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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 F	or the 2	009 ca	lendar year, or tax year beginning $JUL 1, 2009$ and ending J	UN 30, 20	10
	B Ci	neck if plicable	Please use IRS	C Name of organization	D Employer ide	ntification number
		Address change Name	Johal ar		20	0.600005
	X	change Initial		Doing Business As		-0689805
		return Termin- ated	See Specific Instruc-	Number and street (or P 0. box if mail is not delivered to street address) Room/suite 2717 N GRANDVIEW BLVD 204	E Telephone nur 26	mber 2-542-4249
		Amended	tions	City or town, state or country, and ZIP + 4	G Gross receipts \$	561,619.
		Applica-		WAUKESHA, WI 53188-1660	H(a) Is this a grou	
		pending	F Nar	ne and address of principal officer SUZANNE KELLEY	for affiliates?	
			•	E AS C ABOVE	H(b) Are all affiliate	s included? Yes No
	1 Ta	ax-exem		us X 501(c) (6	1	ch a list (see instructions)
				W.WAUKESHA.ORG	H(c) Group exem	
						9 M State of legal domicile. WI
9			umm			J III diate of logar dominant. II
,				scribe the organization's mission or most significant activities THE WAUKES	HA COUNTY	BUSINESS
	Activities & Governance			NCE BOASTS A MEMBERSHIP OF 900 MEMBERS AN		
	na			s box In the organization discontinued its operations or disposed of more		
	ě			of voting members of the governing body (Part VI, line 1a)	1112112070 01 110 111	3 25
	ၓ			of independent voting members of the governing body (Part VI, line 1b)		4 25
	න්			aber of employees (Part V, line 2a)		5 7
	ije			aber of volunteers (estimate if necessary)		6 0
	₹			ss unrelated business revenue from Part VIII, column (C), line 12		7a 11,980.
	۲			ated business taxable income from Form 990-T, line 34		7b 0.
	\dashv	D Ne	t urii ei	ated business taxable income from 1 orin 330 1, line 34	Prior Year	Current Year
		8 Co	ntribut	ions and grants (Part VIII, line 1h)	Filor real	83,485.
	<u>e</u>			pervice revenue (Part VIII, line 2g)		465,752.
	ě			nt Income (Part VIII, column (A), lines 3, 4, and 7d)	······································	402.
	쨷			 ,		11,980.
-238				enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		561,619.
	-	WAY 18	ayreye	nue - ado lines 8 through 11 (must equal Part VIII, column (A), line 12) d similar mounts paid (Part IX, column (A), lines 1-3)		301,019.
T)	1					
,				paid to br-for members (Part IX, column (A), line 4)		220 767
¥ ::	-84	Go Ja	ianes, o	ther commensation, employee benefits (Part IX, column (A), lines 5-10)		328,767.
	Expens			nal fundraising fees (Part IX, column (A), line 11e)		
	꿃			draising expenses (Part IX, column (D), line 25)		224 226
				penses (Part IX, column (A), lines 11a-11d, 11f-24f)		224,226.
	ļ	_		enses Add lines 13-17 (must equal Part IX, column (A), line 25)		552,993. 8,626.
	-8	19 Re	venue	less expenses Subtract line 18 from line 12	-ii1 O1 V	
	Assets or d Balances	00 T-			ginning of Current You 337,30	
	Base			ets (Part X, line 16)	264,41	
	Fund			lities (Part X, line 26)	72,89	
				s or fund balances Subtract line 21 from line 20 ture Block	12,09	J.) 01,J13.
	<u> </u>				and to the best of my kno	owledge and belief, it is true correct
		an	d comple	lities of perjury, I declare that I have examined this return, including accompanying schedules and statements, a tel Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge		/
			(Siew Wille	15/13	3///
	Sign		Sigr	nature of officer	Date	///
	Here	, [Cit.			
			Tyn	JZANNE KELLEY, PRESIDENT e or print name and title		
		-		I Date I Ch	eck if P	reparer's identifying number
	Paid		eparer': gnature	Share Ite Varer and the let	f-	see instructions)
	Prep		m's nam	CALL STATE OF THE	ployed Lin	· · · · · · · · · · · · · · · · · · ·
	Use	Only yo	urs if If-emptoy	O MEGNEY THE	EIN ►	
		ac	ldress, ar		Dhona as	► 608_27/ /020
			- + 4	MADISON, WI 53713-3098	Filone no	► 608-274-4020

	990 (2009) WAUKESHA COUNTY BUSINESS ALLIANCE, INC. 39-0689805 Page 2 till Statement of Program Service Accomplishments
1	Briefly describe the organization's mission THE WAUKESHA COUNTY BUSINESS ALLIANCE'S MISSION IS TO DRIVE ECONOMIC GROWTH IN WAUKESHA COUNTY BY FOSTERING A VIBRANT BUSINESS COMMUNITY THROUGH FOUR KEY PILLARS: ADVOCACY, DEVELOPMENT, NETWORKING, AND PROMOTION.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No If "Yes," describe these changes on Schedule O
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 \$) DURING THE YEAR, THE WAUKESHA COUNTY BUSINESS ALLIANCE HELD TWELVE SALES CLUB MEETINGS FOR MEMBERS TO NETWORK AND BUILD BUSINESS RELATIONSHIPS WITH APPROXIMATELY 130 ATTENDEES AT EACH MEETING, ELEVEN NETWORKING AFTER 5 EVENTS TO FOSTER GROWTH WITH BUSINESSES AND BUSINESS RELATIONSHIPS WITH APPROXIMATELY 100 ATTENDEES AT EACH EVENT, AND SEVERAL OTHER MEETINGS FOR YOUNG PROFESSIONALS, PROFESSIONAL WOMEN'S DEVELOPMENT, AND HEALTHCARE BUSINESS ALLIANCES.
4b	Code (Code (Code (Code)) (Expenses (Cod)) (Expenses (Code)) (Expenses (Cod)) (Expenses (Code)) (Expenses (Code)) (Expenses (Code)) (Expens
4c	(Code)(Expenses
4d	Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ▶ \$

