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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)

OMB No 1545-0047

2008

artment of the Treasury and Revenue Service

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

	_					_ 			<u>-</u>			1974001		200 No. 625 S. 20 200 C. 277
		For t	he 2008 calen	dar year,	or tax year beginr	ing Oct 1	l ,	2008, an	d endin	g Sep	30		<u>, 2009</u>	<u> </u>
	3	Check	if applicable		C Name of organiza	tion					D Employ	er iden	tification Nu	umber
			ddress change	Please use IRS label	Devils Lak	e Chambe	r of Commer	ce			45-	0116	761	
			arne change	or print			nail is not delivered to s		Room/s	urte	E Telepho			
		-	utial return	or type See	Box 879	·		•			170	1 \ 6	62-49	0.3
				specific Instruc-	City, town or cour			State ZIP	1		1 1/0	1) 0	002-49	03
		\vdash	ermination	tions		•				•	1_			
		\square	mended return		Devils Lak			ND 5	8301		G Gross r			2,872.
			pplication pending	F Name	and address of principa	officer					a group retur		filiates?	Yes X No
				Dick Pro	zinski Box 8	79	Devils Lak	e ND 5	8301		il affiliates incl ,' attach a list		structions)	Yes No
		_ Tax	c-exempt statu	ıs X 501	(c) (6) √	(insert no)	4947(a)(1)	or 5	527		,	(,	
	J	We	bsite: ► N/	'A						H(c) Group	exemption ni	umber 3	-	
	ĸ	Тура	e of organization	X Corpora	ation Trust	Association	Other ►	L Year	of Format	tion 192	2.5 M s	State of	legal domic	ale ND
	Pa	Hala									``			
	<u> </u>	1	721,74		janization's missio	n or most sig	nificant activities:	Tor	romo	te and	d enhar	ice	the a	uality
	an.				ne resident									
	Governance				focusing									
	Ë.				and civic d									
	9,0	2	Check this bo		if the organization			disposed	of mor	 e than 25	 5% of its as	 ssets		
	ŏ	3			bers of the govern			u.opocou	00.		, , , , , , , , , , , , , , , , , , ,		12	
0	80	4			t voting members			line 1b)				4	12	
2010	ŧ	5			yees (Part V, line							5		
2	Activities &	6	Total number	of volunt	eers (estimate if r	ecessary)	•					6	25	
ಣ	ĕ	7 a	Total gross u	nrelated b	usiness revenue f	rom Part VIII,	line 12, column ((C)				7 a		13,743.
0 \		b	Net unrelated	business	taxable income fi	om Form 990	I-T, line 34					7 b		12,743.
SCANNED NOV				,							Prior Year		Cui	rrent Year
Z		8	Contributions	and gran	ts (Part VIII, line	h) .					64,6	42.		77,902.
\Box	_ ′	9	Program serv	ice reven	ue (Part VIII, line	2g)	•							
뿌	Reve	10			irt VIII, column (A		ind 7d)				2,2	218.		1,008.
Ž	ď	11	Other revenue	e (Part VI	II, column (A), line	es 5, 6d, 8c, 9	c, 10c, and 11e)	•		-	126,8	306.		513,962.
4		12			nes 8 through 11 (2) .		193,6			592,872.
ည္က				-										
44		13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4)												
			Salaries, other			109,7	757.		158,130.					
	Expenses				g fees (Part IX, co				,	-				
	en				•	• • •	•					15.44	223 71	
	EX				ises (Part IX, colu							A 1 1 1 1		
					X, column (A), lin					<u> </u>	57,8			492,117.
		18	Total expense	es Add Irr	nes 13-17 (must e	qua Part IX	PHYME (A) ED	5)			167,6			650,247.
		19	Revenue less	expenses	Subtract line 18	from lipe 12		70			26,0)53.		-57,375.
	58						- 1 000 h	h Ÿ		Beg	inning of Y	'ear	En	d of Year
	# H	20	Total assets ((Part X, Iır	ne 16)	8 00	il hareun	ျပ			408,5	21.		273,073.
	Net Assets or Fund Balances	21	Total liabilities	s (Part X,	line 26)	1-1	10 ,	_기뜨			173,9	352.		95,877.
	z į	2 2	Net assets or	fund bala	nces Subtract lin	e 21 from line	ADFN U	r			234,5	69.		177,196.
	Pá		Signatu	ure Bloc	k				_	<u> </u>				
					· · · · · · · · · · · · · · · · · · ·	amined this return	uncluding accompany	na schedule	s and stat	tements an	d to the best o	of my kn	owledge an	nd belief, it is
			true, correct, a	ind complete	I declare that I have ex Declaration of prepare	r (other)than offici	er) is based on all infor	mation of wh	hich prepa	irer has any	y knowledge			
	Sig	n	▶ 1/-	·	6 Day					1	Glin	110		
	He	re	Signature	of officer	0.1.19			-			ate //	<i>, .</i>		
				c (14.1.)	CO_{0}	ZINSKI	PRI	-5						
			Type or pr	int name and		210/	TRU						_	
							·····	Date			Check if	P	reparer's id	lentifying number
	Pai	d			_					1 :	self-	°	see instructi	ons)
	- са Р	-	Preparer's signature	> 1 -	$\bigcap \Sigma_{r}$	1			100 10		employed P		30031	はるか
	_dr	er's	-	75	uso C	<u> </u>		111/	<u>/20/0</u>	9				<u>, , , , , , , , , , , , , , , , , , , </u>
	Ús	•	Firm's name (o			CIATES,	PC							
	On	y	employed), address, and		30X 866	.					EIN ►	15.		
			ZIP + 4		ILS LAKE	· · · · · ·		8301			Phone no	(70		2-8724
	Mav	the If	RS discuss this	s return w	ith the preparer s	hown above?	(see instructions)	ı					X Y	es No

