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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)

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

OMB No 1545-0047

2009**Open to Public Inspection****A For the 2009 calendar year, or tax year beginning , 2009, and ending , 20**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization ST LOUIS REGIONAL CHAMBER AND Doing Business As Number and street (or P O box if mail is not delivered to street address) Room/suite ONE METROPOLITAN SQUARE 1300 City or town, state or country, and ZIP + 4 ST LOUIS, MO 63102		D Employer identification number 43-0975222
		F Name and address of principal officer: RICHARD C.D. FLEMING 1 METROPOLITAN SQ, STE 1300 ST. LOUIS, MO 63102		E Telephone number (314) 231-5555
		G Gross receipts \$ 9,218,495.		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "No," attach a list (see instructions)
		I Tax-exempt status <input checked="" type="checkbox"/> 501(c) (6) (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶
J Website: ▶ WWW.STLRCA.ORG				
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶ L Year of formation 1970 M State of legal domicile MO				

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities. PROMOTE THE ST. LOUIS REGION		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	132
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	131
	5 Total number of employees (Part V, line 2a)	5	47
	6 Total number of volunteers (estimate if necessary)	6	800
Revenue	7a Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b Net unrelated business taxable income from Form 990-T, line 34	7b	0.
	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	5,128,361.	4,229,004.
	10 Investment income (Part VIII, column (A), lines 3-4, and 2d)	5,587,540.	4,817,364.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	161,127.	169,482.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,440.	2,645.
	13 Grants and similar amounts paid (Part IX, column (A), line 1-3)	10,882,468.	9,218,495.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
Expenses	16a Professional fundraising fees (Part IX, column (A), line 11e)	4,388,948.	4,686,977.
	b Total fundraising expenses, Part IX, column (D), line 25 ▶	0.	0.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	5,284,476.	3,894,770.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	9,673,424.	8,581,747.
	19 Revenue less expenses. Subtract line 18 from line 12	1,209,044.	636,748.
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Year	End of Year
	21 Total liabilities (Part X, line 26)	11,176,929.	11,442,272.
	22 Net assets or fund balances Subtract line 21 from line 20	3,241,738.	2,791,633.

Part II Signature Block

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.			
	Signature of officer Richard C.D. Fleming		Date 11/12/10	
Paid Preparer's Use Only	Signature of preparer Richard R. Ruben		Date 11-8-10	
	Firm's name (or yours if self-employed), address, and ZIP + 4 RUBINBROWN LLO ONE NORTH BRENTWOOD SAINT LOUIS, MO 63105		Check if self-employed <input type="checkbox"/> Preparer's identifying number (see instructions) 000325555	
	EIN ▶ 43-0765316		Phone no ▶ 314-290-3300	

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

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

Form 990 (2009)

Part III Statement of Program Service Accomplishments

- 1** Briefly describe the organization's mission:
 PROMOTE THE ST. LOUIS REGION

- 2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No
 If "Yes," describe these new services on Schedule O.
- 3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No
 If "Yes," describe these changes on Schedule O.
- 4** Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code: _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)
 ATTACHMENT 2

4b (Code: _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)
 ATTACHMENT 3

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

4d Other program services. (Describe in Schedule O)
 (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4e Total program service expenses ►

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A		X
2 Is the organization required to complete Schedule B, Schedule of Contributors?	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		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		
5 Sections 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	X	
6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
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		X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V		X
11 Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	X	
• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.		
• Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.		
• Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.		
• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.		
• Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.		
• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X		
12 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.		X
12A Was the organization included in consolidated, independent audited financial statement for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional.	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II.		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H		X

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Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i>		X
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	X	
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, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to question 25.</i>		X
24 b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24 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 d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I.</i>		
25 b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I.</i>		
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? <i>If "Yes," complete Schedule L, Part II.</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III.</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>	X	
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		X
c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV.</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1.</i>	X	
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		
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? <i>If "Yes," complete Schedule R, Part VI.</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	X	

Form 990 (2009)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body	1a 132	
b Enter the number of voting members that are independent	1b 131	
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2 X	
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	X
5 Did the organization become aware during the year of a material diversion of the organization's assets?	5	X
6 Does the organization have members or stockholders?	6 X	
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a X	
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b X	
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	8a X	
b Each committee with authority to act on behalf of the governing body?	8b X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a	X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a Does the organization have local chapters, branches, or affiliates?	10a	X
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?	10b	
11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	X
11A Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	12a X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b X	
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 X	
13 Does the organization have a written whistleblower policy?	13 X	
14 Does the organization have a written document retention and destruction policy?	14 X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	15a X	
b Other officers or key employees of the organization	15b X	
If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions)		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	X
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 ► NONE REQUIRED

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
☐ Own website ☐ Another's 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.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► BEVERLY A. ESTES 1 METROPOLITAN SQ, STE 1300 ST. LOUIS, MO 63102
 314-231-5555