Part IV Checklist of Required Schedules

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? 1				Yes	No_	
2 Is the organization equired to complete Schedule B, Schedule of Contributions? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public official? if "Yes," complete Schedule C, Part II Section 501(c)(3) organizations. Did the organizations is the organization subject to the section 503(s)(e) notice and reporting requirement and proxy tax" If "Yes," complete Schedule C, Part II Did the organization manutian any donar 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 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 II Did the organization research or hold a consensation easement, including easements to preserve open space, the environment, historic tand areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization report an amount in Part X, line 21, serve as a custodian for amounts in clisted in Part X, or provide credit counseling, debt management, credit repair, or debt negotation services? If "Yes," complete Schedule D, Part IV Did the organization directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V It is 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 10? If "Yes," complete Schedule D, Part XI Did the organization report an amount for ordin related in Part X, line 10? If "Yes," complete Schedule D, Part XI Did the organization report an amount for ordin related in Part X, line 10? If "Yes," complete Schedule D, Part XI Did the organization report an amount for ordin related in Part X, line 10? If "Yes," complete Schedule D, Par	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?				
3 Dut 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 II Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II Section 501(c)(3) organizations. Did the organization is better organization subject to the section 603(s) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part II I 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 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 II I 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 I Did the organization in report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit courseling, debit management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization report an amount for investments of the services? If "Yes," complete Schedule D, Part IV I I is the organization report an amount for investments of the section		If "Yes," complete Schedule A	1		X	
public office? // *Yes,* complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities? // *Yes,* complete Schedule C, Part II Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(d) notice and reporting requirement and proxy tax? // *Yes,* complete Schedule C, Part III Did the organization more and 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? // *Yes,* complete Schedule D, Part II Did the organization report or noted a consenitation assement, including easements to preserve open space. The environment, historic fund areas, or historic structures? // *Yes,* complete Schedule D, Part II Did the organization report an amount in Part X, line 21, serve as a custodan for amounts not listed in Part X, or provide read to conselled, dibit management, credit repair, or debt negotation services? // *Yes,* complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? // *Yes,* complete Schedule D, Part IV Siste organization report an amount for land, buildings, and equipment in Part X, line 10? // *Yes,* complete Schedule D, Part VI Did the organization report an amount for investments - other securities in Part X, line 10? // *Yes,* complete Schedule D, Part VI Did the organization report an amount for investments - program related in Part X, line 10? // *Yes,* complete Schedule D, Part VI Did the organization report an amount for other assets in Part X, line 10? // *Yes,* complete Schedule D, Part X Did the organization report an amount for other assets in Part X, line 10? // *Yes,* complete Schedule D, Part X Did the organization report an amount for other assets in Part X, line 10? // *Yes,* complete Schedule D, Part X Did the organization report an amount for other assets in Part X, line 10? // *Yes,* c	2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	_X_		
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If I*Yes,* complete Schedule C, Part II 5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 603(c) notice and reporting requirement and proxy tax? If "Yes,* complete Schedule C, Part III 5 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 II 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic faul areas, or historic structures If "Yes,* complete Schedule D, Part II 8 Did the organization maintain collections of works of art, historical freasures, or other similar assets? If "Yes,* complete Schedule D, Part IV 8 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,* complete Schedule D, Part IV 9 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,* complete Schedule D, Part VI 1 Is 1 the organization report an amount for investments of the 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 VI 9 Did the organization report an amount for investments of the securities 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 VI 1 Did the organization report an amount for orbit 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 X I 1 Did the organization report an amount for orbit assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes,*	3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for				
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6 Did the organization maintain any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic fand areas, or historic structures? If "Yes," complete Schedule D, Part II Bid the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic fand areas, or historic structures? If "Yes," complete Schedule D, Part II Bid 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, debit management, credit repair, or debit negotiation services? If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in term, permanent, or quasiendowments? If "Yes," complete Schedule D, Part IV In Its 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 10? If "Yes," complete Schedule D, Part VI Did the organization report an amount for investments - other securities 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 VI 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 VI Did the organization report an amount for other assets in Part X, line 15% in "Yes," complete Schedule D, Part X Did the organization report an amount for other labilities in Part X, line 15% in the system of the state of the section of the state organization report and amount for other labilities 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 X VI Did the organization report	5					
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7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, instonc fand areas, or historic structures? If "Yes," complete Schedule D, Part II	6		_		37	
the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II			6		<u> </u>	
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 Is the organization is answer to any of the following questions "Yes"? If so, complete Schedule D, Part V, VII, VIII, IX, or X as applicable 10 Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part V 11 Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part V 11 Did the organization report an amount for investments - other securities 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 V 12 Did the organization report an amount for other labilities 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 X 12 Did the organization obtain separate, independent audited financial statements for the tax year include a footnote that addresses the organization shall you rucerian tax positions under Flix 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, Part X 13 Is the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X 14 Did the organization netured in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X 14 Did the or	7		_		v	
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9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 10 Did the organization, developed provided assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 Is the organization is answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IV, IV, IV, IV, IV, IV, IV, I	8				v	
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10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part VI Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII,	9	· · · · · · · · · · · · · · · · · · ·	۵		x	
11 Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IXI, or X as applicable Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII 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 VIII Did the organization report an amount for other labilities 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 X Did the organization separate or consolidated financial statements for the tax year include a footnote that addresses the organization is liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X Did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X, IX, IXI, and XIII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States? 13	10		9		- 21	
11 Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable 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 VII 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 XII Did the organization report an amount for other liabilities 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 XIII Did the organization amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X X IXII, and XIII is optional is the organization aschool described in section 170(b)(1)(k)(ii)? If "Yes," complete Schedule E Did the organization aschool described in section 170(b)(1)(k)(ii)? If "Yes," complete Schedule E Did the organization aschool described in section 170(b)(1)(k)(ii)? If "Yes," complete Schedule E Did the organization aschool described in section 170(b)(1)(k)(ii)? If "Yes," complete Schedule E Did the organization aschool described in section 170(b)(1)(k)(ii)? If "Yes," complete Schedule E 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 Did the organization	10		10		x	
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			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? If "Yes," complete Schedule I, Parts I and II	21		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? If "Yes," complete Schedule I, Parts I and III	22		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? If "Yes," complete			•
	Schedule J	23		_X_
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	N/	A
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? If "Yes," complete			ĺ
	Schedule L, Part I	25b	N/	Α
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	ļ		
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	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? If "Yes," complete Schedule L, Part IV	28c		_X_
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701 2 and 301 7701·3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			۱
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?		i	,,
	If "Yes," complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non charitable related organization?	_	\ ,	_
	If "Yes," complete Schedule R, Part V, line 2	36	N/	A_
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	_		,.
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	-	X
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	38	X	<u> </u>

Form 990 (2009)

Form 990 (2009) WAUKESHA COUNTY BUSINESS ALLIANCE, INC. 39-0689805 Part V Statements Regarding Other IRS Filings and Tax Compliance Yes No 1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of 0 U.S. Information Returns. Enter -0- if not applicable 1a 0 b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return X b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? За X b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O Х 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a X financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **b** If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a X Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit Х any contributions that were not tax deductible? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b N/A Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services 7a provided to the payor? b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required 7с d If "Yes," indicate the number of Forms 8282 filed during the year 7d e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f q For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings N/A at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. N/A a Did the organization make any taxable distributions under section 4966? 9a

> N/A 10a 10b

N/A

9b

12a

Section 501(c)(7) organizations. Enter

a Initiation fees and capital contributions included on Part VIII, line 12

Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

b Did the organization make a distribution to a donor, donor advisor, or related person?

