	_\$	6,380	\$	3,852	\$	10,824
Membership Meetings						
Early Bird Breakfast		28,970		25,170		30,349
Meet Pete Hoekstra		7,437		8,553		6,252
Mid Day Forum		-		-		1,748
Total Membership Meetings		36,407		33,723		38,349
Business and Community Development						
Small Business		8,020		9,377		8,654
Seminars		6,979		7,939		11,472
Showcase/Trade Show		13,861		11,918		17,550
Governmental Affairs		8,480		8,540		11,321
Leadership Holland		14,234		14,673		21,026
Tulip Time		2,150		35		2,110
Directors		1,550		1,202		2,374
Annual Dinner		23,475		33,538		35,248
All Committee Breakfast		-		-		1,578
Ambassadors		760		505		323
Membership Promotion		1,889		1,138		7,337
Golf Outing		16,250		16,003		25,916
Community Relations		5,590		3,666		20,840
Holland First		2,625		2,735		2,469
Gift Certificate Expense		1,510		2,035		1,469
CDC/SBA 504		49,481		37,877		60,178
TGIF		300		-		188
Hamilton Division		1,163		970		2,805
Business Connections		14,567		10,134		12,266
Power Lunch		1,626		2,024		1,109
Lessons in Leadership		15,096		4,299		9,418
Institute for Healing Racism		-		400		252
West Michigan Chamber Coalition		-		-		500
Donations		-		-		104
Certificheck Bankruptcy Allowance				120,000		
Total Business and						
Community Development		189,606		289,008		256,507

HOLLAND AREA CHAMBER OF COMMERCE SCHEDULES OF ACTIVITIES - HOLLAND CHAMBER (CONTINUED) YEARS ENDED AUGUST 31, 2009 AND 2008

Program Services (Continued)	-	naudited) 09 Budget		2009 Actual	2008 Actual	
Publications						
Chamber News	\$	3,000	\$	- \$	9,747	
Business Directory	•	2,800	•	2,215	2,613	
Total Publications		5,800		2,215	12,360	
Total Program Services		238,193		328,798	318,040	
Management and General						
Salaries and Benefits						
Administrative and Clerical Services		547,948		500,154	533,344	
Retirement Contributions		48,717		45,746	45,885	
Social Security & Medicare Taxes		42,093		37,395	38,481	
Unemployment Taxes		5,075		4,158	4,772	
Payroll & 401(k) Admin Fees		4,650		4,492	4,210	
Fringe Benefit Package	_	46,002	_	34,313	42,781	
Total Salaries and Benefits		694,485		626,258	669,473	
Service and Supply						
Telephone		5,748		5,298	5,813	
Office Supplies and Printing		10,736		10,455	12,809	
Postage		8,235		4,897	5,951	
Car Expenses		5,700		3,879	5,060	
Service Charges		7,060		4,721	6,393	
Staff Development		4,000		1,642	5,305	
Total Service and Supply		41,479		30,892	41,331	
Fixed Charges						
Utilities		9,716		8,176	8,310	
Maintenance		13,745		11,689	17,528	
Depreciation		50,991		50,716	52,973	
Professional Services		360		1,048	172	
Audit		5,950		6,500	5,500	
Insurance		6,744		6,578	6,645	
Dues and Subscriptions		4,682		4,928	8,787	
Office Machinery and Equipment Expenses		12,498		10,501	12,320	
Computer Expenses		12,637		15,912	17,295	
Property Taxes		15,350		15,835	15,349	
Income Tax (Form 990)		1,880		2,052	(253)	
Total Fixed Charges		134,553		133,935	144,626	
Total Management and General		870,517		791,085	855,430_	
TOTAL EXPENSES		1,108,710		1,119,883	1,173,470	
INCREASE (DECREASE) IN NET ASSETS		33,646		(30,542)	50,002	
NET ASSETS - BEGINNING OF PERIOD		856,324		856,324	806,322	
NET ASSETS - END OF PERIOD	<u>.</u> \$	889,970	\$	825,782 \$	856,324	