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. Report compensation for the calendar year ending with or within the organization's tax year. 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. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☐ Check this box if the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
JOHN W. BACHMANN PAST CHAIRMAN	1.00	X						0.	0.	0.
ROBERT J. BAER EX-OFFICIO	1.00	X						0.	0.	0.
CHUCK BANKS EX-OFFICIO	1.00	X						0.	0.	0.
DR. ROGER N. BEACHY EX-OFFICIO	1.00	X						0.	0.	0.
JOHN BECK DIRECTOR	1.00	X						0.	0.	0.
BRENT R. BENJAMIN EX-OFFICIO	1.00	X						0.	0.	0.
RICHARD E. BEUMER PAST CHAIRMAN	1.00	X						0.	0.	0.
F. GILBERT BICKEL, III EX-OFFICIO	1.00	X						0.	0.	0.
TERENCE E. BLOCK DIRECTOR	1.00	X						0.	0.	0.
GREGORY H. BOYCE DIRECTOR	1.00	X						0.	0.	0.
DR. JAMES B. BULLARD DIRECTOR	1.00	X						0.	0.	0.
MARK E. BURKHART DIRECTOR	1.00	X						0.	0.	0.
THOMAS J. CAMPBELL CHAIR-PUBLIC POLICY, EXEC COMM	1.00	X						0.	0.	0.
GERALD J. CARLSON DIRECTOR	1.00	X						0.	0.	0.
JAMES A. CLOAR EX-OFFICIO	1.00	X						0.	0.	0.
JEFFREY S. COOPER DIRECTOR	1.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
STEVEN N. COUSINS GENERAL COUNSEL, EXEC COMM	1.00	X						0.	0.	0.
ERIC A. COWAN DIRECTOR	1.00	X						0.	0.	0.
ROBERT M. COX DIRECTOR	1.00	X						0.	0.	0.
DR. WILLIAM H. DANFORTH EX-OFFICIO	1.00	X						0.	0.	0.
MARK C. DARRELL DIRECTOR	1.00	X						0.	0.	0.
CLARK S. DAVIS, FAIA CHAIRMAN-INFRASTRUCTURE, E.C.	1.00	X						0.	0.	0.
MICHAEL A. DECOLA EX-OFFICIO	1.00	X						0.	0.	0.
DENNY DENARVAEZ DIRECTOR	1.00	X						0.	0.	0.
DR. JAMES M. DENNIS EX-OFFICIO	1.00	X						0.	0.	0.
WILLIAM O. DEWITT, III DIRECTOR	1.00	X						0.	0.	0.
DANIEL J. DOLAN DIRECTOR	1.00	X						0.	0.	0.
GARY C. DOLLAR EX-OFFICIO	1.00	X						0.	0.	0.
ARNOLD W. DONALD DIRECTOR	1.00	X						0.	0.	0.
1b Total CONTINUED AT SCHEDULE J-2								1,663,462.	0.	401,354.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **17**

- 3** Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4	X	
5		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 4		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **2**

Part VIII Statement of Revenue

43-0975222

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions) . .	1e	601,697			
	f	All other contributions, gifts, grants, and similar amounts not included above .	1f	3,627,307			
	g	Noncash contributions included in lines 1a-1f \$		256,008			
	h	Total. Add lines 1a-1f		4,229,004			
Program Service Revenue	2a	SPECIAL MEETINGS	Business Code	500,987	500,987		
	b	PROGRAM EVENTS		374,963	374,963		
	c	PUBLICATIONS		19,896	19,896		
	d	MEMBERSHIP DUES		3,921,518	3,921,518		
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		4,817,364			
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		169,482		
4		Income from investment of tax-exempt bond proceeds . . .		0			
5		Royalties		0			
		(i) Real	(ii) Personal				
6a		Gross Rents					
b		Less: rental expenses					
c		Rental income or (loss)					
d		Net rental income or (loss)		0			
7a		Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
b		Less: cost or other basis and sales expenses					
c		Gain or (loss)					
d		Net gain or (loss)		0			
8a		Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a				
b		Less: direct expenses	b				
c		Net income or (loss) from fundraising events		0			
9a	Gross income from gaming activities. See Part IV, line 19	a					
b	Less: direct expenses	b					
c	Net income or (loss) from gaming activities		0				
10a	Gross sales of inventory, less returns and allowances	a					
b	Less: cost of goods sold	b					
c	Net income or (loss) from sales of inventory		0				
Miscellaneous Revenue			Business Code				
11a	MISCELLANEOUS		2,645			2,645	
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d		2,645				
12	Total Revenue. See instructions		9,218,495	4,817,364	0	172,127	

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 not include amounts reported on lines 6b, 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 . . .	0.			
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	0.			
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0.			
4 Benefits paid to or for members	0.			
5 Compensation of current officers, directors, trustees, and key employees	1,060,816.			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . .	0.			
7 Other salaries and wages	2,812,717.			
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . .	279,102.			
9 Other employee benefits	281,380.			
10 Payroll taxes	252,962.			
11 Fees for services (non-employees)				
a Management	0.			
b Legal	0.			
c Accounting	0.			
d Lobbying	0.			
e Professional fundraising services See Part IV, line 17	0.			
f Investment management fees	0.			
g Other	0.			
12 Advertising and promotion	0.			
13 Office expenses	56,451.			
14 Information technology	0.			
15 Royalties	0.			
16 Occupancy	477,301.			
17 Travel	151,707.			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings	307,899.			
20 Interest	0.			
21 Payments to affiliates	0.			
22 Depreciation, depletion, and amortization	181,980.			
23 Insurance	45,723.			
24 Other expenses. Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a <u>EMPLOYEE FUNCTIONS & CORPORA</u>	38,653.			
b <u>PROFESSIONAL FEES</u>	86,008.			
c <u>EQUIPMENT MAINTENANCE</u>	74,400.			
d <u>AUTO LEASES</u>	38,044.			
e <u>REGISTRATION FEES & PROFESSI</u>	7,832.			
f All other expenses	2,428,772.			
25 Total functional expenses. Add lines 1 through 24f	8,581,747.			
26 Joint Costs. Check here <input type="checkbox"/> If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	2,467,086.	1	7,726,237.
	2 Savings and temporary cash investments	6,771,219.	2	1,540,462.
	3 Pledges and grants receivable, net	75,000.	3	80,000.
	4 Accounts receivable, net		4	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	128,372.	9	144,414.
	10a Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D	3,607,939.		
	b Less: accumulated depreciation	2,432,884.	10c	1,175,055.
	11 Investments - publicly traded securities	11,154.	11	109,097.
	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	785,657.	15	667,007.
16 Total assets. Add lines 1 through 15 (must equal line 34)	11,176,929.	16	11,442,272.	
Liabilities	17 Accounts payable and accrued expenses	1,092,392.	17	864,181.
	18 Grants payable		18	
	19 Deferred revenue	1,106,186.	19	979,711.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D	1,043,160.	25	947,741.
	26 Total liabilities. Add lines 17 through 25	3,241,738.	26	2,791,633.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	6,366,830.	27	7,268,474.
	28 Temporarily restricted net assets	1,568,361.	28	1,382,165.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	7,935,191.	33	8,650,639.
34 Total liabilities and net assets/fund balances	11,176,929.	34	11,442,272.	