		<u>45-011676</u>	1		Page 2
Pai	Statement of Program Service Accomplishments (see instructions)				
1	Briefly describe the organization's mission				
	To promote and enhance the quality				
	of life for the residents of the Devils Lake area through programs				
	O - + F 000 D 0 D - 100 + + / - 1 8				
	See Form 990, Page 2, Part III, Line 1 (continued)				
2	Did the organization undertake any significant program services during the year which were not listed on the p	rior			
	Form 990 or 990-EZ?	📙	Yes	X	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	X	No
	If 'Yes,' describe these changes on Schedule O.	ب			
4	Describe the exempt purpose achievements for each of the organization's three largest program services by ex	noncos Sostu	n 501	(0)(3)	
7	and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and alloc	cations to other	s. the	total	
	expenses, and revenue, if any, for each program service reported		,		
4 2	a (Code) (Expenses \$ including grants of \$) (Rev	enue \$)
	The chamber of commerce promotes the general welfare of the				
	Devils Lake area for prosperity within the economic,				
	commercial, industrial and educational trade areas.				· – – -
		- -			-
41	(Code) (Expenses \$ including grants of \$) (Rev	enue \$)
		- 			- -
					- - -
4 c	(Code) (Expenses \$ including grants of \$) (Reve	enue \$)
			-		
		-			
	~				
		- 			
ø	Other program services (Describe in Schedule O)				_
•	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► \$ (Must equal Part IX, Line 25, column (B))			*	
7.0	(must equal that in, time 20, column (b))				

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C. Part I	3		Х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		^
5		5		х
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		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8		8		Х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		x
10	Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		X
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	Х	
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		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14	a Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		Х
ı	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		X_
ı5	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	15		Х
	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		Х
	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I	17		X
	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		X
	Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		X
	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		X
21 22	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 22		X
	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		<u>X</u>
23	Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete Schedule J	23		Х
24 a	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, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K. If 'No, 'go to question 25	24a		х
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?	24 c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	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		
Ь	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	_	
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		х
1	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		х

Form 990 (2008) Devils Lake Chamber of Commerce Part V Checklist of Required Schedules (continued)