Section 501(c)(12) organizations. Enter

a Gross income from members or shareholders

b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

Form 990 (2009)

10

N/A

11a

11b

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

Sec	tion A. Governing Body and Management							
		1 .	I	م د ا		Yes	No_	
1a	Enter the number of voting members of the governing body	1a		25				
b	Enter the number of voting members that are independent	1b		25				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with	any other		_		7.7	
	officer, director, trustee, or key employee?			-	2		<u>X</u>	
3	Did the organization delegate control over management duties customarily performed by or under the	ie dire	ct supervision	1			37	
	of officers, directors or trustees, or key employees to a management company or other person?				3		<u>X</u>	
4	Did the organization make any significant changes to its organizational documents since the prior Fo		0 was filed?	-	4		<u>X</u>	
5	Did the organization become aware during the year of a material diversion of the organization's asse	ts?		-	5		<u>X</u>	
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 me	ember	s of the		_	37		
	governing body?			}	7a 7b	X	X	
_	b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?							
8	Did the organization contemporaneously document the meetings held or written actions undertaken	auring	g the year	1				
	by the following			ł	٠.	v		
a	The governing body?				8a_	X		
b	Each committee with authority to act on behalf of the governing body?			-	8b	<u> </u>		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	acnea	at the				v	
<u> </u>	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		- 0-4-1		9		_X_	
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Fi	evenu	e Code)			V	Al-	
40-	Describe experience have lead aborton broughes or offlicted?			Г	10a	Yes	No X	
10a	Does the organization have local chapters, branches, or affiliates? If "Yes," does the organization have written policies and procedures governing the activities of such	chant	ore affiliatos	 	IUa			
b	and branches to ensure their operations are consistent with those of the organization?	Спарі	ers, arrillates,		10b			
4.4	Has the organization provided a copy of this Form 990 to all members of its governing body before f	ilina th	a form?	ŀ	11		X	
11	Describe in Schedule O the process, if any, used by the organization to review this Form 990	iiiig ti	10 101111	h				
11A	Does the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>			ļ	12a	Х		
12a b	Are officers, directors or trustees, and key employees required to disclose annually interests that col	uld aw	e rise	-	124			
U	to conflicts?	aid gir	0.1100		12b	X		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	"Yes."	describe	f	122			
•	in Schedule O how this is done	,			12c	Х		
13	Does the organization have a written whistleblower policy?			ľ	13		X	
14	Does the organization have a written document retention and destruction policy?			Ī	14		X	
15	Did the process for determining compensation of the following persons include a review and approv	al by ıı	ndependent	Ī				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		·					
а	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 arrange	ment v	vith a					
	taxable entity during the year?				16a		X	
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eva-	aluate	its participation					
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the org	anızat	ion's					
	exempt status with respect to such arrangements?				16b			
Sec	tion C. Disclosure							
17	List the states with which a copy of this Form 990 is required to be filed ► NONE							
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (501	(c)(3)s only) ava	ılable f	or			
	public inspection. Indicate how you make these available. Check all that apply							
	Own website Another's website X Upon request							
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, or	conflic	t of interest poli	cy, and	d fina	ncıal		
	statements available to the public							
20	State the name, physical address, and telephone number of the person who possesses the books a	ınd red	ords of the org	anızatı	on 🕨			
	LYNDA SCHWARTZ - 262-542-4249							
	223 WISCONSIN AVE STE A, WAUKESHA, WI 53186-4968	-				000		
					Form	990	20091	

932006

39-0689805

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."

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

- 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

(A)	(B)			((C)			(D)	(E)	(F)
Name and Title	Average hours per			Pos all		app	oly)	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
FRED STIER	1 00									
CHAIRMAN	1.00	X		X	-	-	┝	0.	0.	0.
MICHAEL GRYCZKA	1 00									
CHAIRMAN-ELECT	1.00	X		X			<u> </u>	0.	0.	0.
BRIAN NEMOIR	1 00	٠,		7,7						_
VICE CHAIR	1.00	X	_	Х			├	0.	0.	0.
EMILY HEPBURN	1 00	٠,,		3,7					_	_
SECRETARY	1.00	X		Х		-	├	0.	0.	0.
TERRY INMAN	1 00	,,		٠,					_	
TREASURER	1.00	X	-	X		-	-	0.	0.	0.
CLARE O'SHEEL	1 00	,,		7,7						
PAST CHAIR	1.00	X	-	X	-	-	├	0.	0.	0.
JAMES WALDEN, JR.	1 00	,,								
DIRECTOR	1.00	X		<u> </u>		-	├-	0.	0.	0.
MICHAEL BECKER	1 00	1,,							_	_
DIRECTOR	1.00	X	ļ		-	-		0.	0.	0.
LARRY BLANTON	1 00	37	ŀ						_	_
DIRECTOR	1.00	X	 		-	-	-	0.	0.	0.
JON OLLMANN	1 00	37							_	_
DIRECTOR	1.00	X	-	├		-	\vdash	0.	0.	0.
TAMMY PEREZ	1 00	١,,		1					_	_
DIRECTOR	1.00	X	├—		-	-		0.	0.	0.
TODD GRAY	1 00	3,							_	_
DIRECTOR	1.00	A	\vdash	 	-	-	-	0.	0.	0.
WILLIAM JAKUS	1 00	3,7	ĺ						_	_
DIRECTOR	1.00	X	 	├—	-	\vdash		0.	0.	0.
AMANDA JOHNSON	1 00	7,7	į						_	_
DIRECTOR	1.00	A	<u> </u>	├	-	┼		0.	0.	0.
DARRYL JUDSON	1 00	,,		Ì					_	0
DIRECTOR	1.00	X	├	├—	-	┼—	┼	0.	0.	0.
JASON KAYZAR	1 00	,,							_	_
DIRECTOR	1.00	X	\vdash	\vdash	\vdash	-	\vdash	_0.	0.	0.
JIM LINDENBERG	1 00	,,			1				_	_
DIRECTOR 932007 02-04-10	1.00	X	<u> </u>	<u> </u>	<u> </u>	<u> </u>	1	0.	0.	0 . Form 990 (2009)