Form 990 (2009)

Part XI Financial Statements and Reporting

	Yes	No
1 Accounting method used to prepare the Form 990. <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		X
2b Were the organization's financial statements audited by an independent accountant?	X	
2c If "Yes" to line 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both. <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
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?		X
3b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Form **990** (2009)

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities
For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶ **Complete if the organization is described below.**
▶ **Attach to Form 990 or Form 990-EZ.** ▶ **See separate instructions**

OMB No 1545-0047

2009

Open to Public Inspection

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

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

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

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

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

- Section 501(c)(4), (5), or (6) organizations. Complete Part III

Name of organization ST LOUIS REGIONAL CHAMBER AND GROWTH ASSOCIATION	Employer identification number 43-0975222
---	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

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

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
- 4a Was a correction made? ☐ Yes ☐ No
- b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$
- 4 Did the filing organization file Form 1120-POL for this year? ☐ Yes ☐ No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

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

Schedule C (Form 990 or 990-EZ) 2009

JSA
9E1264 2 000

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check ☐ if the filing organization belongs to an affiliated group.
B Check ☐ if the filing organization checked box A and "limited control" provisions apply.

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

4-Year Averaging Period Under Section 501(h)
 (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2 a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2009

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

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

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

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

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes."

1 Dues, assessments and similar amounts from members	1	3,921,518.
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	364,305.
b Carryover from last year	2b	19,788.
c Total	2c	384,093.
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	392,152.
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	-8,059.

Part IV Supplemental Information

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

Part IV Supplemental Information (continued)

Area with horizontal dashed lines for supplemental information.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization ST LOUIS REGIONAL CHAMBER AND
GROWTH ASSOCIATION

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2009

Open to Public
Inspection

Employer identification number
43-0975222

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

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

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 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
d Number of conservation easements included in (c) acquired after 8/17/06	2d

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

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

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

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

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

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

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

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

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

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

(i) Revenues included in Form 990, Part VIII, line 1 ► \$ _____

(ii) Assets included in Form 990, Part X ► \$ _____

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

a Revenues included in Form 990, Part VIII, line 1 ► \$ _____

b Assets included in Form 990, Part X ► \$ _____

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

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

- ☐ a Public exhibition ☐ d Loan or exchange programs
☐ b Scholarly research ☐ e Other _____
☐ c Preservation for future generations

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

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

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

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

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

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

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

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

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

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

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

- a Board designated or quasi-endowment ► _____ %
 b Permanent endowment ► _____ %
 c Term endowment ► _____ %

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

- (i) unrelated organizations
 (ii) related organizations

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

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

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

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		1,456,241	465,991	990,250
d Equipment				
e Other		2,151,698	1,966,893	184,805
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)).				1,175,055

Schedule D (Form 990) 2009

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

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

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

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

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value

Total. (Column (b) must equal Form 990, Part X, col (B) line 13) ▶		

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

(a) Description	(b) Book value
MISCELLANEOUS RECEIVABLES	160,321.
DUE TO/FROM AFFILIATES	135,763.
OTHER ASSETS	326,667.
INVESTMENT IN COMMERCE MAG	500.
EQUITY IN COMMERCE MAG	43,756.

Total. (Column (b) must equal Form 990, Part X, col (B) line 15) ▶	667,007.

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

1. (a) Description of liability	(b) Amount
Federal income taxes	
DEFERRED RENT EXPENSE	947,741.

Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	947,741.

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

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

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

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

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

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses 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:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	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:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	

Part XIV Supplemental Information

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

Part XIV Supplemental Information *(continued)*

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization **ST LOUIS REGIONAL CHAMBER AND GROWTH ASSOCIATION**

Employer identification number
43-0975222

Part I Questions Regarding Compensation

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

☐ First-class or charter travel

☐ Travel for companions

☐ Tax indemnification and gross-up payments

☐ Discretionary spending account

☐ Housing allowance or residence for personal use

☐ Payments for business use of personal residence

☒ Health or social club dues or initiation fees

☐ Personal services (e.g., maid, chauffeur, chef)

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

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

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

☒ Compensation committee

☐ Independent compensation consultant

☒ Form 990 of other organizations

☒ Written employment contract

☒ Compensation survey or study

☒ Approval by the board or compensation committee

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

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

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

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

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

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

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

a The organization?

b Any related organization?

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

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

a The organization?

b Any related organization?

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

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

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

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1b X

2 X

4a X

4b X

4c X

5a

5b

6a

6b

7

8

9

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

Schedule J (Form 990) 2009

Part III Supplemental Information

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

PART II

RICHARD C. D. FLEMING

COLUMN (B) (III) PRESIDENT FLEMING'S 2009 COMPENSATION INCLUDED A PAYOUT

OF \$196,351 RESULTING FROM PROVISIONS OF HIS BOARD APPROVED, MULTI-YEAR

DEFERRED RETIREMENT PLAN. THE PLAN AND HIS EMPLOYMENT AGREEMENT

COMMENCED IN 1999. COLUMN (C) IN 2009, PRESIDENT FLEMING'S DEFERRED

COMPENSATION RETIREMENT PLAN AWARD WAS \$65,000.

**SCHEDULE J-2
(Form 990)**

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

▶ See the Instructions for Form 990.

