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Department of the Treasury Internal Revenue Service

A For the 2009 calendar year, or tax year beginning

#### **Return of Organization Exempt From Income Tax**

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

OMB No 1545-0047

Open to Public Inspection

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

2009

SEP 1

and ending AUG 31, 2010 D Employer identification number Check if C Name of organization Please use IRS ]Address ]change Denver Metro Chamber of Commerce print or Name change type Doing Business As 84-0186760 ]Initial return See Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Specific Termin-445 Market Street 303-534-8500 Instruc-Amende return tions City or town, state or country, and ZIP + 4 G Gross receipts \$ 8,716,757. Applica-Denver CO 80202-1729 H(a) Is this a group return pendina F Name and address of principal officer Kelly Brough Yes 🗓 No for affiliates? H(b) Are all affiliates included? same as C above Tax-exempt status x 501(c) (6 527 ) (insert no.) 4947(a)(1) or If "No," attach a list (see instructions) J Website: ▶ www.denverchamber.org H(c) Group exemption number ▶ K Form of organization: X Corporation Trust Association Other > L Year of formation: 1935 | M State of legal domicile: co Part I Summary Briefly describe the organization's mission or most significant activities. See Form 990. Part III, Line 1. Activities & Governance Check this box 🕨 📖 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) 52 Number of independent voting members of the governing body (Part VI, line 1b) 4 50 Total number of employees (Part V, line 2a) 5 61 Total number of volunteers (estimate if necessary) 6 985 Total gross unrelated business revenue from Part VIII, column (C), line 12 7a 0. Net unrelated business taxable income from Form 990-T, line 34 7b 0. **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) 8 8,580,675 7,376,292. Program service revenue (Part VIII, line 2g) 1,361,829 1,288,462. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 73,342 45,949. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 233,682 6,054. Total revenue - add lines 8 through 11 (mustrequal Part/VIII/Colûmn (A), line 12) 12 10,249,528 8,716,757. Grants and similar amounts paid (Part IX, Column (A), lines 1-3) 1,065,596. 2,568,189 Benefits paid to or for members (Part IX column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A); lines 5-10) 3,264,165, 3,529,087 16a Professional fundraising fees (Part IX, column-(A); line=1.1e). b Total fundraising expenses (Part IX, column)(D); ine 25), Other expenses (Part IX, column (A), lines 11a-11d, 1-1f-24f) 3,903,049 3,945,264, Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 10,000,325 8,275,025. Revenue less expenses Subtract line 18 from line 12 249,203 441,732. Assets or Balances **Beginning of Current Year** End of Year Total assets (Part X, line 16) 20 11,231,580 10.981.072. Total liabilities (Part X, line 26) 21 1,636,639 1,227,557. 22 Net assets or fund balances Subtract line 21 from line 20 9.594.941 9 753 515 Signature Block Part II Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officed is based on all information of which preparer has any knowledge 3-21-2011 Sign Signature of officer-Here Robert R.Blankenship Chief Operating Office Type or print name and title Date Check if Preparer's identifying number (see instructions) Preparer's Paid signature 1.26.11 employed > Preparer's Firm's name (or EIN ▶ Kundinger, Corder & Engle, P.C. **Use Only** yours if self-employed), 475 Lincoln St., Ste. 200 address, and ZIP + 4 Phone no. ► 303-534-5953 Denver CO 80203

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

No

Form 990 (2009)

Form 990 (2009)

Denver Metro Chamber of Commerce

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	_1_		_X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		_X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	N/A	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and	_		
_	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5_	_X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		v
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	U		_ <u>x</u>
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	•		
•	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
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	10		х
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable	11	х	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI			
•	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
_	Part X, line 16? If "Yes," complete Schedule D, Part IX			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X  Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
Ū	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
-	Schedule D, Parts XI, XII, and XIII.	12		x
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?  Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			L
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16_		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	4-		
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17_		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	10		,
10	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18		<u> </u>
19	complete Schedule G, Part III	19		x
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		x
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Denver Metro Chamber of Commerce

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 19 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		<u>x</u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	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			
	Schedule L, Part I	25b	N/A	
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		Х
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		х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		_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		Х
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	х	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36	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	х	L
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Form 990 (2009)

Denver Metro Chamber of Commerce

Part V Statements Regarding Other IRS Filings and Tax Compliance 84-0186760

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable  14			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable0			
С	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 2a 61			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		<u> </u>
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			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<u> </u>
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		_ X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited	_		
	Tax Shelter Transaction?	5c		
ьа	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	٥-	ľ	
<b>L</b>	any contributions that were not tax deductible?  If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6a		_ X
U	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	OD		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services		ľ	
	provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
_	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		
8	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	•		
	at any time during the year?  N/A	8		
9	Sponsoring organizations maintaining donor advised funds.  Did the organization make any taxable distributions under section 4966?	9a		
a		9b		
10	Did the organization make a distribution to a donor, donor advisor, or related person?  N/A  Section 501(c)(7) organizations. Enter.	_ 50		
	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  10b			
11	Section 501(c)(12) organizations. Enter			
	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?	12a		
b	if "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b		L	ļ
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Denver Metro Chamber of Commerce

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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.

ec	tion A. Governing Body and Management						
	E teathers where the teathers were trade	۱.	I			Yes	No
	Enter the number of voting members of the governing body	1a		52			
	Enter the number of voting members that are independent	1b		50	- 1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with	any otner		_	1	
_	officer, director, trustee, or key employee?			-	2		<u> </u>
3	Did the organization delegate control over management duties customarily performed by or under the	ie direc	ct supervision		_		
	of officers, directors or trustees, or key employees to a management company or other person?	00	Oaa filadO	<u> </u>	3		<u> </u>
4	Did the organization make any significant changes to its organizational documents since the prior Fo		u was filed?	<u> </u>	4		<u> </u>
5	Did the organization become aware during the year of a material diversion of the organization's asse	IS?			5		<u>X</u>
6	Does the organization have members or stockholders?	<b>-</b>		-	6		<u> </u>
/a	Does the organization have members, stockholders, or other persons who may elect one or more me	embers	s of the	١.	.	1	
	governing body?				7a		<u> </u>
	Are any decisions of the governing body subject to approval by members, stockholders, or other per			_ <u> </u>	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken	auring	ı ıne year				
	by the following				.		
	The governing body?				3a	Х	
	Each committee with authority to act on behalf of the governing body?		_ 4 4 4	- 1	3b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	acnea	at the		_		
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		- 0- 4- )		9		Х
ec	tion B. Policies (This Section B requests information about policies not required by the Internal Fi	revenu	e Coae )		I	V	NI -
٠	Describe agreement on house local aboutous bypanabas, or offiliates?			T.		Yes	No
	Does the organization have local chapters, branches, or affiliates?	ahant	ara affiliatas	屵	0a		<u>x</u>
D	If "Yes," does the organization have written policies and procedures governing the activities of such	спари	ers, armates,		<u>م</u> ا		
	and branches to ensure their operations are consistent with those of the organization?	ilina th	o form?		0b	••	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before f	iling tr	e tomi?		11	X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990				_		
	Does the organization have a written conflict of interest policy? If "No," go to line 13	uld and	0 5100	<u>                                   </u>	2a	Х	
D	Are officers, directors or trustees, and key employees required to disclose annually interests that contains a conflicted	ula giv	e rise		<u>_</u>		
_	to conflicts?	"Voc."	dasanha	-	<u>2b</u>	Х	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If in Schedule O how this is done	res,	describe	١,	.	••	
42	Does the organization have a written whistleblower policy?				2c   13	X	
13	, ,				14	<u> </u>	
14	Does the organization have a written document retention and destruction policy?	al by u	donondont		14	Х	
15	Did the process for determining compensation of the following persons include a review and approve persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		idependent				
_				١,			
	The organization's CEO, Executive Director, or top management official				5a 5b	X X	
Ð	Other officers or key employees of the organization			-	ວນ	Α	
16-	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment :	vith a				
·ua	taxable entity during the year?	ment \	ridi a	.	6a		х
<b>L</b>	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eva	امادياد	te narticination	<u> </u>	Ua		
D	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the org						
	exempt status with respect to such arrangements?	jailizat	0113		6ь		
Sec	tion C. Disclosure				UU		
17 18	List the states with which a copy of this Form 990 is required to be filed None  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	T (501	(c)(3)s only) avai	lable fo	r		
10	public inspection. Indicate how you make these available. Check all that apply	. ,501	المرادية والمرادية	iapie iu	•		
	Own website Another's website X Upon request						
40		oorfi.c.	of interest acti	w a	fina	noicl	
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, or	SOLUME	or interest polic	y, and	ıırıa	ncial	
20	statements available to the public  State the name, physical address, and telephone number of the person who possesses the books a	and rec	orde of the area	n	n <b>-</b>	_	
20		iriu 180	orus or the orga	ıı nZdliO			
	Robert R.Blankenship - 303-534-8500						
	1445 Market Street Denver CO 80202-1729						

#### Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if the organization did not	compensate an	у си	irren	t off	icer	, dıre	ecto	r, or trustee.		
(A)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average			Pos				Reportable	Reportable	Estimated
	hours	(cl	(check all t			app	ly)	compensation	compensation	amount of
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
Kelly Jean Brough										
President & CEO	40.00	х		Х				44,067.	0.	2,118.
Madeleine Roberson										
Past Chair	5.00	х		х	L.	ļ	<u> </u>	0.	0.	0.
Charles Ward										
Chair	2.50	х		х	L.		<u> </u>	0.	0.	0.
Bill Lindsay		ļ	1			ļ				
Chair Elect	2.50	х		х		<u></u>		0.	0.	0.
David C. Baker										
Member	2.50	х		L	<u> </u>			0.	0.	0.
Scott H. Binder			Ì							
Member	2.50	х						0.	0.	0.
Joseph B. Blake										
Member (Past CEO)	2.50	х	ļ	х				130,035.	0.	6,911.
Toti Cadavid										
Member	2,50	x	<u> </u>		<u> </u>			0,	0.	0.
Mario M. Carrera			ŀ		1					
Member	2,50	х			<u> </u>	_		0,	0.	0.
Linda Childears										
Member	2,50	X			<u> </u>			0.	0.	0.
Rebecca Cordes			ļ							
Member	2,50	x							0.	0.
Kim Day							1			
Member	2,50	Х	<u> </u>	<u> </u>	_		_		0.	0.
William T. Dehn	I									
Member	2.50	х	_				<u> </u>	0.	0.	0.
Bob Deibel										
Member	2.50	х	1					0.	0.	0.
Lee J. Dolan										
Member	2,50	x	_	<u> </u>	1	_	<u> </u>	0.	0.	0.
Taryn L. Edwards										
Member	2.50	Х	_	_	$\vdash$	ļ	<u> </u>	0.	0.	0.
David Eves			1		1					
Member	2,50	x	<u> </u>	L_	<u> </u>		<u> </u>	0.		0.
932007 02-04-10										Form <b>990</b> (2009)

Form 990 (2009) Denver Metro									84-0186	5760		F	age
Part VII Section A. Officers, Directors, Tru	stees, Key E	mpl	oyee	es, a	ınd l	High	ıest	Compensated Employ	ees (continued)				
(A) Name and title	(B) Average hours			(e Pos	C) sitior	1		( <b>D)</b> Reportable compensation	(E)  Reportable  compensation  from related			(F) stimat nount	of
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	organization (W-2/1099-MIS	s	fı org an	other pension the aniza d rela anizat	ation ie tion ted
Bain Farris													
Member	2.50	X	_			↓_	┞	0.		0.			0
Michael F. Feeley		١						l .					
Member	2.50	<u>x</u>	├	<u> </u>	<u> </u>	1	<u> </u>	0.		0.			0
Cole Finegan	2,50	"		l	ł			0.		0			0
Member Lori Fox	2.30	╀	<del> </del>	┢	⊢	╁	┢	·	ļ	0.	-		
Member	2.50	١,			1			0.		0.			0
Kenneth I. Gart	2.50	<del>  ^</del>			<del> </del>	╁	┢╌	· · · · · · · · · · · · · · · · · · ·	<u> </u>				
Member	2.50	l <sub>x</sub>						0.		٥.			0
Kelly J. Haecker		+	<u> </u>	H	╁	╁╌	<u> </u>	1					
Member	2.50	x						0.		٥.			0
Tensie Homan		<del>                                     </del>		_	<del>                                     </del>		┢						
Member	2,50	x						0.		0.			0
Bob Hottman		Г		Г		П							
Member	2,50	х		1				0.		0.			0
Kelley A. Howes													
Member	2.50	х						0.		0.			0
Jeffrey W. Jones		l											
Member	2.50	X						0.		0.			0
1b Total						<u> </u>		947,908.		0.		56	,148
2 Total number of individuals (including but n	ot limited to the	nose	liste	ed a	bov	e) w	ho r	eceived more than \$100	0,000 in reportabl	e			
compensation from the organization								<u> </u>	·			Yes	No
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s			e, ke	y en	nplo	yee,	or h	nighest compensated er	mployee on		3	163	x
4 For any individual listed on line 1a, is the su			amo	ens	atıor	n an	d ot	her compensation from	the organization				
and related organizations greater than \$15									Ū		4	х	
5 Did any person listed on line 1a receive or a the organization? If "Yes," complete Sched	accrue compe	nsat	tion						rices rendered to		5		x
Section B. Independent Contractors									·				•
Complete this table for your five highest co the organization.     NONE	mpensated in	dep	ende	ent c	cont	racto	ors 1	that received more than	\$100,000 of con	npens	ation '	from	
(A)								(B)		_		2)	
Name and business	address						$\dashv$	Description of s	services		ompe	nsatio	on —
	··-						$\dashv$						
			_				_						