		-	Yes	No
;	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
	with other person(s) listed lift art vii, Section A): If Tes, complete schedule L, Fait IV.	204		
	b Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' complete Schedule L, Part IV	28b		х
	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		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M .	29		х
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		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		х
3 5	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		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		
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_
J		Form	990 ((2008)

		Yes	No
a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U S Information Returns Enter -0- if not applicable	0		
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X	X 2007
2 a 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			
2 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)	150 S	非性愈	310
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	х	
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3 b	_X	
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		Х
b If 'Yes,' enter the name of the foreign country ►		7. × 4.	
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts			
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
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?	5c		
6 a 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 deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).		NE	XX.
a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7 a		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?	7с		х
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		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? .	. 7g		
h For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7 h		
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?	8		
9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.	FFI	<i>705</i>	
a Did the organization make any taxable distributions under section 4966?	9a		
b Did the organization make any distribution to a donor, donor advisor, or related person?	9 b		
10 Section 501(c)(7) organizations. Enter			\$5.50°
a Initiation fees and capital contributions included on Part VIII, line 12			
b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		4 4 4 3 3 3 4 4 4 5 4 5 4 5 4 5 4 5 5 5 6 5 6 5 6 5	1977
11 Section 501(c)(12) organizations. Enter		0.5	
a Gross income from other members or shareholders	F. 82	74°	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	Tex Firms	2 7000-
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			= 1. c
BAA	Form	า 990	(2008)

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

<u>,C</u>	tion'A. Governing Body and Management					
	For each 'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b be processes, or changes in Schedule O See instructions	low, descri	be the circumstances,	2813	Yes	No
1.	a Enter the number of voting members of the governing body	1 -	a 12			
	a Enter the number of voting members of the governing body Denter the number of voting members that are independent		b 12			
	Did any officer, director, trustee, or key employee have a family relationship or a busine	-				
3		y or under	the direct supervision	2		X
Δ	of officers, directors or trustees, or key employees to a management company or other Did the organization make any significant changes to its organizational documents	person?	•	3		X
-	since the prior Form 990 was filed?					
5	Did the organization become aware during the year of a material diversion of the organi	۰۰۰. Ization's as	ssets?	5		x
6	Does the organization have members or stockholders?			6	x	
7 8	Does the organization have members, stockholders, or other persons who may elect on governing body?	e or more	members of the	7a		х
ł	• Are any decisions of the governing body subject to approval by members, stockholders,	or other p	ersons?	7 b		X
	Did the organization contemporaneously document the meetings held or written actions					72.41)
	the following	undertaker	in during the year by			
	a The governing body? Description Each committee with authority to act on behalf of the governing body?	•	• •	8a 8b	 	
	Does the organization have local chapters, branches, or affiliates?			9 a	 	X
	of 'Yes,' does the organization have written policies and procedures governing the activity	ties of such	h chapters, affiliates,			
	and branches to ensure their operations are consistent with those of the organization?			9 b		-
10	Was a copy of the Form 990 provided to the organization's governing body before it was describe in Schedule O the process, if any, the organization uses to review the Form 99	s filed? All 90 .	organizations must	10	х	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, whorganization's mailing address? If 'Yes,' provide the names and addresses in Schedule	no cannot b O	pe reached at the	11		X
C	tion B. Policies					
					Yes	No
	Does the organization have a written conflict of interest policy? If 'No,' go to line 13	•	•	12a	Х	
ŧ	• Are officers, directors or trustees, and key employees required to disclose annually inte to conflicts?	rests that o	could give rise	12 b	х	
C	Does the organization regularly and consistently monitor and enforce compliance with the Schedule O how this is done	he policy?	If 'Yes,' describe in	12 c	х	
13	Does the organization have a written whistleblower policy?			13	X	
14	Does the organization have a written document retention and destruction policy?			14	X	
15	Did the process for determining compensation of the following persons include a review persons, comparability data, and contemporaneous substantiation of the deliberation an	and appro	oval by independent			
a	The organization's CEO, Executive Director, or top management official?			15 a		X
t	Other officers of key employees of the organization?			15 b		Х
	Describe the process in Schedule O (see instructions)					
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or si- entity during the year?	ımılar arrar	ngement with a taxable	16 a		X
Ł	olf 'Yes,' has the organization adopted a written policy or procedure requiring the organizer in joint venture arrangements under applicable federal tax law, and taken steps to safegatatus with respect to such arrangements?	zation to ev guard the o	valuate its participation organization's exempt	16 b		
Sec	tion C. Disclosures			1 100	1	
	List the states with which a copy of this Form 990 is required to be filed ► North I	Dakota				
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 9		00-T (501(c)(3)s only) a	 vailable	for pu	ıblıc
	Inspection Indicate how you make these available Check all that apply Own website Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how) the organization makes its governing of statements available to the public	documents,	, conflict of interest poli	cy, and	financ	ial
ა0	State the name, physical address, and telephone number of the person who possesses	the books	and records of the orga	ınızatıor	1	
•	Devils Lake Chamber of Commerce Hwy 2 Devils Lake	ND	_58301(701)_	<u>662-</u>	<u>4903</u>