OMB No 1545-0047

2009

**Open to Public
Inspection**

Name of the Organization **ST LOUIS REGIONAL CHAMBER AND
GROWTH ASSOCIATION**

Employer identification number
43-0975222

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MSC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
HONORABLE CHARLIE A. DOOLEY EX-OFFICIO	1.00	X						0.	0.	0.
CHARLES L. DRURY, JR. DIRECTOR	1.00	X						0.	0.	0.
DR. BERNARD J. DUBRAY EX-OFFICIO	1.00	X						0.	0.	0.
HONORABLE ALAN J. DUNSTAN EX-OFFICIO	1.00	X						0.	0.	0.
L.B. ECKELKAMP, JR. DIRECTOR	1.00	X						0.	0.	0.
HONORABLE STEVE EHLMANN EX-OFFICIO	1.00	X						0.	0.	0.
JAMES D. EVANS, PH.D. EX-OFFICIO	1.00	X						0.	0.	0.
GERALD T. FELDHAUS EX-OFFICIO	1.00	X						0.	0.	0.
DONALD E. FRAIL, PH.D. DIRECTOR	1.00	X						0.	0.	0.
CLIFFORD FRANKLIN DIRECTOR	1.00	X						0.	0.	0.
PETER J. GENOVESE DIRECTOR	1.00	X						0.	0.	0.
DR. NEIL J. GEORGE EX-OFFICIO	1.00	X						0.	0.	0.
DR. THOMAS F. GEORGE EX-OFFICIO	1.00	X						0.	0.	0.
TODD M. GEORGE DIRECTOR	1.00	X						0.	0.	0.
DR. HENRY GIVENS, JR. EX-OFFICIO	1.00	X						0.	0.	0.
DEREK GLANVILL DIRECTOR	1.00	X						0.	0.	0.
LAURNA GODWIN DIRECTOR	1.00	X						0.	0.	0.
DR. DENNIS C. GOLDEN EX-OFFICIO	1.00	X						0.	0.	0.
RHONDA HAMM-NIEBRUEGGE DIRECTOR	1.00	X						0.	0.	0.
MARK A. HARMS DIRECTOR	1.00	X						0.	0.	0.
DR. ZELMA HARRIS EX-OFFICIO	1.00	X						0.	0.	0.

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

Schedule J-2 (Form 990) 2009

SCHEDULE J-2
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

▶ See the Instructions for Form 990.

OMB No 1545-0047

2009

**Open to Public
Inspection**

Name of the Organization **ST LOUIS REGIONAL CHAMBER AND
GROWTH ASSOCIATION**

Employer identification number
43-0975222

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
TRACY E. HART CHAIRMAN-ENVIRONMENT, E.C.	1.00	X						0.	0.	0.
CARL L HAUSMANN DIRECTOR	1.00	X						0.	0.	0.
ED HILLHOUSE EX-OFFICIO	1.00	X						0.	0.	0.
DAVID H. HOFFMANN DIRECTOR	1.00	X						0.	0.	0.
BRUCE B. HOLLAND DIRECTOR	1.00	X						0.	0.	0.
DEBRA HOLLINGSWORTH DIRECTOR	1.00	X						0.	0.	0.
JANET M. HOLLOWAY V.C.-PUBLIC POLICY, E.C.	1.00	X						0.	0.	0.
MICHAEL R. HOLMES DIRECTOR	1.00	X						0.	0.	0.
JOSEPH F. IMBS, III DIRECTOR	1.00	X						0.	0.	0.
LEE R. KAPLAN DIRECTOR	1.00	X						0.	0.	0.
PATRICK KELLETT EX-OFFICIO	1.00	X						0.	0.	0.
DR. JAMES R. KIMMEY, MD, MAI DIRECTOR	1.00	X						0.	0.	0.
RODNEY KINZINGER CHAIR-AUDIT COMM, E.C.	1.00	X						0.	0.	0.
WARD M. KLEIN DIRECTOR	1.00	X						0.	0.	0.
GEORGE E. KLENOVICH DIRECTOR	1.00	X						0.	0.	0.
DOUGLAS W. KOCH DIRECTOR	1.00	X						0.	0.	0.
PHILLIP J. KOEN DIRECTOR	1.00	X						0.	0.	0.
FRED KRATKY DIRECTOR	1.00	X						0.	0.	0.
DON LENTS C.S., EXECUTIVE COMMITTEE	1.00	X						0.	0.	0.
STEVEN H. LIPSTEIN DIRECTOR	1.00	X						0.	0.	0.
MARK LOMBARDI, PH.D. EX-OFFICIO	1.00	X						0.	0.	0.

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

Schedule J-2 (Form 990) 2009

SCHEDULE J-2
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

► Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

► See the Instructions for Form 990.

OMB No 1545-0047

2009

**Open to Public
Inspection**

Name of the Organization **ST LOUIS REGIONAL CHAMBER AND
GROWTH ASSOCIATION**

Employer identification number
43-0975222

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
DAVID R. LUCKES EX-OFFICIO	1.00	X						0.	0.	0.
DANNY LUDEMAN CHAIR-ECON DEVEL, E.C.	1.00	X						0.	0.	0.
W. STEPHEN MARITZ DIRECTOR	1.00	X						0.	0.	0.
MATT MATTHEWS DIRECTOR	1.00	X						0.	0.	0.
RICHARD H. MCCLURE EX-OFFICIO	1.00	X						0.	0.	0.
TIM MCGOWAN DIRECTOR	1.00	X						0.	0.	0.
CHRISTOPHER P. MCKEE, JR. DIRECTOR	1.00	X						0.	0.	0.
PETER MCLOUGHLIN DIRECTOR	1.00	X						0.	0.	0.
WILLIAM P. MCNAMARA CHAIR-MEMBERSHIP, E.C.	1.00	X						0.	0.	0.
THOMAS J. MINOGUE DIRECTOR	1.00	X						0.	0.	0.
PATRICK J. MOORE DIRECTOR	1.00	X						0.	0.	0.
KEVIN MOWBRAY DIRECTOR	1.00	X						0.	0.	0.
JAMES J. MURPHY, JR. DIRECTOR	1.00	X						0.	0.	0.
RICHARD A. NAVARRRE DIRECTOR	1.00	X						0.	0.	0.
MICHAEL F. NEIDORFF DIRECTOR	1.00	X						0.	0.	0.
A. BRUCE NEIL DIRECTOR	1.00	X						0.	0.	0.
BRENDA D. NEWBERRY CHAIRMAN-BUS SERVICES, E.C.	1.00	X						0.	0.	0.
GRACE NICHOLS EX-OFFICIO	1.00	X						0.	0.	0.
ROBERT F. O'LOUGHLIN DIRECTOR	1.00	X						0.	0.	0.
DR. WILLIAM A. PECK EX-OFFICIO	1.00	X						0.	0.	0.
ROBERT L. PLUMMER DIRECTOR	1.00	X						0.	0.	0.

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

Schedule J-2 (Form 990) 2009

**SCHEDULE J-2
(Form 990)**

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

▶ See the Instructions for Form 990.

