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Short Form Return of Organization Exempt From Income Tax

OMB No 1545-1150

2009

Open to Public
InspectionDepartment of the Treasury
Internal Revenue Service

- Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)
- Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.
- The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2009 calendar year, or tax year beginning

07-01, 2009, and ending

06-30, 2010

B Check if applicable

- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

Please
use IRS
label or
print or
type.
See
Specific
Instructions.

C Name of organization

BEREA CHAMBER OF COMMERCE

Number and street (or P O box, if mail is not delivered to street address)

173 FRONT STREET

City or town, state or country, and ZIP + 4

Berea, OH 44017

D Employer identification number

34-0794430

E Telephone number

(440) 243-8415

F Group Exemption

Number ►

- Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting Method. ☒ Cash ☐ Accrual
Other (specify) ►

I Website: ► Bereachamber@sbcglobal.net

J Tax-exempt status (check only one) - ☒ 501(c) (6) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527H Check ☐ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)K Check ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$500,000 or more, file Form 990 instead of Form 990-EZ ► \$ 110,965

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I)

1	Contributions, gifts, grants, and similar amounts received	1	
2	Program service revenue including government fees and contracts	2	42,482
3	Membership dues and assessments	3	53,894
4	Investment income	4	164
5a	Gross amount from sale of assets other than inventory	5a	
5b	Less cost or other basis and sales expenses	5b	
5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
6	Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here ☐		
6a	Gross revenue (not including \$ of contributions reported on line 1)	6a	13,677
6b	Less direct expenses other than fundraising expenses	6b	490
6c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	13,187
7a	Gross sales of inventory, less returns and allowances	7a	
7b	Less cost of goods sold	7b	
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
8	Other revenue (describe ► STM141)	8	748
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	110,475
10	Grants and similar amounts paid (attach schedule)	10	
11	Benefits paid to or for members	11	
12	Salaries, other compensation, and employee benefits	12	38,319
13	Professional fees and other payments to independent contractors	13	
14	Occupancy, rent, utilities, and maintenance	14	6,543
15	Printing, publications, postage, and shipping	15	7,919
16	Other expenses (describe ► STM130)	16	59,280
17	Total expenses. Add lines 10 through 16	17	112,061
18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	(1,586)
19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	62,346
20	Other changes in net assets or fund balances (attach explanation)	20	
21	Net assets or fund balances at end of year Combine lines 18 through 20	21	60,760

Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	62,346	60,760
23 Land and buildings		
24 Other assets (describe ►)		
25 Total assets	62,346	60,760
26 Total liabilities (describe ►)		
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	62,346	60,760

Expenses

(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)

(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)

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1. *Journal of the American Medical Association*, 1997; 277: 1033-1036.

[illegible]

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Part V Other Information (Note the statement requirements in the instructions for Part V)

		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T		
a	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		X
37 a	Enter amount of political expenditures, direct or indirect, as described in the instructions	37a	
b	Did the organization file Form 1120-POL for this year?	37b	X
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a	X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	
39	Section 501(c)(7) organizations Enter		
a	Initiation fees and capital contributions included on line 9	39a	
b	Gross receipts, included on line 9, for public use of club facilities	39b	
40 a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911; section 4912; section 4955		
b	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	
c	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization		
e	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	
41	List the states with which a copy of this return is filed		
42 a	The organization's books are in care of <u>Judy Grotz</u> Telephone no <u>440-243-8415</u> Located at <u>173 Front Street Berea, OH</u> ZIP + 4 <u>44017</u>		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	42b	
c	At any time during the calendar year, did the organization maintain an office outside of the U S ? If "Yes," enter the name of the foreign country.	42c	
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041-Check here and enter the amount of tax-exempt interest received or accrued during the tax year	43	
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44	X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45	X

Part VI**Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section

501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

	Yes	No
46 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	46	
47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	47	
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	
49 a Did the organization make any transfers to an exempt non-charitable related organization?	49a	
b If "Yes," was the related organization a section 527 organization?	49b	

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

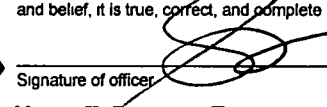
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances

f Total number of other employees paid over \$100,000 ▶ _____

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None "

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation

d Total number of other independent contractors each receiving over \$100,000 . . . ▶ _____

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 	Date <u>11-9-10</u>
	Mary K Brown, Finance Chair Type or print name and title	

Paid Preparer's Use Only	Preparer's signature 	Date _____	Check if self-employed ☐	Preparer's Identifying No. (See inst.) _____
	Firm's name (or yours if self-employed), address, and ZIP + 4 _____		EIN _____	
			Phone no. _____	

May the IRS discuss this return with the preparer shown above? See instructions ☐ Yes ☐ No