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

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

1 a 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) or 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	compens	ate ar	ny of	ficer	, dı	rector,	trus	stee, or key employee		
(A)	(B)			(c)				(D)	(E)	(F)
Name and Title	Average hours		tion (that appl		Reportable compensation from	Reportable compensation from	Estimated amount of other
	per week	advid el trastee or director	unshiluhopal kustaa	Offi ei	key employer	Hig) est coiกตุลกระted employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
Dick Prozinski										
Board Chair	2.00	Х		X				0.	0.	0.
Jeff Huber										
Past Board Chair	2.00	X						0.	0.	0.
eff Klemetsrud										
ıce Board Chair	2.00	Х		X				0.	0.	<u>0.</u>
Chad Peterson										
Treasurer	2.00	Х	_	X				0.	0.	<u> </u>
Erin Wood									_	_
Director	1.00	X						0.	0.	0.
Dan Traynor						İ		_		
Director	1.00	Х					_	0.	0.	0.
Kirk Baeth										0
Director	1.00	X					<u> </u>	0.	0.	0.
Dan Ness										0
Director	1.00	X					<u> </u>	0.	0.	0.
Paul Matheny	1 00	7.7							0.	0.
Director	1.00	Х						0.	0.	
Darla Wandler	1 00	37							0.	0.
Director	1.00	<u> </u>		-		\vdash		0.	0.	
Quince Hambek	1 00	v						0.	0.	0.
Director	1.00	Λ.	<u> </u>	-				0.		
Mike Yoder Director	1.00	v				ļ		0.	0.	0.
Director	1.00						-	0.	0.	· · · · · · · · · · · · · · · · · · ·
			ļ .			}				
			ļ .							····
·										
							L_			
							<u> </u>		<u> </u>	

Total number of independent contractors (including those in 1) who received more than \$100,000 in