OMB No 1545-0047

2009

**Open to Public
Inspection**

Name of the Organization **ST LOUIS REGIONAL CHAMBER AND
GROWTH ASSOCIATION**

Employer identification number
43-0975222

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
JEFFRY N. QUINN DIRECTOR	1.00	X						0.	0.	0.
GARY L. RAINWATER IMMEDIATE PAST CHAIRMAN, E.C.	1.00	X						0.	0.	0.
DEREK K. RAPP DIRECTOR	1.00	X						0.	0.	0.
ERIC RHONE DIRECTOR	1.00	X						0.	0.	0.
STEVEN C. ROBERTS DIRECTOR	1.00	X						0.	0.	0.
SALLY H. ROTH DIRECTOR	1.00	X						0.	0.	0.
CASSANDRA SANFORD DIRECTOR	1.00	X						0.	0.	0.
JAMES M. SANGER DIRECTOR	1.00	X						0.	0.	0.
TIMOTHY G. SANSONE DIRECTOR	1.00	X						0.	0.	0.
RICHARD A. SAUGET DIRECTOR	1.00	X						0.	0.	0.
RANDY L. SCHILLING DIRECTOR	1.00	X						0.	0.	0.
WILLIAM SCHNETTGOECKE, JR. DIRECTOR	1.00	X						0.	0.	0.
SCOTT C. SCHNUCK PAST CHAIRMAN	1.00	X						0.	0.	0.
TODD R. SCHNUCK DIRECTOR	1.00	X						0.	0.	0.
JOHN A. SCHREIBER DIRECTOR	1.00	X						0.	0.	0.
HERMAN L. SEEDORF, III DIRECTOR	1.00	X						0.	0.	0.
JOHN SHEEHAN DIRECTOR	1.00	X						0.	0.	0.
ELLEN SHERBERG DIRECTOR	1.00	X						0.	0.	0.
DOUGLAS D. SITTON DIRECTOR	1.00	X						0.	0.	0.
HONORABLE FRANCIS SLAY EX-OFFICIO	1.00	X						0.	0.	0.
STEPHEN A. SMITH DIRECTOR	1.00	X						0.	0.	0.

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

Schedule J-2 (Form 990) 2009

SCHEDULE J-2
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

▶ See the Instructions for Form 990.

OMB No. 1545-0047

2009

**Open to Public
Inspection**

Name of the Organization **ST LOUIS REGIONAL CHAMBER AND
GROWTH ASSOCIATION**

Employer identification number
43-0975222

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MSC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
PETER SORTINO EX-OFFICIO	1.00	X						0.	0.	0.
ROBERT SOUTIER EX-OFFICIO	1.00	X						0.	0.	0.
DAVID L. STEWARD DIRECTOR	1.00	X						0.	0.	0.
DR. DONALD M. SUGGS DIRECTOR	1.00	X						0.	0.	0.
RICHARD T. SULLIVAN, JR. EX-OFFICIO	1.00	X						0.	0.	0.
DR. ANTHONY R. TERSIGNI DIRECTOR	1.00	X						0.	0.	0.
NANCY HADLER TULLY DIRECTOR	1.00	X						0.	0.	0.
DR. VAUGHN VANDEGRIFT EX-OFFICIO	1.00	X						0.	0.	0.
JAMES VILLENEUVE DIRECTOR	1.00	X						0.	0.	0.
THOMAS R. VOSS DIRECTOR	1.00	X						0.	0.	0.
ROBERT E. WALLACE, JR. DIRECTOR	1.00	X						0.	0.	0.
JAMES D. WEDDLE DIRECTOR	1.00	X						0.	0.	0.
PATRICIA D. WHITAKER, IIDA DIRECTOR	1.00	X						0.	0.	0.
ROBERT J. WITTERSCHEIN CHAIR-MEMBERSHIP, E.C.	1.00	X						0.	0.	0.
DR. MARK S. WRIGHTON EX-OFFICIO	1.00	X						0.	0.	0.
DOUGLAS H. YAEGER PAST CHAIRMAN, EXECUTIVE COMM	1.00	X						0.	0.	0.
SCOTT A. ZAJAC DIRECTOR	1.00	X						0.	0.	0.
MICHAEL A. ZAMBRANA DIRECTOR	1.00	X						0.	0.	0.
R. FLEMING PRES&CEO, SEE SCH J FOR DETAIL	40.00	X		X				467,707.	0.	136,253.
R FLEMING (MULTI-YR RETIREMENT PMT) PRES&CEO, SEE SCH J FOR DETAIL	40.00	X		X				196,351.	0.	0.
BRETT CAMPBELL DIRECTOR	1.00	X						0.	0.	0.

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

Schedule J-2 (Form 990) 2009

Continuation Sheet for Form 990

OMB No. 1545-0047

2009

Open to Public Inspection

▶ **Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.**

► See the Instructions for Form 990.

Name of the Organization ST LOUIS REGIONAL CHAMBER AND
GROWTH ASSOCIATION

Employer identification number
43-0975222

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

[illegible]

SCHEDULE L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

▶ **Complete if the organization answered**
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.
▶ **Attach to Form 990 or Form 990-EZ.** ▶ **See separate instructions.**

OMB No 1545-0047

2009

**Open To Public
Inspection**

Name of the organization ST LOUIS REGIONAL CHAMBER AND
GROWTH ASSOCIATION

Employer identification number
43-0975222

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

- 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ▶ \$ _____
- 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ _____

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a.

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
Total ▶ \$ _____										

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount and type of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
ATTACHMENT 5					

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

Schedule L (Form 990 or 990-EZ) 2009

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

► **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
► **Attach to Form 990.**

OMB No 1545-0047

2009

**Open To Public
Inspection**

Name of the organization **ST LOUIS REGIONAL CHAMBER AND
GROWTH ASSOCIATION**

Employer identification number
43-0975222

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art-Works of art				
2 Art-Historical treasures				
3 Art-Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities-Publicly traded				
10 Securities-Closely held stock				
11 Securities-Partnership, LLC, or trust interests				
12 Securities-Miscellaneous				
13 Qualified conservation contribution-Historic structures				
14 Qualified conservation contribution-Other				
15 Real estate-Residential				
16 Real estate-Commercial				
17 Real estate-Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (ADVERTISING)	X		222,372.	MARKET VALUE
26 Other ► (AIRLINE TICKETS)	X		16,772.	MARKET VALUE
27 Other ► (SPORT TICKETS)	X		6,300.	MARKET VALUE
28 Other ► (LODGING)	X		10,564.	MARKET VALUE

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, line 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) 2009

JSA

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Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Area for supplemental information with horizontal dashed lines.