(A) Name and title	(B) Average	(C) Position						(D) Reportable	(E) Reportable		Es	(F) timate	ed
	hours per week	Individual trustee or director	Institutional trustee	Officer		Highest compensated do employee		compensation from the organization (W-2/1099-MISC)	compensatior from related organizations (W 2/1099 MIS	,	com fr org an	nount other pensa om th anizat d relat	ition e ion ed
MARK SCHMITZ DIRECTOR	1.00	x						0.		0.			0.
TOM MADRIGRANO													
DIRECTOR	1.00	X			-			0.		0.			0.
SANDY MCGEE	1 00	,,								^			^
DIRECTOR	1.00	X	-		_			0.		0.			0.
MATT MORONEY DIRECTOR	1.00	x						0.		ο.			0.
LYNN REVOY	1.00	-	-							•			<u> </u>
DIRECTOR	1.00	x						0.		0.			0.
BARBARA RYAN													
DIRECTOR	1.00	X			_		_	0.	·	0.			0.
CHELLEE SIEWERT	1 00	1					İ	0.		0.			Λ
DIRECTOR	1.00	X			 -	-	_	U .	-	U •			0.
JACK WEISSGERBER DIRECTOR	1-00	x	-	-	-					0.	-		0.
SUZANNE KELLEY													
DIRECTOR	1.00	X					_	0.		0.			0.
SANDY WYSOCKI									:				
DIRECTOR	1.00	X				_		86,475.		0.		1,9	0.
Total Total number of individuals (including but n	est limited to th	2000	liete		2011	2) 100		· · · · · · · · · · · · · · · · ·	1000 in reportable			1,9	43.
compensation from the organization	ot illrinted to ti	1036	11316	o a	5000	<i>5)</i> VV I	10 11	eceived more than \$100	,000 in reportable	•			C
								· · · · · · · · · · · · · · · · · · ·				Yes	No
3 Did the organization list any former officer,	director or tru	stee	, ke	y em	plo	yee,	or h	nighest compensated er	nployee on				
line 1a? If "Yes," complete Schedule J for s											3		X
4 For any individual listed on line 1a, is the su and related organizations greater than \$15	•							· ·	the organization				х
5 Did any person listed on line 1a receive or a									ices rendered to		4		Λ
the organization? If "Yes," complete Sched	•				arry	ui.	Ciai	co organization for serv	ices rendered to		5		Х
Section B. Independent Contractors													
Complete this table for your five highest co the organization NONE	mpensated in	depe	ende	ent c	onti	acto	ors t	hat received more than	\$100,000 of comp	oens	ation f	rom	
(A)					•			(B)			(0		
Name and business	address							Description of s	ervices		ompe	nsatio	n
							\dashv						
								·					
							\dashv						
2 Total number of independent contractors (includina but r	ot li	mite	d to	tho	se li	l ster	d above) who received n	nore than				
\$100,000 in compensation from the organi	_					0		,					
SEE SCHEDULE J-2 FOR		ΙI	, :	SE	CT.	IOI	N .	A CONTINUATI	ON		Form	99 <mark>0</mark> (2009

932008 02-04-10

	1 990 (NTY BUSIN	<u>ESS ALLIAN</u>	CE, INC.	<u> 39-0689</u>	805 Page 9
Pa	rt VII	Statement of Rever	nue		· 			
					(A) Totał 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	b c d e f	Related organizations Government grants (contribut All other contributions, gifts, gran similar amounts not included abo	nts, and ove 1f	83,485.				
동말	_	Noncash contributions included in lines	s 1a-1/ \$		83,485.			
	2 a	MEMBERSHIP DUES CONFERENCE REGI		Business Code 813910 561920	305,628. 143,036.	305,628. 143,036.		
Program Service Revenue	c d e	OTHER PROGRAM S	SERVICES	813910	17,088.	17,088.		
4	f	All other program service reve	enue					
	g	Total. Add lines 2a-2f		>	465,752.			· · · · · · · · · · · · · · · · · · ·
	3	Investment income (including other similar amounts) Income from investment of ta		▶	402.			402.
_ [5	. Royalties		▶	— —			
	b c	Gross Rents Less rental expenses Rental income or (loss) Net rental income or (loss)	(i) Real	(ii) Personal				
	b	Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses	(i) Securities	(II) Other				
ļ	_	Gain or (loss)						
Other Revenue		Net gain or (loss) Gross income from fundraisin including \$ contributions reported on line Part IV, line 18	of e 1c) See		,			
Other	С	Less direct expenses Net income or (loss) from func Gross income from gaming ac	•					
	b	Part IV, line 19 Less direct expenses	a b					
	10 a	Net income or (loss) from gam Gross sales of inventory, less and allowances Less cost of goods sold	•					
ļ	c	Net income or (loss) from sale	es of inventory	<u> </u>				
	11 a	Miscellaneous Revenu	/ENUE	Business Code 541800	11,980.		11,980.	
	c							
}	ď	All other revenue						
	е	Total. Add lines 11a-11d		—	11,980.			
93200 02-04	12 9 -10	Total revenue See instructions.		>	561,619.	465,752.	11,980.	402. Form 990 (2009)

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must comple				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the US				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	81,211.	<u></u>		
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)		T. T		
7	Other salaries and wages	194,207.			
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	6,916.			
9	Other employee benefits	25,556.			
10	Payroll taxes	20,877.			
11	Fees for services (non-employees)				
а	Management				=
₋b	Legal				
С	Accounting	3,350.			
	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees	264			
g	Other	364.			
12	Advertising and promotion	F. 01.0			
13	Office expenses	57,819.			
14	Information technology	3,970.			
15	Royalties	47 154			
16	Occupancy	47,154. 9,775.			
17	Travel	9,115.			-
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials	81,919.			
19	Conferences, conventions, and meetings	01,313.			
20	Interest Payments to affiliates				
21 22	Depreciation, depletion, and amortization	4,087.			
23	Insurance	3,385.	,		
23 24	Other expenses Itemize expenses not covered	3,303.			
24	above (Expenses grouped together and labeled				
	miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	MISCELLANEOUS EXPENSES	6,785.			
h	SALES TAXES	5,285.			
c	PERSONAL PROPERTY TAXES	333.			
d					
e					
f	All other expenses				
25	Total functional expenses Add lines 1 through 24f	552,993.			
26	Joint costs Check here ▶ ☐ 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		<u></u>	<u> </u>	<u> </u>

325,100. Form 990 (2009)

308.

34

Total liabilities and net assets/fund balances

Form	990 (2009) WAUKESHA COUNTY BUSINESS ALLIANCE, INC. 39-068	9805	Pa	ge 12
Par	t XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual 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?	2a		Х
b	Were the organization's financial statements audited by an independent accountant?	2b		X
С	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?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
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			
	Separate basis Consolidated basis Both consolidated and separate basis			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			
	Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? 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	3b		
		Form	<mark>990</mark> (2009)

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is described below.
 Attach to Form 990 or Form 990-EZ. ► See separate instructions.