compensation from the organization >

Pa S	TY	III. Statement of Re	venue			(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 TAND OTHER SIMILAR AMOUNTS		Federated campaigns Membership dues	<u> </u>	1a	77,902.				
A S		: Fundraising events		1 c					
AR A		Related organizations		1 d					
S, G	е	Government grants (contribution	ons)	1 e					
TIO!	f	All other contributions, gifts, g	rants, and						
BBU		similar amounts not included	above	1f	 				
ENG	_	Noncash contribns included in	ins 1a-1f	\$_					
	h	Total. Add lines 1a-1f			Business Code	77,902.			TELL CREATE CONT.
PROGRAM SERVICE REVENUE	2 a			ļ	Business Code	15. 15 30 Sept 25. 14. 14. 14. 14. 14. 14. 14. 14. 14. 14	395-5-16-3, 20 17-5-3 FAZ	1921221224 2. 12 18 K	
Ē	b			· - - 					
ĴĈĒ				+					
ËE	d	•							
A≅	е	,							
SGR	f	All other program service	e revenu	e .[and the second s
<u> </u>	g	Total. Add lines 2a-2f							
	3	Investment income (inclother similar amounts)	luding div	idends	, interest and	1,008.	1,008.	0.	0.
	4	tncome from investment	t of tax-ex	empt l	bond proceeds				
	5	Royalties				The Proposite was as a second			
	_	0 0 1	(t) R		(ii) Personal				
		Gross Rents Less rental expenses	18	,000	•				
		Rental income or (loss)	18	,000					
		Net rental income or (lo		000	<u>· </u>	18,000.	18,000.	0.	0.
		Gross amount from sales of	(ı) Seci	urities	(ii) Other	TEACH AND A			
	,,,	assets other than inventory							
	ь	Less cost or other basis							
		and sales expenses							
	ľ	: Gain or (loss)			1		72714		
	d	Net gain or (loss)	•						
ш	8 a	Gross income from fund	Iraising ev	vents					
ÆND		(not including \$ of contributions reported	1 on line 1	(c)		对加州			
RE		See Part IV, line 18	J OH IIIC	;	a				
OTHER REVENU	ь	Less direct expenses		ı	ь				花瓣 红色
9		: Net income or (loss) fro	m fundra	sing ev	vents ►				
	9a	Gross income from gam See Part IV, line 19	iino activi	ties					
			J	i	a				
		Less direct expenses			b[23 2 Land 12 3 Land	
	С	: Net income or (loss) fro	m gamıng	activi	ties		5786 PT 13 15 22 192		N. C. T. B. C. T. C. W.
	10 a	 Gross sales of inventory and allowances 	, less ret	urns .					
	h	Less cost of goods sold	Į.	1	"				
		: Net income or (loss) fro		f inver	ntory ►	The state of the s	The state of the s	en eine mariein erlein im zustand statten überlein und dem aufermachten	
		Miscellaneous Reven			Business Code	The state of the s	100000	The state of	The state of the s
	11 a	Tourism Exp Rein	bursen	nent	999999	65,000.	65,000.	0.	0.
	b	Project Income			999999	72,643.	72,643.	0.	0.
		Web Link Incom	e		999999	5,700.	5,700.	0.	0.
		All other revenue		Ĺ	-	352,619.	338,876.	13,743.	0.
		Total. Add lines 11a-11d			. •	495,962.		10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	- 6.5 M. 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	12	Total Revenue. Add line 10c, and 11e	s 1h, 2g,	3, 4, 5	5, 6d, 7d, 8c, 9c,	592,872.	501,227.	13,743.	0.

Page 10

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).

Do . 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				PARMER RECOGNICAL TO STATE OF A 1 - 2 A
3	· .				
4 5	Benefits paid to or for members 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	117,639.			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	3,253.			
9	Other employee benefits .	15,097.			
10	Payroll taxes	22,141.			
17	Fees for services (non-employees)				
ä	a Management				
ł	Legal				
	C Accounting	1,256.	 		
	Lobbying				
	e Prof fundraising svcs. See Part IV, In 17. Investment management fees.				
Ç	g Other				
12	Advertising and promotion	125,663.			
13	Office expenses	4,937.			
14	Information technology	<u> </u>			
15	Royalties				
16	Occupancy	13,200.			
17	Travel .	10,404.			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings			· · · · · · · · · · · · · · · · · · ·	
20	Interest	1,220.			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	8,967.			
23	Insurance	7,510.	be and the state of the state o	TOWN STATES THE CONTRACT OF THE TOWN	Lander Country of the Property Country Country
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)				
æ	Printing	20,899.			
	Dues & Subscriptions	1,746.		<u></u>	
C	Reimbursement	65,000.			
	Utilities	10,347.			
	Repairs & Maintenance	41,570.			
	All other expenses	179,398.			
	Total functional expenses Add lines 1 through 24f	650,247.			
26	SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
BAA					Form 990 (2008)