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No 1545-0047

2009

**Open to Public
Inspection**

Name of the organization ST LOUIS REGIONAL CHAMBER AND
GROWTH ASSOCIATION

Employer identification number
43-0975222

ATTACHMENT 1

FAMILY OR BUSINESS RELATIONSHIPS

PART VI, SECTION A, QUESTION 2

RCGA PAST CHAIRMAN OF THE BOARD SCOTT C. SCHNUCK AND RCGA DIRECTOR TODD
R. SCHNUCK ARE BROTHERS. THE RCGA BOARD OF DIRECTORS REPRESENTS A BROAD
CROSS SECTION OF BUSINESS AND GOVERNMENT INTERESTS WITHIN ST. LOUIS AND
THE SURROUNDING COUNTIES IN MISSOURI AND ILLINOIS. BOARD OF DIRECTORS
MEMBERS AND EMPLOYEES EXECUTE ANNUAL CONFLICTS OF INTEREST STATEMENTS.
THERE ARE NO KNOWN BUSINESS OR FAMILY RELATIONSHIPS IDENTIFIED WITHIN THE
BOARD OR EMPLOYEES THAT REPRESENT A CONFLICT OF INTEREST.

ORGANIZATION MEMBERS

PART VI, SECTION A, QUESTIONS 6 & 7

THE ORGANIZATION IS MADE UP OF MEMBERS.

990 REVIEW PROCESS

PART VI, SECTION B, QUESTION 11

A DRAFT OF THE FORM 990 IS PROVIDED TO SELECTED BOARD MEMBERS FOR REVIEW
PRIOR TO FILING.

CONFLICT OF INTEREST

PART VI, SECTION B, QUESTION 12

BOARD OF DIRECTORS MEMBERS AND EMPLOYEES EXECUTE ANNUAL CONFLICTS OF
INTEREST STATEMENTS. THE AUDIT COMMITTEE CHAIRMAN REVIEWS ANNUALLY AND
REPORTS SUCH ACTION TO THE AUDIT COMMITTEE.

Name of the organization ST LOUIS REGIONAL CHAMBER AND
GROWTH ASSOCIATION

Employer identification number
43-0975222

ATTACHMENT 1 (CONT'D)

COMPENSATION

PART VI, SECTION B, QUESTION 15

THE COMPENSATION COMMITTEE REVIEWS AND APPROVES THE CEO'S COMPENSATION.
AFTER THE COMPENSATION COMMITTEE REVIEWS AND APPROVES THE CEO'S
COMPENSATION, IT IS ALSO APPROVED BY THE EXECUTIVE COMMITTEE AND BOARD OF
DIRECTORS. SALARIES OF OTHER OFFICERS AND KEY EMPLOYEES ARE REVIEWED BY
THE CEO AND CHAIRMAN.

DOCUMENT AVAILABILITY

PART VI, SECTION C, QUESTION 19

DOCUMENTS, POLICIES AND STATEMENTS AVAILABLE UPON WRITTEN REQUEST.

ATTACHMENT 2

4A PROGRAM SERVICE

PUBLIC POLICY MISSOURI ACCOMPLISHMENTS FOR 2009 INCLUDE:

- SUCCESSFULLY DEFEATED PROPOSALS TO SUBJECT TAX CREDIT TO THE
APPROPRIATIONS PROCESS AND TO IMPLEMENT NEAR-TERM SUNSETS.
- SUCCESSFULLY ADVOCATED FOR MISSOURI QUALITY JOBS CAP INCREASED
FROM \$60 MILLION TO \$80 MILLION; MISSOURI BUILD CAP INCREASED FROM
\$15 MILLION TO \$25 MILLION; NEW MARKETS CAP INCREASED FROM \$15
MILLION TO \$25 MILLION; AND DISTRESSED AREA LAND ASSEMBLAGE CAP
INCREASED FROM \$10 MILLION TO \$20 MILLION.
- RCGA LED AN EFFORT WITH OTHER ECONOMIC DEVELOPMENT ORGANIZATIONS
TO BUILD COALITION SUPPORT FOR A COMPREHENSIVE SCIENCE AND
TECHNOLOGY PROPOSAL IN THE 2010 SESSION. THE MOSIRA BILL
CONTAINED A "CONTINUUM OF CAPITAL" FEATURE BASED ON THE RCGA'S

Name of the organization ST LOUIS REGIONAL CHAMBER AND
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FORM 990, PART III - PROGRAM SERVICES

ATTACHMENT 2 (CONT'D)

"GROW ME STATE" INITIATIVE.

- SUPPORTED INCREASED FUNDING FOR TRANSIT SYSTEM EXPANSION AND
OPERATIONS AND SUPPORT EMERGENCY FUNDING TO RESTORE METRO SERVICE.

THE GENERAL ASSEMBLY PASSED \$12 MILLION EMERGENCY APPROPRIATION
FOR METRO TO RESTORE SERVICES.

- STRONG RCGA DELEGATION FOR MISSOURI LEGISLATIVE DAY IN JEFFERSON
CITY, AND LEWIS & CLARK STATESMAN AWARDS HAD OUTSTANDING
ATTENDANCE.

ILLINOIS ACCOMPLISHMENTS FOR 2009 INCLUDE:

- SUCCESSFULLY ADVOCATED FOR PASSAGE OF THE \$34 BILLION "ILLINOIS
WORKS" PROGRAM TO ADDRESS THE STATE'S INFRASTRUCTURE NEEDS.