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

					hambe	r of Commerce			84-0186760	Page 9
Pa	rt V	111	Statement of Rever	nue				<u>-</u>		
	•						<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts ts	1 8	а	Federated campaigns		1a					
Contributions, gifts, grants and other similar amounts	1	b	Membership dues		1b	3,861,266.				
S, g		С	Fundraising events		1c					
ar is	(	d	Related organizations		1d					
JS,	(	е	Government grants (contribut	ions)	1e	1,422,164,				
i s	1	f	All other contributions, gifts, gran	ts, and						
ᅙ			similar amounts not included abor	ve [	1f	2,092,862.				
탈	,	g	Noncash contributions included in lines	1a-1f \$		72,829.				
S E		h	Total, Add lines 1a-1f			▶	7 376 292			
						Business Code				
မွ	2 8	а	Community Development			900099	353,607.	353,607.		
φŽ	١	b	Public Affairs			900099	345,559.	345,559.		
S Z		С	Business Services			900099	314,475.	314,475.		
Program Service Revenue	(	d	MDEDC			900099	274,821.	274,821.		
9	(	е								
-	1	f	All other program service reve	nue						
		g	Total. Add lines 2a-2f			<b>&gt;</b>	1,288,462.			
	3		Investment income (including	dividend	s, inter	est, and				
			other similar amounts)			▶	45,949.			45,949.
	4		Income from investment of tax	x-exempt	bond p	oroceeds 🕨				
	5		Royalties			<b>_</b>				
				(i) R	eal	(II) Personal				
	6	а	Gross Rents	<u></u>						
	l	b	Less rental expenses							
ŀ	(		Rental income or (loss)			<u> </u>				
İ			Net rental income or (loss)			<b>•</b>				
	7	а	Gross amount from sales of	(ı) Secu	ırıtıes	(II) Other				
			assets other than inventory	<u> </u>						
	i	þ	Less: cost or other basis							
			and sales expenses	-						
			Gain or (loss)							
			Net gain or (loss)							
e l	8	а	Gross income from fundraisin	-						
ě			including \$	of	•	1				
Be			contributions reported on line	1c) See		1				
Other Revenue		_	Part IV, line 18		a					
5			Less. direct expenses		b	'				
			Net income or (loss) from fund			<b>P.</b>				
ľ	9	а	Gross income from gaming ac	aivities. S				.		
		<b>.</b>	Part IV, line 19 Less direct expenses		a b					
			Net income or (loss) from gan	una activi	_	'				•
			Gross sales of inventory, less	-	ues					
	10	a	and allowances	returns	а					
		h	Less cost of goods sold		b					
			Net income or (loss) from sale	s of inver		<u>'</u>				
t		<u> </u>	Miscellaneous Revenu		y	Business Code				
ŀ	11	2	Reimbursed prog exp	. <u>.</u>		900099	6.054.			6,054,
		a b	Reimbursed prog exp			500033	0,034,			3,034,
		C	<u> </u>				<del></del>			
		d	All other revenue							
			Total. Add lines 11a-11d			<b>•</b>	6.054.			
	12	•	Total revenue. See instructions.			<b>•</b>	8,716,757.	1,288,462,	0.	52,003.
93200	9									Form <b>990</b> (2009)

84-0186760

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). (C) Management and (A) Total expenses (B) Program service (D) Fundraising Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 1,065,596 Grants and other assistance to individuals in the U.S See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the US See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 1,141,604 Compensation not included above, to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 1,652,525 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) 61,907 Other employee benefits 9 205,110 10 Payroll taxes 203,019 Fees for services (non-employees) Management Legal 692 c Accounting 31,300 Lobbying 765,029 Professional fundraising services. See Part IV, line 17 Investment management fees 251,441 12 Advertising and promotion 762,605 Office expenses 13 136,766 Information technology 14 270,924 Royalties 15 16 Occupancy 184,376 Travel 17 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials Conferences, conventions, and meetings 19 513,452 Interest 20 21 Payments to affiliates Depreciation, depletion, and amortization 22 78,097 Insurance 23 12,130 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) 389,653 Commissions expense b Communications 184,289 Equip. rental/maint 32,633 d f All other expenses 331,877 Total functional expenses. Add lines 1 through 24f 25 8,275,025 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

84-0186760

Pai	<u>t X</u>	Balance Sheet				
	,			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1,119.	1	485,114.
	2	Savings and temporary cash investments		7,689,333.	_2	7,730,846.
	3	Pledges and grants receivable, net			_3	
	4	Accounts receivable, net		735,660,	4	298,926.
	5	Receivables from current and former officers, di	rectors, trustees, key			
		employees, and highest compensated employee	es. Complete Part II			
		of Schedule L			5	
	6	Receivables from other disqualified persons (as	defined under section			
		4958(f)(1)) and persons described in section 495	58(c)(3)(B) Complete			
		Part II of Schedule L			6	
ţ	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use		8		
⋖	9	Prepaid expenses and deferred charges		147,532.	9	92,572.
	10a	Land, buildings, and equipment cost or other				
		basis Complete Part VI of Schedule D	10a 831,958.			
	b	Less accumulated depreciation	10b 787,512.	117,121,	10c	44,446,
	11	Investments - publicly traded securities			11	
	12	Investments - other securities See Part IV, line 1	l1	2,419,837.	12	2,280,729.
	13	Investments - program-related See Part IV, line		13		
	14	Intangible assets		14		
	15	Other assets See Part IV, line 11	120,978.	15	48,439.	
	16	Total assets. Add lines 1 through 15 (must equi	11,231,580.	16	10,981,072.	
	17	Accounts payable and accrued expenses	863,136.	17	988,399.	
	18	Grants payable		50,000.	18	
	19	Deferred revenue		227,525.	19	190,711.
	20	Tax-exempt bond liabilities			20	
es	21	Escrow or custodial account liability Complete I			21	
ij	22	Payables to current and former officers, director		:		
Liabilities		highest compensated employees, and disqualifi of Schedule L	ed persons. Complete Part II		00	
	00		ated third parties		22	
	23	Secured mortgages and notes payable to unrela			23	<del></del>
	24 25	Unsecured notes and loans payable to unrelated Other liabilities Complete Part X of Schedule D	u tiliu parties	495,978.	25	40 447
	26	Total liabilities. Add lines 17 through 25		1,636,639	26	<u>48,447.</u> 1,227,557.
	20	Organizations that follow SFAS 117, check he	ere Y and complete	1,030,039,	20	1,221,331.
v	1	lines 27 through 29, and lines 33 and 34.	and complete			
၁၁	27	Unrestricted net assets		9,594,941.	27	9,753,515.
ajar	28	Temporarily restricted net assets			28	*,***,****
8	29	Permanently restricted net assets			29	
Ē		Organizations that do not follow SFAS 117, c	heck here			
P.		complete lines 30 through 34.	· —		] ]	
ts	30	Capital stock or trust principal, or current funds			30	
SSe	31	Paid-in or capital surplus, or land, building, or ed			31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in			32	-
ž	33	Total net assets or fund balances		9,594,941.	33	9,753,515.
	34	Total liabilities and net assets/fund balances		11 231 580	34	10,981,072,

Form **990** (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 or Organizations Exempt From income Tax Order Section 50 I(c) and Section 52

Complete if the organization is described below.