Federal Supporting Statements

2009

Name(s) as shown on return

FEIN

Form 990EZ, Part I, Line 16 Other Expenses Schedule 2

<u>Description</u>	<u>Amount</u>
Advertising	3,222
Bank Charges	25
Contributions	875
Credit Card chgs	1,066
Telephone	2,729
Training	1,995
Insurance	500
Admin Fee	231
Meetings	22,745
Misc	63
Biz Expo	1,006
BWC	242
Door Prizes	1,300
Grindstone dinner	5,910
Grindstone guide	1,048
Fair Expense	911
Office supplies and equip expense	2,325
Computer and website	1,100
CEO event	765
Membership ex	1,359
Networking cost	3,931
Books Subscriptions reference	150
Casual Labor	2,235
Payroll Taxes	3,547
Total	<u>59,280</u>

Form 990EZ, Part I, Line 8 Other Revenues Schedule 2

<u>Description</u>	<u>Amount</u>
Misc	<u>748</u>
Total	<u>748</u>

Federal Supporting Statements**2009**

Name(s) as shown on return

FEIN

Rob Bennett

Explanation

No compensation is paid

Jeff Dettmer

Explanation

No compensation is paid

Mary K Brown

Explanation

No compensation paid

Federal Supporting Statements**2009**

Name(s) as shown on return

FEIN

Dave Pusti

Explanation

no compensation paid

Kathleen Kellums

Explanation

Bookkeeping for Division Cleveland Safety Council

12:49 PM

11/09/10

Cash Basis

Berea Chamber of Commerce
Profit & Loss
 July 2009 through June 2010

	Jul '09 - Jun 10
Ordinary Income/Expense	
Income	
45000 · Investments	
45030 · Interest-Savings, Short-term CD	164 09
Total 45000 · Investments	164 09
46400-1 · Fundraisers	
46430-1 · Grindstone Dinner& Guide	8,329 90
46445-1 · Networking Breakfast	496 65
46451-1 · Annual fundraising	4,850 00
Total 46400-1 · Fundraisers	13,676 55
47100-2 · Business CSSC Admin Income	
47101-2 · BWC	20,000 00
47102-2 · Membership fee	22,275 00
47103-2 · Meetings	13,387 45
47106-2 · Fair	965 00
47107-2 · CSSC	0 40
Total 47100-2 · Business CSSC Admin Income	56,627 85
47200-1 · Program Income	
47230-1 · Membership Dues	31,619 25
47241-1 · Compensation consultants	2,961 57
47242-1 · Flyers	225.00
47244-1 · Biz Expo	4,942 25
Total 47200-1 · Program Income	39,748.07
47300 · Miscellaneous Revenue	748 25
Total Income	110,964 81
Gross Profit	110,964 81
Expense	
60800 · Advertising	3,221 88
60850 · Bank charges	25 00
60860 · Biz Expo	1,005 78
60870 · BWC Ins Fund	241 50
60900 · Business Expenses CSSC	
60920 · Business Admini fees	6,000 00
60921 · Business Admin BP & MDHTS	9,152 84
Total 60900 · Business Expenses CSSC	15,152 84
60940 · -Contributions	875 00
60960 · Credit card chgs	1,066 23
62200 · Door Prizes	1,300 00
62700 · Fundraiser Events	489 52
62710 · Grindstone Award Dinner	5,909 85
62720 · Grindstone Guide	1,048 00
62735 · Fair ex	910 80
62800 · Facilities and Equipment	
62840 · Equip Rental and Maintenance	1,016 08
62890 · Rent, Parking, Utilities	5,526 47
Total 62800 · Facilities and Equipment	6,542 55
62900 · Meetings	21,781 13
65000 · Operations	
65010 · Books, Subscriptions, Reference	150 00
65020 · Postage, Mailing Service	1,183 84
65030 · Printing and Copying	6,734 93
65040 · Supplies	1,522 21
65045 · Office Equipment & expenses	803 06
65050 · Telephone, Telecommunications	2,729 22
65075 · Computer	130 84
65080 · Website	969 00
Total 65000 · Operations	14,223 10

Unaudited

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11/09/10
Cash Basis

Berea Chamber of Commerce
Profit & Loss
July 2009 through June 2010

	<u>Jul '09 - Jun 10</u>
65055- · Training	1,995.00
65070 · CEO Event	765 00
65087 · Membership ex	1,359.11
65088 · Networking Cost	3,931 39
65100 · Other Types of Expenses	
65120 · Insurance - Liability, D and O	<u>500.00</u>
Total 65100 · Other Types of Expenses	500 00
66000 · Payroll Expenses	
66003 · Wages	<u>26,319 02</u>
Total 66000 · Payroll Expenses	26,319 02
66001 · Payroll Admin fee	231.32
66004 · Payroll Taxes	2,629 94
68300 · Travel and Meetings	
68310 · Conference, Convention, Meeting	156 44
68320 · Travel	<u>807 82</u>
Total 68300 · Travel and Meetings	964 26
68500 · Misc exp	<u>62 71</u>
Total Expense	<u>112,550 93</u>
Net Ordinary Income	<u>-1,586 12</u>
Net Income	<u><u>-1,586.12</u></u>