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

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) organizat 	ions Complete Part III								
Name of organization			Emp	loyer identification number					
WAUKESH	A COUNTY BUSINES:	S ALLIANCE,	INC.	39-0689805					
Part I-A Complete if the org	anization is exempt und	er section 501(c)	or is a section 527 o	rganization.					
1 Provide a description of the organiz	ation's direct and indirect politica	al campaign activities	ın Part IV						
2 Political expenditures			▶ \$)					
3 Volunteer hours									
Part I-B Complete if the org	anization is exempt und	er section 501(c)	(3).						
1 Enter the amount of any excise tax	incurred by the organization und	er section 4955	\$						
2 Enter the amount of any excise tax	, ,		5 ▶\$	S					
3 If the organization incurred a section	n 4955 tax, did it file Form 4720 t	or this year?		Yes No					
4a Was a correction made?				_L Yes -L No					
- b-lf "Yes," describe in-Part IV	opization is exempt und	or soction 501(a)	event section 501/	(2)(3)					
	anization is exempt und	· · · · · · · · · · · · · · · · · ·							
Enter the amount directly expended	, , ,	•		S					
2 Enter the amount of the filing organ	ization's funds contributed to oth	er organizations for s	. .						
•	exempt function activities \$								
3 Total exempt function expenditures	Add lines 1 and 2 Enter here al	na on Form 1120-POL							
line 17b	4400 BOL for this			Yes No					
4 Did the filing organization file Form	•	I) of all agating 507 m.		1es110					
5 Enter the names, addresses and en For each organization listed, enter t			_	•					
that were promptly and directly deli	,	~	•						
(PAC) If additional space is needed		, , , , , , , , , , , , , , , , , , ,	parate segregated fand of	a positioal dottori committee					
- ` ` 	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political					
(a) Name	(b) Address	(6) 2114	filing organization's	contributions received and					
			funds If none, enter -0-	promptly and directly					
				delivered to a separate political organization					
				If none, enter -0-					
		-		 					
		1	1	1					

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

Schedule C (Form 990 or 990-EZ) 2009

Schedule C (Form 990 or 990-EZ) 2009 W	AUKESHA C	OUNTY BUSIN	ESS ALLIANC	E, INC.39-	0689805 Page 2
Part II-A Complete if the organ (election under section		mpt under sectio	n sor(c)(s) and m	eu roilli 5706	
A Check ► ☐ if the filing organization		listed group			
B Check In the filing organization	•		ovisions annly		
	n Lobbying Expe	nditures		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influen	ce public opinion (grass roots lobbying)			
b Total lobbying expenditures to influence	ce a legislative boo	dy (direct lobbying)	<u> </u>		
c Total lobbying expenditures (add lines	1a and 1b)		_		
d Other exempt purpose expenditures			_		
 Total exempt purpose expenditures (a 	idd lines 1c and 1c	d)			
f Lobbying nontaxable amount. Enter the	ne amount from the	e following table in bot	h columns		
If the amount on line 1e, column (a) or (b	· [bying nontaxable am	ount is:		
Not over \$500,000		the amount on line 1e	4500.000		
Over \$500,000 but not over \$1,000,00		00 plus 15% of the exc			
Over \$1,000,000 but not over \$1,500,		00 plus 10% of the exc			
Over \$1,500,000 but not over \$17,000		00 plus 5% of the exce			
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			-		
i Subtract line 1f from line 1c If zero or			_		
j If there is an amount other than zero of	on either line 1h or	line 1i, did the organiz	ation file Form 4720		
reporting section 4911 tax for this yea	ירו				Yes No
		eraging Period Under			
, ,			n do not have to comp		
colun	_		es 2a through 2f on pa	ge 4.)	
	Lobbying Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))					
c Total lobbying expenditures					
d. Graceroote pontovable amount					
d Grassroots nontaxable amount e Grassroots ceiling amount					
(150% of line 2d, column (e))					
(10070 07 mile 20), 00101111 (0))				,	
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2009

Schedule C (Form 990 or 990-EZ) 2009 WAUKESHA COUNTY BUSINESS ALLIANCE, INC. 39 – 0689805 Page 3 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	Amo	unt
1 Du	inng the year, did the filing organization attempt to influence foreign, national, state or				
loc	cal legislation, including any attempt to influence public opinion on a legislative matter				
or	referendum, through the use of				
a Vo	olunteers?				
b Pa	uid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
с М	edia advertisements?				
d Ma	ailings to members, legislators, or the public?				
e Pu	ublications, or published or broadcast statements?				
f Gr	ants to other organizations for lobbying purposes?				
g Dii	rect contact with legislators, their staffs, government officials, or a legislative body?				
h Ra	allies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Ot	her activities? If "Yes," describe in Part IV				
j To	stal Add lines 1c through 1i				
2a Di	d 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				
	the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part II	I-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)((5), or se	ction	
				Yes	No
1 W	ere substantially all (90% or more) dues received nondeductible by members?		1		X
2 Dr	d the organization make only in-house lobbying expenditures of \$2,000 or less?		2	Х	
3 Dr	d the organization agree to carryover lobbying and political expenditures from the prior year? II-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(4).		3		Х
1 Du	"Yes." ues, assessments and similar amounts from members	· · · · · · · · · · · · · · · · · · ·	1		
2 Se	ection 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	ıcal			
	penses for which the section 527(f) tax was paid).				
	urrent year		2a		
	arryover from last year		2b		
	otal		2c		
_	agregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
_	notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex	cess			
	bes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and				
	penditure next year?	,	4		
5 Ta	exable amount of lobbying and political expenditures (see instructions)		5		
Part I	Supplemental Information				
Complet	te this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I C, line 5, a	nd Part II-B, I	ine 1ı Also	, complete	this part
for any a	additional information				
					

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

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.

2009
Open to Public Inspection

Name of the organization

Employer identification number

		SINESS ALLIANCE, INC	
Pai			s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	,	
		(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 advi	sed funds
	are the organization's property, subject to the organization's	exclusive legal control?	└ Yes └ No
6	Did the organization inform all grantees, donors, and donor a		-
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	e conferring
	impermissible private benefit?		Yes No
Pai	t II Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990,	Part IV, line 7
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply)	
	Preservation of land for public use (e.g., recreation or public use)	pleasure) Preservation of an hi	storically important land area
	Protection of natural habitat	Preservation of a cer	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year		
			Held at the End of the Tax 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 sti	, ,	2c
d	Number of conservation easements included in (c) acquired		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by th	e organization during the tax
	year -		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the pe		Yes No
_	violations, and enforcement of the conservation easements		
6	Staff and volunteer hours devoted to monitoring, inspecting, Amount of expenses incurred in monitoring, inspecting, and		
7	Does each conservation easement reported on line 2(d) abo	_	-
8	and section 170(h)(4)(B)(ii)?	ve satisfy the requirements of section 170	Yes No
9	In Part XIV, describe how the organization reports conservat	ion escaments in its revenue and expens	
3	include, if applicable, the text of the footnote to the organiza		
	conservation easements		, the organization of decounting to:
Pai	t III Organizations Maintaining Collections of	of Art, Historical Treasures, or C	Other Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116, no	ot to report in its revenue statement and t	palance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e		
	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 bala	nce sheet works of art, historical treasures,
	or other similar assets held for public exhibition, education,	or research in furtherance of public service	e, 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 tre	easures, or other similar assets for financi	al gaın, provide
	the following amounts required to be reported under SFAS	116 relating to these items	
а	Revenues included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		► \$ ► \$