► 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	6) organizations: Complete Part III			
Name of organization			Emple	oyer identification number
Der	nver Metro Chamber of Commerc	ce		84-0186760
Part I-A Complete i	f the organization is exempt	under section 501(c)	or is a section 527 or	rganization.
1 Provide a description of	the organization's direct and indirect p	political campaign activities i	n Part IV	
2 Political expenditures			▶\$	
3 Volunteer hours				
Part I-B Complete i	if the organization is exempt	under section 501(c)(	3)	
1 Enter the amount of any	excise tax incurred by the organizatio	n under section 4955	▶\$	
2 Enter the amount of any	excise tax incurred by organization m	anagers under section 4955	▶\$	
3 If the organization incurre	red a section 4955 tax, did it file Form	4720 for this year?		Yes No
4a Was a correction made?				Yes No
b If "Yes," describe in Part				
Part I-C Complete i	if the organization is exempt	under section 501(c),	except section 501(	c)(3).
1 Enter the amount directly	y expended by the filing organization f	for section 527 exempt funct	tion activities > \$	<del></del>
2 Enter the amount of the	filing organization's funds contributed	to other organizations for se	ection 527	
exempt function activitie	<del>!</del> S		▶\$	
3 Total exempt function ex	spenditures Add lines 1 and 2 Enter h	nere and on Form 1120-POL,		
line 17b			▶\$	
4 Did the filing organization	n file Form 1120-POL for this year?			└── Yes └── No
5 Enter the names, addres	sses and employer identification numb	er (EIN) of all section 527 po	litical organizations to which	h payments were made
•	ted, enter the amount paid from the fil	• •	•	
, , ,	directly delivered to a separate politica		parate segregated fund or a	political action committee
(PAC) If additional space	e is needed, provide information in Pa	rt IV		<u> </u>
(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
			filing organization's funds If none, enter -0	contributions received and promptly and directly
			Tunus II none, enter -o	delivered to a separate
				political organization
				If none, enter -0-
				_

Schedule C (Form 990 or 990-EZ) 2009 Denvel Part II-A   Complete if the organiza	er <u>Metro Cl</u>	namber of Commerce	e on 501(c)(3) and file	84-01 ed Form 5768	86760 Page <b>2</b>		
(election under section 5		pr anaon oootic					
A Check ▶ ☐ If the filing organization beli		illated group					
B Check I if the filing organization che	-		ovisions apply				
	bbying Expe	enditures		(a) Filing organization's totals	(b) Affiliated group totals		
1a Total lobbying expenditures to influence p	ublic opinion	(grass roots lobbying)					
b Total lobbying expenditures to influence a	legislative bo	dy (direct lobbying)					
c Total lobbying expenditures (add lines 1a	and 1b)						
d Other exempt purpose expenditures							
e Total exempt purpose expenditures (add I	Total exempt purpose expenditures (add lines 1c and 1d)						
f Lobbying nontaxable amount. Enter the ar	th columns.						
If the amount on line 1e, column (a) or (b) is:							
Not over \$500,000	20% of	the amount on line 1e					
Over \$500,000 but not over \$1,000,000	\$100,0	00 plus 15% of the ex	cess over \$500,000				
Over \$1,000,000 but not over \$1,500,000	\$175,0	00 plus 10% of the ex	cess over \$1,000,000.				
Over \$1,500,000 but not over \$17,000,000	\$225,0	00 plus 5% of the exc	ess over \$1,500,000				
Over \$17,000,000	\$1,000	,000					
g Grassroots nontaxable amount (enter 25%	of line 1f)		}				
h Subtract line 1g from line 1a If zero or less	, enter -0-				<del>                                     </del>		
i Subtract line 1f from line 1c If zero or less	, enter -0-		l	<del></del>	L		
j If there is an amount other than zero on er	her line 1h or	line 1, did the organiz	zation file Form 4720				
reporting section 4911 tax for this year?				<u>.</u>	Yes No		
, ,	hat made a		r Section 501(h) on do not have to comp es 2a through 2f on pa				
Lo	bbying Expe	nditures During 4-Ye	ar Averaging Period				
Calendar year (or fiscal year beginning in)	a) 2006	<b>(b)</b> 2007	(c) 2008	( <b>d)</b> 2009	(e) Total		
2a Lobbying nontaxable amount							
b Lobbying ceiling amount							
(150% of line 2a, column(e))					<del> </del>		
c Total lobbying expenditures							
d Grassroots nontaxable amount							
e Grassroots ceiling amount		1			<del>                                     </del>		
(150% of line 2d, column (e))							
f Grassroots lobbying expenditures							

Schedule C (Form 990 or 990-EZ) 2009

### Schedule C (Form 990 or 990 EZ) 2009 Denver Metro Chamber of Commerce 84-0186760 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)).

During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of.  a Volunteers?  b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  c Media advertisements?	es No		
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of.  a Volunteers?  b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Amo	ount
or referendum, through the use of.  a Volunteers?  b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?		<u> </u>	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	-	<del> </del>	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities? If "Yes," describe in Part IV			
j Total. Add lines 1c through 1i			<del></del>
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912		-	
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	24/2//5) 27 2		<del></del>
Part III-A Complete if the organization is exempt under section 501(c)(4), section 50501(c)(6).	01(c)(5), or se	ection	
		Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	_1		х
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	_2_		х
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	1	х
501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-	·A, line 3 is a	newarad	
"Yes."  1 Dues assessments and similar amounts from members	4	т	
Dues, assessments and similar amounts from members	1	т	
<ul> <li>Dues, assessments and similar amounts from members</li> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political</li> </ul>	1	т	
<ol> <li>Dues, assessments and similar amounts from members</li> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).</li> </ol>		т	861,226,
<ol> <li>Dues, assessments and similar amounts from members</li> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).</li> <li>a Current year</li> </ol>	2a	т	861,226,
<ol> <li>Dues, assessments and similar amounts from members</li> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).</li> <li>a Current year</li> <li>b Carryover from last year</li> </ol>	2a 2b	т	861,226, 72,952.
<ul> <li>Dues, assessments and similar amounts from members</li> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).</li> <li>a Current year</li> <li>b Carryover from last year</li> <li>c Total</li> </ul>	2a 2b 2c	3,	861,226, 72,952, 72,952,
<ol> <li>Dues, assessments and similar amounts from members</li> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).</li> <li>a Current year</li> <li>b Carryover from last year</li> <li>c Total</li> <li>Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues</li> </ol>	2a 2b	3,	861,226, 72,952, 72,952,
<ul> <li>Dues, assessments and similar amounts from members</li> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).</li> <li>a Current year</li> <li>b Carryover from last year</li> <li>c Total</li> <li>Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues</li> <li>If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess</li> </ul>	2a 2b 2c 3	3,	861,226, 72,952, 72,952,
<ol> <li>Dues, assessments and similar amounts from members</li> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).</li> <li>a Current year</li> <li>b Carryover from last year</li> <li>c Total</li> <li>Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues</li> </ol>	2a 2b 2c 3	3,	861,226, 72,952, 72,952,
<ul> <li>Dues, assessments and similar amounts from members</li> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).</li> <li>a Current year</li> <li>b Carryover from last year</li> <li>c Total</li> <li>Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues</li> <li>If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political</li> </ul>	2a 2b 2c 3	3,	861,226, 72,952, 72,952, 131,282,