HOLLAND AREA CHAMBER OF COMMERCE SCHEDULES OF EXPENSES - CHAMBER FOUNDATION YEARS ENDED AUGUST 31, 2009 AND 2008

	Gene Cham	ber	Silent		Holland Young				2008 Total	
	<u>Foundation</u>		<u>Observer</u>		<u>Professionals</u>		All Funds		<u>All Funds</u>	
PROGRAM EXPENSES										
Promotion and Extension										
Rewards	\$	-	\$	1,250	\$	~	\$	1,250	\$	1,700
Telephone		-		530		-		530		507
Dues		-		170		-		170		150
Supplies and Printing		-		84		-		84		637
Scholarships		750		-		-		750		750
Donations		1,830		-		1,500		3,330		27,425_
Total Promotion										
and Extension		2,580		2,034		1,500		6,114		31,169
Publications										
Advertising		-		-		•				819
TOTAL PROGRAM EXPENSES		2,580		2,034		1,500	_	6,114		31,988
MANAGEMENT AND GENERAL										
Service and Supply Investment Expense		1,278		•		-		1,278		1,695
voonnone Exponed		-,		<u> </u>				.,		.,
TOTAL EXPENSES	\$	3,858	\$	2,034	\$	1,500	\$	7,392	\$	33,683

Software ID: Software Version:

EIN: 38-2476780

Name: HOLLAND AREA CHAMBER OF COMMERCE

FOUNDATION

Form 990, Part VII - Section Aaa

Form 990, Part VII - Section Ada			(0								
		Position (check all that apply)						(D)		(F) Estimated	
									(E)		
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Ke) employee	Highest compensated	Former	Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	amount of other compensation from the organization and related organizations	
PHILIP KONING , CHAIRMAN	1	Х		Х				0	0	0	
DALE SOWDERS , TREASURER	1	Х		Х				0	0	0	
ROBERT ELLIS , VICE-CHAIR	1	Х		Х				0	0	0	
DAVID SLIKKERS , DIRECTOR	1	Х		Х				0	0	0	
LESLIE BROWN , DIRECTOR	1	Х						0	0	0	
LYNN SMITH , DIRECTOR	1	Х						0	0	0	
TONY CASTILLO , PAST CHAIR	1	X						0	0	0	
SCOTT SPOELHOF , PAST CHAIR	1	Х						0	0	0	
CHRIS ANTRUP , DIRECTOR	1	Х						0	0	0	
GWEN AUWERDA , DIRECTOR	1	Х						0	0	0	
JACK BOUMAN , DIRECTOR	1	Х						0	0	0	
PETER ESSER , DIRECTOR	1	Х						0	0	0	
ANN HARTEN , DIRECTOR	1	Х						0	0	0	
ANTHONY HO , DIRECTOR	1	Х						0	0	0	
RUBEN JUAREZ , DIRECTOR	1	Х						0	0	0	
SKIP KEETER , DIRECTOR	1	Х						0	0	0	
PATRICIA KOEZE , DIRECTOR	1	Х						0	0	0	
HAANS MULDER , DIRECTOR	1	Х						0	0	0	
JEFF MULDER , DIRECTOR	1	Х						0	0	0	
SHAWN PACANOWSKI , DIRECTOR	1	Х						0	0	0	
JONATHAN STEINER , DIRECTOR	1	Х						0	0	0	
NED TIMMER , DIRECTOR	1	Х						0	0	0	
BRET VANDER KAMP , DIRECTOR	1	Х						0	0	0	
ELLA WEYMON, DIRECTOR	1	Х						0	0	0	
VACANT, DIRECTOR	1	Х						0	0	0	
JANE CLARK, PRESIDENT	40			Х				0	110,374	23,523	