Schedule D (Form 990) 2009

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)			A COUNTY B								Page 2
Check all that apply	ч										
a Poblic exhibition d		•	on, and other record	is, check ar	y of the	following that	t are a s	ignificant	use of its	collection	ıtems
b Scholarly research e Other 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 soft to raise funds rather than to be maintained as part of the organization solicition. Solicition or norm 590, Part XV. Ine 9, or reported an amount on Form 590, Part XV. Ine 9, or reported an amount on Form 590 Part XIV and complete it organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 590. Part XV. Ine 9, or reported an amount on Form 590. Part XV. Ine 9, or reported an amount on Form 590. Part XV. Ine 9, or reported an amount on Form 590. Part XV. Ine 10 If Yes No. If Yes Supplied the arrangement in Part XIV and complete the following table C Beginning balance d Additions during the year f Ending balance 1											
c	а	Public exhibition	d			change progra	ıms				
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's collection?	b										
5 Dumg 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?											
to be sold to rase funds rather than to be maintained as part of the organization's collection?									ose in Par	t XIV	
Part IV Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21 a Is the organization an agent, frustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIV and complete the following table c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2 Dot the organization include an amount on Form 990, Part X, line 21? Yes	5	During the year, did the organization solicit o	r receive donations	of art, histor	ical trea	asures, or othe	er sımıla	r assets		7	
Tal is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIV and complete the following table c Beginning balance d Additions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? b If "Yes," explain the arrangement in Part XIV Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10 1a Beginning of year balance b Contributions 1a Beginning of year balance c Other buttons c Net investment earnings, gains, and losses d Grants or scholarships c Other expenditures for facilities and programs f Administrative expenses g End of year balance b Permanent endowment											No_
Ta is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Ves	Par	—·—·	-	ete if organi	zation a	nswered "Yes	" to For	m 990, Pa	art IV, line	9, or	
on Form 990, Part X? b if "Yes," explain the arrangement in Part XIV and complete the following table c Beginning balance d Additions during the year e Distributions during the year 1 te Inding balance 2a Did the organization include an amount on Form 990, Part X, line 21? b If "Yes," explain the arrangement in Part XIV Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10 1a Beginning of year balance b Contributions c Net investment arrainigs, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance b Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment \(\bar{\textit{b}} \) \(\bar{\textit{g}} \) \(\bar{\textit{g}} \) \(\bar{\textit{b}} \) \(\bar{\text{b}} \)											
b if "Yes," explain the arrangement in Part XIV and complete the following table c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? b if "Yes," explain the arrangement in Part XIV Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10 Beginning of year balance (a) Current year (b) Pnor year (c) Two years back (d) Three years back (e) Four years b	1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for cor	tributio	ns or other as:	sets not	t included	<u></u>	_	
c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2 Distributions during the year f Ending balance 2 Distributions during the year f Ending balance 2 Did the regardation include an amount on Form 990, Part X, line 21? Yes No Yes No No If 'Yes,'' explain the arrangement in Part XV Part V Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10		, and the second							<u> </u>	」Yes	L No
c Beginning balance d Additions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? 2b If "Yes," explain the arrangement in Part XIV Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10 Table Beginning of year balance (a) Current year (b) Prior year (e) Two years back (d) Three years back (e) Four y	b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing tabl	е						
d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? b If "Yes," explain the arrangement in Part XIV Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10 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 '''' Yes No 3a Ave 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 (iii) r										Amount	
e Distributions during the year f Ending balance b If "Yes," explain the arrangement in Part XIV Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10 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 b Permanent endowment make there endowment make there endowment make there endowment make there endowment make there endowment the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations (iii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment (b) Cost or other basis (investment) Description of investment (a) Cost or other basis (other) (b) Book value depreciation 4 49,025. 40,966. 8,059. 8 50.59. 6 Equipment c Leasehold improvements d Equipment e Other	С	Beginning balance						1c			
If	d	Additions during the year						1d			
Describe in Part XIV part V investment Part XIV Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10 Calcument year Calcument	e	Distributions during the year						1e			
Bill "Yes," explain the arrangement in Part XIV	f	Ending balance						1f		_	
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10 Carrent year (b) Pnor year (c) Two years back (d) Three years back (e) Four years back (d) Three years back (e) Four years bac	2a	Did the organization include an amount on F	orm 990, Part X, line	217					L.	_ Yes	L No
(a) Current year (b) Pnor year (c) Two years back (d) Three years back (e) Four years back (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 ▶					_						
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 ▶	Par	t V Endowment Funds. Complete		swered "Ye	s" to Fo	1				r —	
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 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment % b Permanent endowment % c Term endowment % c) in related organizations (ii) related organizations (iii) related organizations b) If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds Description of investment Description of investment B Buildings c Leasehold improvements d Equipment e Other			(a) Current year	(b) Prior	year	(c) Two year	s back	(d) Three	years back	(e) Four	years back
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 Permanent endowment	1a	Beginning of year balance									
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 ▶											
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	_ C_	Net investment earnings, gains, and losses									
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 ▶	d	Grants or scholarships				-					
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 ▶	e	Other expenditures for facilities								1	
provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment ▶		and programs									
Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment ▶	f	· ·		-							
a Board designated or quasi-endowment ▶	9	-		L							
b Permanent endowment	2	, ,	r end balance held a								
c Term endowment ▶	а	,		_%							
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 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 depreciation 1a Land b Buildings c Leasehold improvements d Equipment 49,025.40,966.88,059.	b	· · · · · · · · · · · · · · · · · · ·									
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(ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10 Description of investment (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value basis (investment) b Buildings c Leasehold improvements d Equipment e Other		•									Yes No
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 Buildings c Leasehold improvements d Equipment 49,025. 40,966. 8,059.		,,									
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 1a Land b Buildings c Leasehold improvements d Equipment 49,025. 40,966. 8,059.											
Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, Inne 10 Description of investment (a) Cost or other basis (investment) (b) Cost or other depreciation 1a Land b Buildings C Leasehold improvements d Equipment 49,025. 40,966. 8,059.	b									3b	
Description of investment (a) Cost or other basis (investment) (b) Cost or other depreciation (c) Accumulated depreciation (d) Book value (d) Book value 49,025. 40,966. 8,059. e Other						. D. 1 V 1					
basis (investment) basis (other) depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other	Par										
ta Land b Buildings c Leasehold improvements d Equipment e Other 13 Land 149,025. 40,966. 8,059.		Description of investment	1 ' '						1	(d) Book	value
b Buildings c Leasehold improvements d Equipment e Other			Dasis (investr	nent)	Dasis	(otrier)	ue	preciation			
c Leasehold improvements d Equipment e Other			<u> </u>								
d Equipment 49,025. 40,966. 8,059.	b	· ·									
e Other	С	· ·				10 025		40.0	<i>c c</i>		0.50
		• •				±9,025.		40,9	00.		5,059.
				V column	(D) 1:	10(0)					2 050