#### 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** 

Denver Metro Chamber of Commerce 84-0186760 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II | Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a a Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of No \_\_ Yes violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) Yes and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items. a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

		o Chamber of Co						84-0186			age <b>2</b>
Par	t III Organizations Maintaining C	Collections of A	rt, His	torical Tr	easures, c	or Othe	r Simil	ar Asse	ts (cont	inued)	)
3	Using the organization's acquisition, accessi	on, and other record	is, chec	k any of the	following tha	it are a si	gnıfıcant	use of its	collectio	n item	iS
	(check all that apply)										
а	Public exhibition	d	· 🖳	Loan or excl	hange progra	ams					
b	Scholarly research	e	. 🗀	Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	n how th	hey further tl	he organizati	on's exer	npt purpo	se in Par	t XIV		
5	During the year, did the organization solicit of	r receive donations	of art, h	storical trea	sures, or oth	er sımılar	assets				
	to be sold to raise funds rather than to be ma	aintained as part of t	the orga	nızatıon's co	ollection?				Yes		No_
Pai	t IV Escrow and Custodial Arran	gements. Compl	ete ıf org	ganization ar	nswered "Yes	s" to Forr	n 990, Pa	ırt IV, lıne	9, or		
	reported an amount on Form 990, Pa	rt X, line 21									
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for	contribution	s or other as	sets not	ıncluded				
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing	table:						_	
									Amoun	it	
С	Beginning balance						1c				
	Additions during the year						1d				
e	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on F	orm 990. Part X. line	21?					Г	Yes		No
	If "Yes," explain the arrangement in Part XIV										
Pai			swered	"Yes" to Fo	rm 990, Part	IV, line 1	0				
		(a) Current year	T	Prior year	(c) Two year			ears back	(e) Fou	r vears	back
1a	Beginning of year balance	(4)	1	7	107	,			(0)		
h	Contributions										
c	Net investment earnings, gains, and losses										
4	Grants or scholarships										
	Other expenditures for facilities						•	-	1		
-	and programs										
	Administrative expenses								<del> </del>		<del></del>
' -	End of year balance					-			<u> </u>		
9		r and balance hold (			<u> </u>				<u> </u>		
2	Provide the estimated percentage of the year	ir end balance neid a									
a	Board designated or quasi-endowment  Permanent endowment		%								
D	· · · · · · · · · · · · · · · · · · ·	% %									
C	-			-4 Lald -							
за	Are there endowment funds not in the posse	ession of the organiz	ation th	at are neid a	ina aaministe	erea for tr	ne organiz	zation	1	V	
	by.								0.4	Yes	No
	(i) unrelated organizations								3a(ı)	$\vdash \vdash$	$\vdash$
	(ii) related organizations		٥.						3a(ii)	$\vdash$	<del>                                     </del>
	If "Yes" to 3a(ii), are the related organization:								3b		Ь
4	Describe in Part XIV the intended uses of the rt VI Investments - Land, Building				Dark V. Iraa	10					
rai		<del>-                                    </del>		T					/.n. D		
	Description of investment	(a) Cost or o basis (investi		1 11	or other (other)		oreciation		( <b>d</b> ) Boo	k valu	.e 
1a	Land										
b	Buildings										
С	Leasehold improvements				6,998.		4	758.		2	240.
d	Equipment				824,960.		782	754.		42	206.
е	Other				i						
Tota	I. Add lines 1a through 1e (Column (d) must e	equal Form 990, Part	X, colui	mn (B), line 1	10(c))					44	446.

Schedule D (Form 990) 2009

Schedule D (Form 990) 2009 Denver Metro Chan Part VII Investments - Other Securities. Securities.	e Form 990, Part X. line 12		54	0186760 Page <b>3</b>
(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valua st or end-of-year mar	
Financial derivatives		_		
Closely-held equity interests Other	2,280,729.	Cost		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)	2,280,729.			
Part VIII Investments - Program Related. Se	ee Form 990, Part X, line 1:	3	(c) Method of valua	tion
(a) Description of investment type	(b) Book value	Cos	st or end-of-year mar	
,				
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)			<del></del>	
Part IX Other Assets. See Form 990, Part X, line	15. Description			(b) Book value
Cash held for others (SBDC)	Dodonption			48,447.
cash hera for others (SDDC)				40,447.
			-	
Total. (Column (b) must equal Form 990, Part X, col (B) line	15.)		<b></b>	48,447,
Part X Other Liabilities. See Form 990, Part X,  (a) Description of liability	line 25.	(b) Amount		
<u> </u>		(b) Amount		
Federal income taxes  Due to SBDC		48,447.		
Total. (Column (b) must equal Form 990, Part X, col (B) line	25)	48,447,		

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

	dule D (Form 990) 2009 Denver Metro Chamber of Commerce							age 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to	Audit	ted Financ	cial S	tatem	ent	:S	
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		CH. D.	10	D - 1			
	t XII   Reconciliation of Revenue per Audited Financial Stateme	nts w	ith Reven	iue p		-T		_
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.	1 _	I					
a	Net unrealized gains on investments	2a						
b	Donated services and use of facilities	2b				-		
C	Recoveries of prior year grants  Cher (Describe in Part VIV)	2c 2d						
ď	Other (Describe in Part XIV) Add lines 2a through 2d	20			─┤。	_		
e	Subtract line 2e from line 1				2	-		
3 4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.				-	<b>*</b>		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			1			
b	Other (Describe in Part XIV.)	4b						
c	Add lines 4a and 4b		ı		4			
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)				<u> </u>			
	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents V	Vith Expe	nses	per Re	etui	rn	
1	Total expenses and losses per audited financial statements		<del></del>		Ī.	1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25							
а	Donated services and use of facilities	2a_	L					
b	Prior year adjustments	2b				ł		
С	Other losses	2c				ļ		
d	Other (Describe in Part XIV)	2d		_		- 1		
е	Add lines 2a through 2d				2	е		
3	Subtract line 2e from line 1				ئــا	3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		ı					
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				4	-		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) rt XIV Supplemental Information					5		
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III e 2, Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b Also comp							Part

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States

2009 No. 1545-0047

Inspection

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

Grants and Other Assistance to Organizations,

**Employer identification number 2** Schedule I (Form 990) 2009 Workforce Innovation in Workforce Innovation in Norkforce Innovation in Workforce Innovation in Workforce Innovation in Workforce Innovation in (h) Purpose of grant 84-0186760 or assistance Regional Economic Regional Economic tegional Economic Regional Economic Regional Economic tegional Economic X Yes recipient that received more than \$5,000 Check this box if no one recipient received more than \$5,000 Use Part IV and Schedule I-1 (Form 990) if additional space is needed Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any evelopment evelopment evelopment )evelopment evelopment Jevelopment Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection non-cash assistance (g) Description of (f) Method of valuation (book, FMV, appraisal, other) Ö ö ō o (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States (d) Amount of cash grant 108,639 22,000 42,710 108,118, 34,500 103,955 LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. (c) IRC section if applicable 501(c)(3) Enter total number of section 501(c)(3) and government organizations Denver Metro Chamber of Commerce 84-0404231 84-0644739 84-6002058 84-6014380 General Information on Grants and Assistance 30-0025201 (b) EIN criteria used to award the grants or assistance? Enter total number of other organizations Broadway, #2700 - Denver, CO 80202 1 (a) Name and address of organization Greeley/Evans School District 6 Thomas P. Miller and Associates Valley - 600 East Mountain View Skyline High School- St. Vrain 1025 Ninth Avenue, 3rd Floor Avenue - Longmont, CO 80501 Red Rocks Community College Development Center - 1625 or government Colorado Small Business 2199 S. University Blvd Indianapolis, IN 46202 University of Denver 1630 N. Meridian St. Name of the organization Lakewood, CO 80228 Greeley, CO 80634 13300 W. 6th Ave. Denver, CO 80208 Part 1 2 De Part II N