- ACHIEVED FUNDING WITHIN ILLINOIS DEPARTMENT OF TRANSPORTATION
BUDGET FOR THE NEW MISSISSIPPI RIVER BRIDGE.

- ACTIVELY PARTICIPATED IN THE EFFORT FOR PASSAGE OF THE ILLINOIS
INCOME TAX ACT TO CREATE A CREDIT EQUAL TO 10% OF THE AMOUNT SPENT
DURING THE TAXABLE YEAR ON EQUIPMENT PURCHASED FOR USE AT AN
ENERGY FACILITY.

- ADVANCED THE PASSAGE OF BIO TAX CREDIT LEGISLATION.

- SUCCESSFULLY OPPOSED WAGE LEGISLATION IN ENTERPRISE ZONES AND IN
TIF DISTRICTS.

FEDERAL ACCOMPLISHMENTS FOR 2009 INCLUDE:

- WORKED TO SUPPORT ST. LOUIS-BASED AIRCRAFT MANUFACTURING
PROGRAMS.

- WORKED WITH LEADERSHIP COUNCIL SOUTHWESTERN ILLINOIS AND LEVEE
DISTRICT TO DEVELOP AND IMPLEMENT SOLUTIONS FOR FLOOD PLAIN

Name of the organization ST LOUIS REGIONAL CHAMBER AND
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FORM 990, PART III - PROGRAM SERVICES

ATTACHMENT 2 (CONT'D)

ISSUES.

INFRASTRUCTURE PROGRAM FOR 2009 INCLUDED THE FOLLOWING

ACCOMPLISHMENTS:

- WORKED TO ENSURE TIMELY ADVANCEMENT OF THE NEW MISSISSIPPI RIVER BRIDGE PROJECT.
- WORKED TO EDUCATE AND ENSURE MINIMAL ADVERSE IMPACT ON REGIONAL BUSINESSES DURING THE I-64 HIGHWAY RECONSTRUCTION PROJECT.
- ACTIVELY WORKED TO ENGAGE AND EDUCATE ELECTED OFFICIALS AND THE PUBLIC ON THE URGENT NEED FOR ADDITIONAL TRANSPORTATION FUNDING IN MISSOURI.
- SUPPORTED A SUPERIOR REGIONAL TRANSPORTATION SYSTEM THAT WILL SERVE AS A STRATEGIC ASSET FOR ECONOMIC GROWTH.

ENERGY & ENVIRONMENT PROGRAM FOR 2009 INCLUDED THE FOLLOWING

ACCOMPLISHMENTS:

- CREATED THE ST. LOUIS CLIMATE PROSPERITY PROJECT TO HELP MAKE ST. LOUIS A GREENBELT REGION THAT IS HOME TO GREEN SAVINGS, GREEN OPPORTUNITIES AND GREEN TALENT.
- ESTABLISHED THE ST. LOUIS GREEN BUSINESS CHALLENGE TO INSPIRE COMPANIES TO ADOPT SUSTAINABLE BUSINESS PRACTICES AND ADVANCE THE MISSION OF THE ST. LOUIS CLIMATE PROSPERITY PROJECT.
- WORKED TO EDUCATE THE ST. LOUIS REGIONAL BUSINESS COMMUNITY ON SUSTAINABLE BUSINESS PRACTICES BY HOSTING SEMINARS/MEETINGS AND ENGAGED REGIONAL POLICYMAKERS.

Name of the organization ST LOUIS REGIONAL CHAMBER AND
GROWTH ASSOCIATION

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FORM 990, PART III - PROGRAM SERVICESATTACHMENT 34B PROGRAM SERVICE

ECONOMIC DEVELOPMENT: THE GOALS OF THE ECONOMIC DEVELOPMENT INITIATIVE ARE TO ATTRACT NEW BUSINESSES TO THE ST. LOUIS REGION, AND FACILITATE EXISTING COMPANY EXPANSIONS AND TECH-BASED STARTUP COMPANIES THAT WOULD NOT HAVE OTHERWISE OCCURRED. THE YEAR 2009 WAS THE FIFTH YEAR OF THE FIVE-YEAR (2005-2009) STRATEGIC PLAN FOCUSED ON REGIONAL MARKETING AND BRANDING; INCREASED ECONOMIC DEVELOPMENT "DEAL" FLOW; NARROWLY DEFINED PERFORMANCE MEASURES; INCREASED COMMUNICATION TO INVESTORS; AND STREAMLINED GOVERNANCE TO OVERSEE THE STRATEGIC PLAN, AS WELL AS ASSOCIATED FUNDING.

ACCOMPLISHMENTS IN 2009 INCLUDE:

- ORGANIZED 99 HIGHLY-TARGETED, ONE-ON-ONE BRIEFINGS WITH PROSPECTIVE EMPLOYERS AND NATIONAL SITE SELECTION CONSULTANTS.
- STAGED 15 MARKETING EVENTS THROUGHOUT THE COUNTRY.
- MET WITH 45 LARGE ST. LOUIS-BASED EMPLOYERS TO EXPLORE EXPANSION OPPORTUNITIES.
- COLLABORATED WITH REGIONAL PARTNERS ON 39 IN-MARKET SITE VISITS LEADING TO TWO SUCCESSFUL RECRUITMENT PROJECTS RESULTING IN 248 NEW JOBS WITH COMBINED ANNUAL PAYROLL OF \$6.8 MILLION AND OVER \$2.15 MILLION IN NEW CAPITAL INVESTMENT FOR THE REGION.
- CONTINUED OUR LEADERSHIP ROLE IN THE REGIONAL CHINA INITIATIVE, IN COLLABORATION WITH THE MIDWEST CHINA HUB COMMISSION.
- CONTINUED THE GREATER ST. LOUIS LEADERSHIP INSTITUTE, WHICH

Name of the organization ST LOUIS REGIONAL CHAMBER AND
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FORM 990, PART III - PROGRAM SERVICES

ATTACHMENT 3 (CONT'D)

BROUGHT SOME 100 AREA ECONOMIC DEVELOPMENT PROFESSIONALS IN
CONTACT WITH SUBJECT-MATTER EXPERTS RELATED TO ECONOMIC
DEVELOPMENT.