Schedule D (Form 990) 2009

Part VII Investments - Other Securities. (a) Description of security or category	(b) Book value		(c) Method of value	
(including name of security)	Co		Cost or end-of-year ma	
Financial derivatives				· · · · · · · · · · · · · · · · · · ·
Closely-held equity interests				
Other				
				
				
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)				
Part VIII Investments - Program Related.	See Form 990, Part X, lin	e 13 	(c) Method of value	ation
(a) Description of investment type	(b) Book value		Cost or end-of-year ma	
				
				· -
	· · · · · · · · · · · · · · · · · · ·			
Total. (Col (b) must equal Form 990, Part X, col (B) line 13)	-			
Part IX Other Assets. See Form 990, Part X, I	ine 15			
	(a) Description			(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. See Form 990, Part			<u>></u>	<u> </u>
1 (a) Description of liability	, mie 25	(b) Amount	1	
Federal income taxes		· · · · · · · · · · · · · · · · · · ·		
			_	
			\dashv	
Total. (Column (b) must equal Form 990, Part X, col (B)	line 25)			
2. FIN 48 Footnote In Part XIV, provide the text of the		n's financial stateme	nts that reports the or	ganization's liability for
uncertain tax positions under FIN 48			····	
932053 02-01-10			Sch	edule D (Form 990) 2009

_	dule D (Form 990) 2009 WAUKESHA COUNTY BUSINESS AT Reconciliation of Change in Net Assets from Form 990 to				0689805 ts	5 Page 4
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	d 9	10			
	t XII Reconciliation of Revenue per Audited Financial Stateme			Return	n	
1	Total revenue, gains, and other support per audited financial statements		<u> </u>	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	<u> </u>		4c		
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5		
Pa	t XIII Reconciliation of Expenses per Audited Financial Statement	ents With Exp	enses per	r Retu	ırn	
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					
а	Donated services and use of facilities	2a				
b	Prior year adjustments	2b				
С	Other losses	2c				
d	Other (Describe in Part XIV)	2d				
е	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					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIV)	4b				
С	Add lines 4a and 4b			4c		
_ 5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5		
Pa	t XIV Supplemental Information	 				
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part II e 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also comp					ne 4, Part
						<u>-</u>
_				 -	<u></u>	
				_		

932054 02-01-10

SCHEDULE J-2

(Form 990)

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.

2009
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the Organization

Employer Identification number

per week Description Desc	Part I Continuation of Officer	_	rusi	tee			En	plo			
hours per week Description Patti Wallner pressident Patti Wallner pr											
PATTI WALLNER PRESIDENT 40.00 X 67,725. 0. 1,40	Name and title	hours per		hecl	k all	that	арр		compensation from the organization	compensation from related organizations	amount of
PRESIDENT 40.00 X 67,725. 0. 1,40	PATTI WALLNER		_ ≧	Sil	통	×	Ξ	횬			
SUZANNE KELLEY		40.00		ļ	Х				67,725.	0.	1,404
PRESIDENT 40.00 X 18,750. 0. 53					Γ						
	PRESIDENT	40.00	-		X				18,750.	0.	519
											
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LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J-2 (Form 990) 2009

SCHEDULE O

(Form 990)

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on

OMB No 1545-0047

Department of the Treasury Internal Revenue Service	Form 990 or to provide any additional information. Attach to Form 990.
Name of the organization	

Internal Revenue Service	P Attach to Form 550.	mspeetion
Name of the organization	WAUKESHA COUNTY BUSINESS ALLIANCE, INC.	Employer identification number 39-0689805
FORM 990, PART	I, LINE 1, DESCRIPTION OF ORGANIZATION MISS	SION:
FORCE ENSURING	THE REGION'S ECONOMIC VITALITY.	
FORM 990, PART	VI, SECTION A, LINE 6: THE ORGANIZATION HAS	S A SINGLE CLASS
OF MEMBERSHIP.		
FORM 990, PART	VI, SECTION A, LINE 7A: EACH YEAR A NOMINA	ring committee

APPOINTED BY THE CHAIRMAN MUST PRESENT A SLATE OF UP TO SIX CANDIDATES TO REPLACE DIRECTORS WHOSE TERMS ARE EXPIRING. THE SLATE OF CANDIDATES IS SENT TO THE MEMBERSHIP BY MAIL WITH NOTICE OF RIGHT TO PETITION. ADDITIONAL NAMES OF CANDIDATES FOR DIRECTORS CAN BE NOMINATED BY PETITION WITH SIGNATURES OF AT LEAST TWENTY QUALIFIED MEMBERS. IF NO PETITION IS FILED, THE SLATE OF CANDIDATES IS VOTED ON BY THE GOVERNING BODY AT ITS JUNE MEETING. IF A LEGAL PETITION PRESENTS ADDITIONAL CANDIDATES, A NEW SLATE LISTING ALL CANDIDATES ALPHABETICALLY IS SENT TO ACTIVE MEMBERS FIFTEEN DAYS PRIOR TO THE JUNE MEETING FOR A VOTE. BALLOTS MUST BE

FORM 990, PART VI, SECTION B, LINE 11: THE PREPARED FORM 990 IS REVIEWED BY THE ORGANIZATION'S TREASURER BEFORE THE RETURN IS FILED WITH THE IRS.

RETURNED WITHIN TEN DAYS. AT ITS JUNE MEETING, THE GOVERNING BODY WILL

DECLARE THE CANDIDATES WITH THE GREATEST NUMBER OF VOTES ELECTED.

FORM 990, PART VI, SECTION B, LINE 12C: ALL EMPLOYEES AND DIRECTORS ARE COVERED UNDER THE ORGANIZATION'S CONFLICT OF INTEREST POLICY.

DETERMINATIONS OF WHETHER A CONFLICT EXISTS ARE REVIEWED BY THE PRESIDENT

EXECUTIVE COMMITTEE, AND THE GOVERNING BODY. EMPLOYEES WITH POTENTIAL LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule O (Form 990) 2009 932211 02-03-10

SCHEDULE 0

(Form 990)

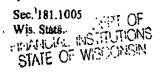
Supplemental Information to Form 990

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

OMB No 1545-0047 Open to Public

Department of the Treasury ► Attach to Form 990. Inspection Internal Revenue Service Name of the organization Employer identification number WAUKESHA COUNTY BUSINESS ALLIANCE, INC. 39-0689805 CONFLICTS OF INTEREST COULD FACE DISCIPLINARY ACTION. DIRECTORS ARE REQUIRED TO ABSTAIN FROM VOTING IN SITUATIONS POSING A POSSIBLE CONFLICT OF INTEREST OR POTENTIALLY BE REQUIRED TO RESIGN FROM THE GOVERNING BODY. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