932101 02-02-10

Schedule I (Form 990) 2009 Denver Metro Chamber of Commerce	Commerce				84-0186760 Page 2
er Assist Schedule	<b>ted States.</b> Contice is needed.	plete if the organiza	ation answered "Yes	to Form 990, Part IV, line 22	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Part IV Supplemental Information. Complete this part to provide the inf	de the information	n required in Part I,	line 2, and any other	formation required in Part I, line 2, and any other additional information	
Schedule I, Part I, Line 2: Grants are made to charitable		and educational			
organizations and are monitored through reporting requirements established	equirements	established			
by the Chamber upon awarding a grant to an organization,		The grants are			
funded on a reimbursement basis and appropriate supporting documentation is	porting docu	mentation is			
required before a reimbursement will be made,		:			
			; ;		
			!		
932102 02-02-10					Schedule I (Form 990) 2009

Department of the Treasury Internal Revenue Service SCHEDULE I-1 (Form 990)

Name of the organization

Continuation Sheet for Schedule I (Form 990)

OMB No 1545-0047 2009 Open to Public

Inspection

**Employer identification number** 

84-0186760

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III.

Denver Metro Chamber of Commerce

Schedule I-1 (Form 990) 2009 Workforce Innovation in i'n Workforce Innovation (h) Purpose of grant or assistance Regional Economic legional Economic Regional Economic Regional Economic Regional Economic Regional Economic legional Economic General Support Development evelopment Jevelopment evelopment evelopment Development evelopment (g) Description of non-cash assistance Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II) appraisal, other) (f) Method of (book, FMV, valuation ö o Ö Ö ö ं o. o (e) Amount of non-cash assistance (d) Amount of cash grant 9,715, 24 186 38,585, 52,624 229,565 115,354 49,163 25,000 LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. (c) IRC section if applicable 84-0405513 501(c)(3) 501(c)(3) 74-2489854 501(c)(3) 501(c)(3) 501(c)(3) 74-2671963 61-1556237 84-1493585 84-6013733 52-1560779 84-6000545 (b) EIN Center - 4130 Tejon Street, Ste. A Foundation - 1445 Market Street -Entrepreneurship - 1722 Boxelder Denver Metro Chamber Leadership Colorado Nonprofit Development Goodwill Industries of Denver Street - Louisville, CO 80027 Front Range Community College (a) Name and address of organization or government Ft, Colling, CO 80523-6015 Ft. Collins, CO 80521-2297 Colorado State University Poudre School District 6850 N. Federal Blvd. Westminster, CO 80031 The Center for Space 6105 Campus Delivery - Denver, CO 80211 3645 W. 112th Ave. 2407 LaPorte Ave. Denver, CO 80202 Denver CO 80202 Denver, CO 80221 TURNABOUT, INC. 1820 Broadway Part

Department of the Treasury Internal Revenue Service SCHEDULE 1-1 Form 990)

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III. Continuation Sheet for Schedule I (Form 990)

OMB No 1545-0047 Open to Public Inspection

Schedule I-1 (Form 990) 2009 Workforce Innovation in Workforce Innovation in Workforce Innovation in (h) Purpose of grant or assistance **Employer identification number** Regional Economic Regional Economic Regional Economic Development )evelopment )evelopment 84-0186760 (g) Description of non-cash assistance Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of non-cash assistance o o o (d) Amount of cash grant 18 914 53,813, 112,669 For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. (c) IRC section if applicable 20-2265183 501(c)(3) Denver Metro Chamber of Commerce 84-6001099 84-6000555 (b) EIN Manufacturing & Technology - 1625 Univeristy of Colorado at Denver ႘ Broadway, Ste. 950 - Denver, (a) Name and address of organization or government Colorado Association of Denver Public Schools Denver, CO 80291-0238 Name of the organization 900 Grant Street Denver, CO 80203 Dept. 439 Part 80202 ¥

#### **SCHEDULE J** (Form 990)

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" to Form 990,

Part IV, line 23.

OMB No 1545-0047

**Open to Public** Inspection

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990. ► See separate instructions.

Employer identification number 84-0186760

	Denver Metro Chamber of Commerce	84-0186760			
Pa	art I Questions Regarding Compensation				
			Ye	s No	_
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form	990,			
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items.				
	First-class or charter travel Housing allowance or residence for person	nal use	-		
	Travel for companions Payments for business use of personal re-	sidence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation feet	;			
	Discretionary spending account Personal services (e.g., maid, chauffeur, c	hef)			
				1	
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or				
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	11:	<u>,                                    </u>		_
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, dire	ectors,	1		
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2			
					_
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's	, l	-		
	CEO/Executive Director Check all that apply		İ		
	X Compensation committee Written employment contract	İ			
	Independent compensation consultant  x Compensation survey or study		1		
	Form 990 of other organizations   x Approval by the board or compensation c	ommittee			
			1		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing				
	organization or a related organization:				
а	Receive a severance payment or change-of-control payment?	48	.	x_	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	41	,	х	_
c	D. I. S. S. S. S. S. S. S. S. S. S. S. S. S.	40	;	х	_
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.				_
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.				
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	n			
	contingent on the revenues of.				
а	The organization?	58	3		
b	Any related organization?	58	,		
	If "Yes" to line 5a or 5b, describe in Part III				
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	n			
	contingent on the net earnings of.				
а	The organization?	6	<u>.                                     </u>		
b	Any related organization?	61			
	If "Yes" to line 6a or 6b, describe in Part III.				
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments	;			
	not described in lines 5 and 6? If "Yes," describe in Part III	7			
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	ıe 🗌			_
	initial contract exception described in Regs. section 53 4958-4(a)(3)? If "Yes," describe in Part III	8			
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in				
	Dec 1st and posture 50 4050 0(s)0	_	. 1		

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

Schedule J (Form 990) 2009

84-0186760

Denver Metro Chamber of Commerce

Schedule J (Form 990) 2009

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(0)	(D)	(E)	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	Nontaxable benefits	(B)(i)-(D)	compensation reported in prior Form 990 or Form 990-EZ
	(i)	152,424,	.000.06	8,000,	9,800,	4,561.	264,785,	
Robert Blankenship	(ii)							
	(i)	160,247.	85,000.	8 000	9,800,	4,751,	267,798,	
Thomas Clark	(ii)	.						
	(3)	113,618.	52,000.	1,500,	6,834.	4,456.	178,408.	
Tamra Ward	(ii)							
	(1)							
	(ii)							
	(i)							
	(ii)							
	(i)						:	
	(ii)							
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	Ξ							
	(ii)							

#### **SCHEDULE J-2**

Department of the Treasury Internal Revenue Service

(Form 990)