M7.C	II-LEA	Bajance Sneet	 					
		:		(A) Beginning of year		(B) End of	year	
	1	Cash – non-interest-bearing		89,812.	1	2	9,9	09.
	2	Savings and temporary cash investments		115,781.	2			19.
	3	Pledges and grants receivable, net			3			
	4	Accounts receivable, net		55,056.	4		3,7	94.
	5	Receivables from current and former officers, directors or other related parties. Complete Part II of Schedule I	, trustees, key employees,	00,000	5			
	6	Receivables from other disqualified persons (as define				AND THE	ا می سده مرابع	15 Te
		and persons described in section 4958(c)(3)(B) Comp			6			
ASSETS	7	Notes and loans receivable, net			7			
E	8	Inventories for sale or use			8			
S	9	Prepaid expenses and deferred charges		158.	9		1	.58.
	10a	Land, buildings, and equipment cost basis	10a 252,070	WHAT WALL MARKEY FOR HER CONTINUE (DA. PROSES	33		14 (A)	13.00
	1	Less accumulated depreciation Complete Part VI of						
		Schedule D	10b 86,677	. 147,714.	10 c	16	5.3	393.
	11	Investments — publicly-traded securities .		==,=	11	 		
	12	Investments – other securities See Part IV, line 11			12			
	13	Investments – program-related See Part IV, line 11			13			
	14	Intangible assets	•••		14			
	15	Other assets See Part IV, line 11			15			
	16	Total assets Add lines 1 through 15 (must equal line 3	34)	408,521.	16	27	3.0	73.
	17	Accounts payable and accrued expenses .		18,242.	17			00.
	18	Grants payable		10/212:	18	 	 / -	.00.
	19	Deferred revenue		80,265.	19		4	100.
Ļ	20	Tax-exempt bond liabilities	•	00/2031	20	 		<u></u>
LIA	21							
	22	Escrow account liability Complete Part IV of Schedule Payables to current and former officers, directors, trus highest compensated employees, and disqualified pers	tees, key employees,		21			
Ť E S		of Schedule L		- I want to the state of the st	22			Bank July In Man
E S	23	Secured mortgages and notes payable to unrelated this	rd parties		23			
	24	Unsecured notes and loans payable .		73,945.	24	8	3,3	377.
	25	Other liabilities Complete Part X of Schedule D	,	1,500.	25			
	26	Total liabilities. Add lines 17 through 25		173,952.	26	9	5,8	377.
'Z		Organizations that follow SFAS 117, check here ►	and complete lines					
NET		27 through 29 and lines 33 and 34.						
A S	27	Unrestricted net assets			27			
SE	28	Temporarily restricted net assets	,		28			
5		Permanently restricted net assets			29			
R		Organizations that do not follow SFAS 117, check her	e F X and complete	AT YEAR AND A	海沙 斯			
		lines 30 through 34.	<u></u>		13			
020	30	Capital stock or trust principal, or current funds		234,569.	30	17	7,1	96.
		Paid-in or capital surplus, or land, building, and equipr	nent fund		31			
田々しくえいぜい	32	Retained earnings, endowment, accumulated income,			32			
Ñ	33	Total net assets or fund balances.		234,569.	33	17	7.1	.96.
E	34	Total liabilities and net assets/fund balances		408,521.	34			73.
Pá	rt XI	Financial Statements and Reporting		1		<u>'</u>	<u>, .</u> .	
			. [¬		C 9367 %	res	No
		, , , , , , , , , , , , , , , , , , ,	ash X Accrual [_ Other			ici za ciri	Maria Com
		e the organization's financial statements compiled or re		accountant?		2a	X	
		e the organization's financial statements audited by an	·			2b		<u> </u>
	revi	es' to 2a or 2b, does the organization have a committeew, or compilation of its financial statements and selections and the compilation of its financial statements.	tion of an independent acco	ountant?		2c		Х
	Aud	result of a federal award, was the organization required the transfer of the community of t	•	idits as set forth in the Sii	ngle	3a		Х
RAA		es,' did the organization undergo the required audit or a	audits /			. 3b Form :	990 (20087