Form 8868 (Rev. 1-2011)				_ Page 2
• If you are filing for an Additional (Not Automatic) 3-Mon	th Extension,	complete only Part II and check this b	оох	▶ X
Note. Only complete Part II if you have already been granted				
 If you are filing for an Automatic 3-Month Extension, co 	mplete only Pa	art I (on page 1).		
Part II Additional (Not Automatic) 3-Mon	th Extensio	n of Time. Only file the original (no	copies needed).	
Type or Name of exempt organization			Employer identificat	tion number
print WAUKESHA COUNTY CHAMBER O			39-068980	5
File by the extended due date for filing your filing your		tions.		
return. See City, town or post office, state, and ZIP code. For instructions. WAUKESHA, WI 53188-1660	or a foreign add	dress, see instructions.		
Enter the Return code for the return that this application is for	or (file a separa	te application for each return)		0 3
Application	Return	Application		Return
ls For	, , , 	Code		
Form 990	01	7. X.		3 1 12 W
Form 990-BL	02	Form 1041-A		80
Form 990-EZ	03	Form 4720		09
Form 990-PF	04	Form 5227		10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069		11
Form 990-T (trust other than above)	06	Form 8870		12
STOP! Do not complete Part II if you were not already gra	nted an auton	natic 3-month extension on a previous	usly filed Form 8868.	
 The books are in the care of ► 223 WISCONSI 	N AVE S			
Telephone No. ► 262-542-4249		FAX No. ► 262-542-806	8	_
 If the organization does not have an office or place of bus 	iness in the Ur	ited States, check this box		·
 If this is for a Group Return, enter the organization's four 	digit Group Exe	emption Number (GEN) If ti	his is for the whole grou	p, check this
box ▶ If it is for part of the group, check this box ▶		ch a list with the names and EINs of al	<u>ll members the extensio</u>	n is for.
4 I request an additional 3-month extension of time until		15, 2011		
5 For calendar year, or other tax year beginning		, 2009 , and ending	JUN 30, 201	<u>0</u> .
6 If the tax year entered in line 5 is for less than 12 mont	hs, check reas	on: Initial return	Final return	
Change in accounting period				
7 State in detail why you need the extension ADDITIONAL TIME IS NEEDED T	O WORK T	WITH OUR INDEPENDENT		
ACCOUNTANT IN ORDER TO FILE		The state of the s		
ACCOUNTANT IN ORDER TO FILE	A COMP	JEIE AND ACCORATE KI	EIORN.	
8a If this application is for Form 990-BL, 990-PF, 990-T, 47	'20. or 6069. e	nter the tentative tax, less any	1 1	
nonrefundable credits. See instructions.	20,0.0000,0	into the terraine tax, tees any	8a \$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 60	069, enter any	refundable credits and estimated		
tax payments made. Include any prior year overpayment	-			
previously with Form 8868.			8b \$	0.
c Balance due. Subtract line 8b from line 8a. Include you	ur payment wit	h this form, if required, by using		
EFTPS (Electronic Federal Tax Payment System). See i			8c \$	0.
		d Verification		
Under penalties of perjury, I declare that I have examined this form, in t is true, correct, and complete, and that I am authorized to prepare t	ncluding accomp	anying schedules and statements, and to tr		
~ ~	► CPA		Date ▶ 3/15/	4
				3 (Rev. 1-2011)



State of Wisconsin Department of Financial Institutions Division of Corporate and Consumer Services



2010 AUG ARTICLES OF AMENDMENT – NONSTOCK CORPORATION

	(Enter Cornerate Name)	
	(Enter Corporate Name)	
Text of Amendment (Refer to the existing form. Determine those items to be change and how the amended paragraph is to rea	ed and set forth the number identifying	
RESOLVED, THAT the articles of incorp	poration be amended as follows:	
Article I shall read: "The Business Alliance, Inc."		AUG 2 0 2010
B. Amendment(s) adopted on June 16	5, 2010	DEPARTMENT OF
(Indicate the method of adoption by check		FINANCIAL INSTITUTIONS
OR In accordance with sec. 181.16 OR In accordance with sec. 181.16	002, Wis. Stats. (By the Board of Direction) 003, Wis. Stats. (By Members) 004, Wis. Stats. (By Members voting by	
C. Approval by 3 rd Person (Contingency S	tatement)	
	e articles of incorporation was obtained to of the articles of incorporation author	•
(Date)	(Signature)	
Title: President Secretary or other officer title	Suzanne Kelley	
	(Printed nan	ne)
This document was drafted by	R. Walden, Jr.	
THE GOVERNMENT WAS GIVEN U.S.	(Name the individual who drafted t	he document)

COPY

1 of 2

ARTICLES OF AMENDMENT (Ch. 181, Nonstock)

```
Walden, Schuster & Vaklyes, S.C.
c/o Attorney James R. Walden, Jr.
707 West Moreland Boulevard, Suite 9
Waukesha, Wisconsin 53188
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▲ Your return address and phone number during the day: (262) 547 - 5517

INSTRUCTIONS (Ref. sec. 181.1005 Wis. Stats. for document content)

Submit one original and one exact copy to Dept. of Financial Institutions, P O Box 7846, Madison WI, 53707-7846, together with a FILING FEE of \$25.00, payable to the department. Filing fee is non-refundable. (If sent by Express or Priority U.S. mail, address to 345 W. Washington Ave., 3rd Floor, Madison WI, 53703). The original must include an original manual signature, per sec. 181.0120(2), Wis. Stats. NOTICE: This form may be used to accomplish a filing required or permitted by statute to be made with the department. Information requested may be used for secondary purposes. If you have any questions, please contact the Division of Corporate & Consumer Services at 608-261-7577. Hearing-impaired may call 608-266-8818 for TDY.

- A. Enter the name of the corporation (before any change effected by this amendment) and the text of the amendment(s). The text should recite the resolution adopted (e.g., "Resolved, that Article lof the articles of incorporation be amended to read: (set forth the amended article).
- B. Enter the date of adoption of the amendment(s). If there is more than one amendment, identify the date of adoption of each. Mark (X) one of the three choices to indicate the method of adoption of the amendment(s).

By Board of Directors – Refer to sec. 181.1002 for specific information on the character of amendments that may be adopted by the Board of Directors without the approval of members with voting rights.

By Members – Adoption by members requires 2/3rd of votes cast or a majority of the voting power, whichever is less, except as conditioned by the articles of incorporation, bylaws, ss. 181.1002(1), 181.1030 or other provisions of Ch. 181, Wis. Stats.

By Members thru Class Voting – Refer to sec. 181.1004 for specific information on class voting by members.

- C. Approval by Other Person Amendment of the articles of incorporation may require the approval of a person other than the board or members, if so specified in the articles of incorporation under sec. 181.1030.
- D. Enter the date of execution and the name and title of the person signing the document. The document must be signed by one of the following: An officer of the corporation (or incorporator if directors have not been elected), or a court-appointed receiver, trustee or fiduciary. A director is not empowered to sign.

If the document is executed in Wisconsin, sec. 182.01(3) provides that it shall not be filed unless the name of the person (individual) who drafted it is printed, typewritten or stamped thereon in a legible manner. If the document is not executed in Wisconsin, enter that remark.