#### **Continuation Sheet for Form 990**

OMB No 1545-0047

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

Open to Public Inspection

Name of the Organization

Employer Identification number

84-0186760

Denver Metro						_	<del></del> -		84-018676	
Part I Continuation of Officers, D	irectors, Tr	ust	tee:	s, K	<b>Cey</b>	Em	plo			Employees
(A) Name and title	(B) Average hours	(c		Pos	C) ition that		ıly)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
John Krusoe					l					
Member	2,50	х					_	0,	0.	0
Richard Lewis							1			
Member	2.50	х						0.	0.	0
Kenneth W. Lund		1			1					
Secretary	2,50	x		х	<u> </u>			0.	0,	0
Donna Lynne					1					
Member	2.50	x						0.	0.	0
Donald M. Marshall						l				
Member	2,50	x			ļ			0.	0.	0
Bette Matkowski					ŀ					
Member	2,50	х					<u> </u>	0.	0.	0
Nancy J. McCallin	l						ĺ			
Member	2,50	x		<u> </u>				0.	0.	0
Gregory W. Morris			ļ							
Member	2.50	X	<u> </u>		<u> </u>			0.	0.	0
James M. Mulligan										
Member	2.50	х		ļ	_	<u> </u>	L	0.	0.	0
Todd D. Munson							Ì			
Treasurer	2.50	X	<u> </u>	Х	<u> </u>	<u> </u>	<u> </u>	0.	0.	0
Jane Okun Bomba	1						ļ			
Member	2,50	X	<u> </u>	ļ_	<b> </b>	<u> </u>	<u> </u>	0.	0.	0
W. Perry Pearce										
Member	2.50	Х	ļ.,	-	-	<u> </u>	<u> </u>	0.	0.	0
J. Donald Richards						ļ	İ			
Member	2,50	X	-	<del> </del>		├	┝	0.	0.	_0
Joel S. Rosenstein										
Member	2,50	X		<del> </del>	-	<u> </u>	<del> </del>	0.	0.	0
Hassan A. Salem								_	_	_
Member	2.50	X	-	┼	+	╁	$\vdash$	0.	0.	0
Joseph M. Samuel										
Member	2.50	<del> X</del>	<del>  -</del> -	<del> </del>	+-	$\vdash$	$\vdash$	0.	0.	0
Willie Shepherd										_
Member	2,50	<del> X</del>	+	<del> </del>	+	$\vdash$	$\vdash$	0.	0.	0
James E. Shmerling							1			
Member	2,50	X	+	+-	+	+	+	0.	0.	0
Lem O. Smith IV										
Member	2,50	+x	+-	+-	+	+	+-	0.	0,	0
Beth K. Soberg										
<u>Member</u>	2.50	1 X	ــــــــــــــــــــــــــــــــــــــ	1	<u> </u>	1	1	0.	<u> </u>	<u> </u>

#### **SCHEDULE J-2**

(Form 990)

#### **Continuation Sheet for Form 990**

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name of the Organization

Employer Identification number

		T .					•	T	t Compensated I	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average hours	10	heck		ition		ьA	Reportable compensation	Reportable compensation	Estimated amount of
	per	-(0	T		liiai	app 	iy)	from	from related	other
	week	_				è e		the	organizations	compensation
		recto				ma :		organization	(W-2/1099-MISC)	from the
		e or d	g			sated		(W-2/1099-MISC)		organization and related
		truste	al trus		),ee	m per				organizations
		Individual trustee or director	Institutional trustee	<u>پر</u>	Key employee	Highest compensated employee	Former			
		Ē	重	Officer	ē,	1	F			
Tom Spilman										
Member	2.50	X	L.	ļ	ļ	<u> </u>		0.	0.	0
Stewart A. Stockdale										
Member	2,50	X						0.	0,	0
Penfield W. Tate III										
Member	2,50	Х						0,	0,	. 0
Bruce S. Wagner										
Member	2,50	X		_		<u> </u>		0.	0.	0
Leroy J. Williams										
Member	2,50	X		_		_		0.	0,	0
Robert Blankenship				1						
Chief Operating Officer	40,00	-	┢	X		<u> </u>		250,424.	0.	14,361
Thomas Clark										
Executive Vice President	40,00	1	┢-	x		<u> </u>		253,247.	0.	14,551
Tamra Ward									_	
Senior Vice President	40,00	-		X	<u> </u>	<del> </del>	-	167,118.	0.	11,290
Holli Baumunk										
Vice President	40,00	+	<del> </del>	X		$\vdash$	-	103,017.	0.	6,917
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## SCHEDULE M (Form 990)

#### **Noncash Contributions**

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

90, Part IV, lines 29 or 30.

Attach to Form 990.

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

	Denver Metro Chambo	er of Com	merce	<del></del>		84-018	6760		
Par	t I Types of Property								
		(a) Check if applicable	(b) Number of contributions	<b>(c)</b> Revenues reported on Form 990, Part VIII, line		(d) Method of dete revenues	_	l	
1	Art - Works of art					_			
2	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications								
5	Clothing and household goods								
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property								
9	Securities - Publicly traded								
10	Securities - Closely held stock								
11	Securities · Partnership, LLC, or								
	trust interests								
12	Securities · Miscellaneous								
13	Qualified conservation contribution -								
	Historic structures								
14	Qualified conservation contribution - Other								
15	Real estate - Residential								
16	Real estate - Commercial								
17	Real estate - Other								
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts				<u> </u>				
23	Scientific specimens					<del></del> _			
24	Archeological artifacts		-						
25	Other ( Advertising )	X	26	72,82	9.Fair va	alue			
26	Other ()				-				
27	Other ()		1						
28	Other ()								
29	Number of Forms 8283 received by the organiz				_				
	for which the organization completed Form 828	83, Part IV,	Donee Acknov	vledgment [_2	9		1		
								Yes	NO_
30a	During the year, did the organization receive by		*	•					
	at least three years from the date of the initial of	contribution	, and which is	not required to be used to	or exempt p	urposes tor	00-	ł	
	the entire holding period?						30a		X
	If "Yes," describe the arrangement in Part II	العاطفين مرامم		of any non-stand				1	
31	Does the organization have a gift acceptance p	=				s'	31		X
32a	Does the organization hire or use third parties	or related of	rganizations to	solicπ, process, or sell no	oncash		20-		
	contributions?						32a		_x
	If "Yes," describe in Part II	aluma (a) f-	ratura of	aartu far which aalisma /-	\ io obooks =				!
33	If the organization did not report revenues in c	oiumn (c) fo	r a type ot pro	perty for which column (a	) is checked	ı <b>,</b>		ļ	l
	describe in Part II.						L L		

#### SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

#### **Supplemental Information to Form 990**

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

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization **Employer identification number** Denver Metro Chamber of Commerce 84-0186760 Form 990, Part III, Line 4d, Other Program Services: Through the Denver Metro Small Business Development Center the Chamber provides technical assistance to small businesses and entrepreneurs, Expenses \$ 144392. including grants of \$ 0. Revenue \$ 314475. Form 990, Part VI, Section B, line 11: The Form 990 is initially reviewed by the Director of Finance and Chief Operating Officer. The 990 is then distributed electronically to the Finance and Audit Committee for pre-read and then reviewed at a Finance and Audit Committee meeting. At the meeting, representatives from the firm that prepares the tax return presents the 990 to the Committee. When the Committee is comfortable with the 990 the Committee recommends that it be presented for the Board of Directors for acceptance. A representative from the Finance and Audit Committee, typically the Chair, will present the 990 to the Board with assistance from representatives from the audit firm as necessary. If the Board votes to accept the 990, it is officially filed Form 990 Part VI Section B. Line 12c: Each conflict of interest questionnaire is reviewed internally and summarized by the Chief Operating Officer. This summary, along with any areas of concern, is then presented to the Finance and Audit Committee to determine if there are any conflicts. The Finance and Audit Committee presents a summary of their findings at a minimum of 2 to 3 times per year to the Board of Directors Form 990, Part VI, Section B. Line 15: The organization reviews the total and other executive salaries using three sources

#### **SCHEDULE O**

(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.