SCHEDULE D

Supplemental Financial Statements

OMB No 1545-0047

2008

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization Attach to Form 990. To be completed by organizations that answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

Devils Lake Chamber of Commerce 45-0116761 Part 1 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (b) Funds and other accounts 1 Total number at end of year 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year 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 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?? Partil Conservation Easements Complete if the organization answered 'Yes' to Form 990, 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 important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space 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 a Total number of conservation easements 2a **b** Total acreage restricted by conservation easements . 2b c Number of conservation easements on a certified historic structure included in (a) 2c 2d 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 🟲 Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easement it holds Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year 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 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 Partilli 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 b 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 the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 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 b Assets included in Form 990, Part X

		Chamber of Comm		45-011			Page 2
Rart III Organizations Mainta	ining Coll	ections of Art, Histo	orical Treasures, o	or Other Similar Ass	sets (co	ontini	ıed)
 Using the organization's accession that apply) 	n and other i	records, check any of the	following that are a si	ignificant use of its collec	tion item	s (che	ck all
a Public exhibition		d 🔲 Loan	or exchange programs	•			
b Scholarly research		e Other					
c Preservation for future generation	ations	_					
4 Provide a description of the organ Part XIV					ın		
5 During the year, did the organizar assets to be sold to raise funds r	ather than to	be maintained as part of	the organization's col	lection?	Yes		No
Rait IV. Trust, Escrow and Cu IV, line 9, or reported	istodial Ar an amoun	rangements Compl t on Form 990, Part	ete if organization X, line 21.	answered 'Yes' to	Form 9	90, P 	'art
1 a Is the organization an agent, trus included on Form 990, Part X?				er assets not .	Yes	{	No
b If 'Yes,' explain the arrangement	in Part XIV a	ind complete the followin	g table				
					Amount		
c Beginning balance			•	1 c			
d Additions during the year			• •	1 d			
e Distributions during the year	•		• •	1e			<u> </u>
f Ending balance				1f			
2a Did the organization include an a	mount on For	rm 990, Part X, line 21?	•		Yes	[No
b If 'Yes,' explain the arrangement							
Rant V Endowment Funds Co	mplete if c	organization answer	ed 'Yes' to Form 9	990, Part IV, line 10			
	(a) Curren	t year (b) Prior yea	r (c) Two years ba	ack (d) Three years back	(e) F	our yea	rs back
1 a Beginning of year balance					E ELLES	THE STATE OF	WY BE
b Contributions							
c Investment earnings or losses							
d Grants or scholarships				864 27-00-27-00-5		* 574 5 177	
e Other expenditures for facilities and programs							
f Administrative expenses		15 /12/15/15					
g End of year balance						7 7 3 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
2 Provide the estimated percentage	of the year	end balance held as:	COLUMN TO THE WAY TO SEE THE SECOND	Thomas and the second s		- X-472	
a Board designated or quasi-endow	-	*					
b Permanent endowment ►							
c Term endowment ►							
-							
3a Are there endowment funds not in organization by	the possess	ion of the organization th	nat are held and admir	histered for the	Γ	Yes	No
(i) unrelated organizations					3a(i)	103	
(ii) related organizations				•	3a(iı)		+
b If 'Yes' to 3a(ii), are the related or	raanizatione l	listed as required on Sch	odulo D2		3b		
4 Describe in Part XIV the intended					1 20		1
Part VI Investments—Land, B				X line 10	 -		
Description of investment	ananigs, a	(a) Cost or other basis (investment)	(b) Cost or other	(c) Depreciation	(d) E	Book V	alue
1 a Land		(III VESUITETIU)	basis (other)				
b Buildings		169,025.		65,927.		102	,098.
c Leasehold improvements		103,023.		03,341.	<u> </u>	103	,000.
• •		02.045		20.750			205
d Equipment		83,045.		20,750.		62	<u>,295.</u>
e Other		11		<u> </u>			
Total. Add lines 1a-1e (Column (d) shot	uld equal For	m 990, Part X, column (i	B), line 10(c))				<u>,393.</u>
BAA				Sche	dule D (F	orm 9	90) 2008