- HOSTED 25 NEW YORK AREA SITE LOCATION ADVISORS AND CORPORATE
OFFICIALS TO A RECEPTION AND CARNEGIE HALL PERFORMANCE BY THE ST.
LOUIS SYMPHONY ORCHESTRA.

- WORKED WITH TWO TECHNOLOGY-BASED COMPANIES TO SUCCESSFULLY
PROCEED TO THE NEXT DEVELOPMENT STAGE.

- HOSTED NINE TOP-TIER SITE LOCATION ADVISORS TO MAJOR LEAGUE
BASEBALL'S 2009 ALL-STAR GAME IN ST. LOUIS.

WORKFORCE DEVELOPMENT

- CONTINUED TO LEAD THE GREATER ST. LOUIS WORKS PARTNERSHIP TO
ADDRESS THE I.T. WORKFORCE NEEDS OF THE ST. LOUIS METROPOLITAN
AREA. ACTIVITIES INCLUDE IMPLEMENTING "BOUNCEBACK ST. LOUIS," A
NETWORKING FORUM FOR DISPLACED I.T. WORKERS IN THE REGION THAT
SEEK TO CONNECT WITH EMPLOYERS ACTIVELY SEARCHING FOR I.T. TALENT.

ATTACHMENT 4

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

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
BLAIR FORLAW OF B. FORLAW, LLC 300 JEFFERSON ROAD ST. LOUIS, MO 63119	CONSULTING	162,688.
TOTAL COMPENSATION		<u>162,688.</u>

Name of the organization **ST LOUIS REGIONAL CHAMBER AND
GROWTH ASSOCIATION**Employer identification number
43-0975222ATTACHMENT 5SCHEDULE L, PART IV

(A) NAME OF INTERESTED PERSON	(B) RELATIONSHIP	(C) AMOUNT	(D) DESCRIPTION OF TRANSACTION	(E) YES NO
ROBERT BAER	DIRECTOR	6,198	METRO PASSES	X
STEVEN COUSIN	DIRECTOR	38,293	LEGAL COUNCIL	X
ERIC COWAN	DIRECTOR	20,182	MONTHLY BANK FEES	X
WILLIAM DEWITT III	DIRECTOR	38,850	BASEBALL TICKETS	X
DR HENRY GIVENS	DIRECTOR	25,000	A+ CERTICATION EXAM	X
DEBRA HOLLINGSWORTH	DIRECTOR	36,581	PHONE SERVICE	X
WILLIAM MCNAMARA	DIRECTOR	19,700	GIFT CARDS	X
PATRICIA WHITAKER	DIRECTOR	26,223.	ACHITECTURE FEES	X

Part I

[illegible]

Part II
Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

[illegible]

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

Schedule R (Form 990) 2009

43-0975222

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)

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

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

	Yes	No
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	1a	X
b Gift, grant, or capital contribution to other organization(s)	1b	X
c Gift, grant, or capital contribution from other organization(s)	1c	X
d Loans or loan guarantees to or for other organization(s)	1d	X
e Loans or loan guarantees by other organization(s)	1e	X
f Sale of assets to other organization(s)	1f	X
g Purchase of assets from other organization(s)	1g	X
h Exchange of assets	1h	X
i Lease of facilities, equipment, or other assets to other organization(s)	1i	X
j Lease of facilities, equipment, or other assets from other organization(s)	1j	X
k Performance of services or membership or fundraising solicitations for other organization(s)	1k	X
l Performance of services or membership or fundraising solicitations by other organization(s)	1l	X
m Sharing of facilities, equipment, mailing lists, or other assets	1m	X
n Sharing of paid employees	1n	X
o Reimbursement paid to other organization for expenses	1o	X
p Reimbursement paid by other organization for expenses	1p	X
q Other transfer of cash or property to other organization(s)	1q	X
r Other transfer of cash or property from other organization(s)	1r	X

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

	(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

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.

[illegible]

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **X**.
Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print File by the extended due date for filing the return. See instructions.	Name of Exempt Organization	ST LOUIS REGIONAL CHAMBER AND GROWTH ASSOCIATION	Employer identification number	43-0975222
	Number, street, and room or suite no. If a P.O. box, see instructions.	ONE METROPOLITAN SQUARE	For IRS use only	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	ST LOUIS, MO 63102		

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

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

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

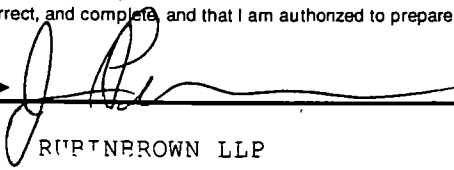
- The books are in the care of **BEVERLY A. ESTES**
Telephone No. **314 231-5555** FAX No. _____
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- I request an additional 3-month extension of time until **11/15/2010**.
- For calendar year **2009**, or other tax year beginning _____, and ending _____.
- If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period
- State in detail why you need the extension **ALL INFORMATION NECESSARY TO COMPLETE AN ACCURATE RETURN IS NOT AVAILABLE AT THIS TIME**

8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$	0.
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$	0.
c	Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	0.

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature  Title **CPA** Date **7/26/2010**

RUPERT BROWN LLP
ONE NORTH BRENTWOOD
SAINT LOUIS, MO 63105

Form 8868 (Rev. 4-2009)

Application for Extension of Time To File an
Exempt Organization Return

OMB No. 1545-1709

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒ **X**
 - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868.

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

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

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

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

Type or print File by the due date for filing your return. See instructions.	Name of Exempt Organization	ST LOUIS REGIONAL CHAMBER AND GROWTH ASSOCIATION	Employer identification number	43-0975222
	Number, street, and room or suite no. If a P.O. box, see instructions.	ONE METROPOLITAN SQUARE		
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	ST LOUIS, MO 63102		

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

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

- The books are in the care of ▶ BEVERLY A. ESTES

Telephone No. ▶ 314 231-5555

FAX No. ▶

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

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 08/15, 2010, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ▶ ☒ calendar year 2009 or
- ▶ ☐ tax year beginning , , and ending , ,

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

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

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

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

Form 8868 (Rev. 4-2009)