Attach to Form 990.

2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service **Employer identification number** Name of the organization Denver Metro Chamber of Commerce 84-0186760 Mountain States Employers Council Salary Survey (MSEC), American Chamber of Commerce Executives Salary Survey, and Watson Wyatt Salary Survey or other comparable sources. In addition to utilizing these three independent sources, the organization also has a compensation committee consisting of three uncompensated Board members - the Chair of the Board, the Past Chair of the Board, and the Chair-Elect of the Board. The committee approves top management total compensation, Form 990, Part VI, Section C, Line 19: The Chamber has a written policy detailing how documents are made accessible to the public, which was reviewed and approved by the Finance and Audit Committee. The governing documents, conflict of interest policy, and financial statements are all available upon written request or upon email request to denverchamber.org

available upon written request, or upon email request to denverchamber.org.

Form 990, Part XI, Line 2c:

The Finance and Audit Committee is responsible for selecting the independent auditors and reviewing the results of the audit. The

Committee meets annually with the independent auditors to receive the audit report and internal control recommendations, if any. There were no changes to this process in the current year.

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Related Organizations and Unrelated Partnerships

2009 Open to Public Inspection

OMB No 1545-0047

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
 ► Attach to Form 990.

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33)

Denver Metro Chamber of Commerce

Employer identification number 84-0186760

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)	tions (Complete if the organization an	swered "Yes" to Form 990, Pa	rt IV, line 34 because	It had one or more	related tax-exempt
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
Denver Metro Chamber Leadership Foundation - 74-2489854, 1445 Market Street, Denver, CO 880202	Support the mission of the DMCC	Colorado	501(c)(3)	509(a)(1)	N/A
Market Street - 84-1153174 Market Street r CO 80202	Holding company	Colorado	501(c)(2)		N/A
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	e, see the Instructions for Form 990	Ċ			Schedule R (Form 990) 2009

84-0186760 Denver Metro Chamber of Commerce

Page 2

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year) Part III

Schedule R (Form 990) 2009

General or managing le partner?  Yes No			e related	(h) Percentage ownership				990) 2009
Code V.UBI amount in box 20 of Schedule K·1 (Form 1065)			had one or mor	(g) Share of Fend-of-year assets				Schedule R (Form 990) 2009
(h) Disproportion- ate allocations? Yes No			because it					Sch
(g) Share of end-of-year assets			t IV, line 34	(f) Share of total income				
			Form 990, Part	(d) Type of entity (C corp, S corp, or trust)				
(f) Share of total income			d "Yes" to I			-		
(e) Predominant income (related, unrelated, culded from tax under sections 512-514)			on answere	(d) Direct controlling entity				
(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)			e organizati	(c) Legal domicile (state or foreign country)				
(d) Direct controlling entity			rust (Complete if th	(b) Primary activity				
(c) Legal domicile (state or foreign country)			oration or T	Prim	, ,	 · , ,	.,,	:
(b) Primary activity			anizations Taxable as a Corp	7				
(a) Name, address, and EIN of related organization			Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year )	(a) Name, address, and EIN of related organization				932182 02-04-10

Page 3

84-0186760

Denver Metro Chamber of Commerce

Schedule R (Form 990) 2009

Schedule R (Form 990) 2009 Denver Metro Chamber of Commerce

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a)	(q)	(0)	<b>(</b> D)	(e)	€	(6)	£)
Name, address, and EIN	Primary activity	nicile	Are all partners	Share of end-of-	Dispropor-		
of entity		_	section 501(c)(3) organizations?	year assets	tionate allocations?	amount in box 20 of Schedule K-1	managing partner?
		country)	Yes No		Yes No	(Form 1065)	٠,
							_
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					-		_
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Schedule R (Form 990) 2009

#### Form **8868**

(Rev. April 2009)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return

OMB No. 1545-1709

- IT y	you are filing for an Automatic 3-Month Extension, complete only Part I and check this box	<b>▶</b> x
On n	you are filing for an <b>Additional (Not Automatic) 3-Month Extension, complete only Part II</b> (on page 2 of this n <b>ot complete Part II unless</b> you have already been granted an automatic 3-month extension on a previously fi	
Par	Automatic 3-Month Extension of Time. Only submit original (no copies needed)	
4 cor	rporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and com	plete
⊃art I	I only	▶ □
	ther corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an e income tax returns	extension of time
noted (not a you n	tronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension delice of the months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronical automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or compust submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic file and click on e-file for Chanties & Nonprofits.	cally if (1) you want the additional nsolidated Form 990-T. Instead,
Type print	or Name of Exempt Organization	Employer identification number
J. 1111	Denver Metro Chamber of Commerce	84-0186760
File by due da	the Number street and soom or putting If a R.O. box and instructions	
iling yo	OUT 1145 Market Street	
eturn nstruc		
	Denver CO 80202-1729	
Chec	ck type of return to be filed (file a separate application for each return)	
		100
뽄	Form 990	
H	Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 52  Form 990-EZ Form 990-T (trust other than above) Form 60	
H	Form 990-PF Form 1041-A Form 88	
<u> </u>	FOR 1941A	
	Robert R.Blankenship	
	· · · · · · · · · · · · · · · · · · ·	
• Th	ne books are in the care of P 1445 Market Street - Denver CO 80202-1729	
	he books are in the care of ► <u>1445 Market Street - Denver, CO 80202-1729</u> elephone No ► 303-534-8500 FAX No ►	
Te		<b>▶</b> □
Te • If •	elephone No ▶ <u>303-534-8500</u> FAX No ▶	s is for the whole group, check this
Te If t	elephone No ► 303-534-8500 FAX No ► the organization does not have an office or place of business in the United States, check this box	
Te If t	elephone No   303-534-8500  The organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  If it is for part of the group, check this box  and attach a list with the names and EINs of all	members the extension will cover.
Te If t	the organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the If it is for part of the group, check this box and attach a list with the names and EINs of all I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unit	members the extension will cover.
Te If to Oox I	the organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the If it is for part of the group, check this box and attach a list with the names and EINs of all I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time untapril 15, 2011, to file the exempt organization return for the organization named a	members the extension will cover.
Te If to Oox I	the organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the If it is for part of the group, check this box and attach a list with the names and EINs of all I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unto April 15, 2011, to file the exempt organization return for the organization named as is for the organization's return for	members the extension will cover.
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Te Iff	the organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the If it is for part of the group, check this box and attach a list with the names and EINs of all I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unto April 15, 2011, to file the exempt organization return for the organization named a significant or calendar year or or and endingAUG 31, 2010 for this tax year is for less than 12 months, check reason Initial return Final return Final return If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	members the extension will cover.  Il bove The extension  Change in accounting period
Te Ifff Iff Iff Iff Iff Iff Iff Iff Iff I	the organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If th  If it is for part of the group, check this box   I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unit  April 15, 2011, to file the exempt organization return for the organization named a is for the organization's return for  If this tax year beginningSEP 1, 2009, and endingAUG 31, 2010  If this tax year is for less than 12 months, check reason Initial return Final return  If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	members the extension will cover.  Il bove The extension  Change in accounting period
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