Part VII. Investments—Other Securities Sec	Eorm 000 Part V lu	45-0116761 Page
(a) Description of security or category	(b) Book value	(c) Method of valuation
(a) Description of security or category (including name of security)	(2) 20011 10.00	Cost or end-of-year market value
iancial derivatives and other financial products		
Closely-held equity interests		
Other	-	
	-	
		per discretizes in severe that arrested in a contract of the periods of the recording to the second second of the second
Total (Column (b) should equal Form 990 Part X, col (B) line 12)		
Part VIII Investments-Program Related (Se		
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
		ossi or one or your memor reaso
al. Column (b)(should equal Form 990, Part X. Col (B) line 13)	>	
Part IX Other Assets (See Form 990, Part		
) Description	(b) Book value
	· · · · · · · · · · · · · · · · · · ·	
Total. Column (b) Total (should equal Form 990, Part X,	col (B) line 15)	•
Part X Other Liabilities (See Form 990, Pa		
(a) Description of Liability	(b) Amount	
Federal Income Taxes		
	_	
Total Column (b) Total (ab. 12 15 600 B. 14 15		
Total Column (b) Total (should equal Form 990, Part X, col. (B) line 25)		Programme and the second secon
In Part XIV, provide the text of the footnote to the organiz	ation's financial statements	s that reports the organization's liability for uncertain tax

	Devils Lake Chamber of Comme			45-0116/61	Page 4
_	Reconciliation of Change in Net Assets from Form	990 to	Financial State	ments	
1	Total revenue (Form 990, Part VIII,column (A), line 12)				
:	Total expenses (Form 990, Part IX, column (A), line 25)				
3	Excess or (deficit) for the year Subtract line 2 from line 1				
4	Net unrealized gains (losses) on investments				
5	Donated services and use of facilities				
6	Investment expenses	•			
7	Prior period adjustments .				
8	Other (Describe in Part XIV)		•		
9	Total adjustments (net) Add lines 4-8				
10	Excess or (deficit) for the year per financial statements. Combine lines				
Pai	t XII Reconciliation of Revenue per Audited Financial S	<u>tatemer</u>	nts With Reven	ue per Return	
	Total revenue, gains, and other support per audited financial statements	S		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		1 1		
ā	Net unrealized gains on investments .		2a		•
Ł	Donated services and use of facilities .		2 b		
•	: Recoveries of prior year grants		2c		
C	Other (Describe in Part XIV)		. 2d		
€	Add lines 2a through 2d		• •	2 e	_
3	Subtract line 2e from line 1			. 3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				
ā	Investments expenses not included on Form 990, Part VIII, line 7b		4a		
t	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	
Par	Reconciliation of Expenses per Audited Financial	Stateme	ents With Expe	nses per Return	
1	Total expenses and losses per audited financial statements .			. 1	_
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			\$52	· ·
a	Donated services and use of facilities		2a		
b	Prior year adjustments		2b		
c	Losses reported on Form 990, Part IX, line 25		. 2c		
	Other (Describe in Part XIV)		2d		
e	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			77 - 17 - 17 - 17 - 17 - 17 - 17 - 17 -	
	Investments expenses not included on Form 990, Part VIII, line 7b		4a		
	Other (Describe in Part XIV)		4b	12 (See 1	
	Add lines 4a and 4b			4c	
5	Total expenses Add lines 3 and 4c (This should equal Form 990, Part	l. line 18 1)	5	
	EXIV Supplemental Information	., ,	<u> </u>		
Com	olete this part to provide the descriptions required for Part II, lines 3, 5, a i, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d	I and 4b.			
					
		- -			
			- 		
		 -			

Schedule D (Form 990) 2008 Devils Lake Chamber of Commerce Part XIV Supplemental Information (continued)	45-0116761	Page 5
rant XIV Supplemental information (continued)		
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