



See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

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

A For the 2009 calendar year, or tax year beginning 11/01, 2009, and ending 10/31, 2010

B Check if applicable: <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization CHAMBER OF COMMERCE OF GREATER KANSAS CITY Doing Business As Number and street (or P O box if mail is not delivered to street address) Room/suite 30 W. PERSHING ROAD, SUITE 301 City or town, state or country, and ZIP + 4 KANSAS CITY, MO 64108 EXTENSION ATTACHED	D Employer identification number 44-0196840
	F Name and address of principal officer: JIM HEETER 30 W. PERSHING RD., SUITE 301 KANSAS CITY, MO 64108	E Telephone number (816) 221-2424
	G Gross receipts \$ 5,114,785.	H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "No," attach a list (see instructions)
	I Tax-exempt status <input checked="" type="checkbox"/> 501(c) (6) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	H(c) Group exemption number
J Website: WWW.KCCHAMBER.COM		
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		
L Year of formation		M State of legal domicile MO

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: PROVIDE LEADERSHIP TO BUILD A VIBRANT AND PROSPEROUS REGIONAL COMMUNITY WITH AN OUTSTANDING QUALITY OF LIFE. ASSIST OUR MEMBERS IN BECOMING SMARTER, MORE VISIBLE, AND BETTER CONNECTED.		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	66
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	64
	5	Total number of employees (Part V, line 2a)	5	47
	6	Total number of volunteers (estimate if necessary)	6	
		7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a
7b		Net unrelated business taxable income from Form 990-T, line 34	7b	-92,032.
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	0.	0.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	4,740,433.	4,425,474.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-7,967.	16,292.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	672,058.	673,019.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	5,404,524.	5,114,785.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	25,000.	25,000.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	2,964,548.	2,662,405.
	16b	Total fundraising expenses, Part IX, column (B), line 25	0.	0.
	17	Other expenses (Part IX, column (A), lines 11f-14f-24f)	2,580,786.	2,885,569.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	5,570,334.	5,572,974.
Net Assets or Fund Balances	19	Revenue less expenses. Subtract line 18 from line 12	-165,810.	-458,189.
	20	Total assets (Part X, line 16)	Beginning of Year	End of Year
	21	Total liabilities (Part X, line 26)	3,384,158.	2,831,925.
22	Net assets or fund balances. Subtract line 21 from line 20	1,490,884.	1,378,817.	
			1,893,274.	1,453,108.

Part II Signature Block

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.			
	Signature of officer <i>[Signature]</i> Date 6-8-11	President & Chief Executive Officer		
Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed	Preparer's identifying number (see instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4 HOUSE PARK & DOBRATZ, P.C. 605 WEST 47TH STREET, SUITE 301 KANSAS CITY, MO 64112	6/2/2011	<input type="checkbox"/>	P00268044 EIN 43-1562209 Phone no 816-931-3393
May the IRS discuss this return with the preparer shown above? (see instructions) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				

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

Form 990 (2009)

JSA 9E1010 3 000

51P17Y K501 5/20/2011 1:31:02 PM

06044

PAGE 3

6

Part III Statement of Program Service Accomplishments**1** Briefly describe the organization's mission:

PROVIDE LEADERSHIP TO BUILD A VIBRANT AND PROSPEROUS REGIONAL
COMMUNITY WITH AN OUTSTANDING QUALITY OF LIFE. ASSIST OUR MEMBERS IN
BECOMING SMARTER, MORE VISIBLE, AND BETTER CONNECTED.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.

Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

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

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

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

4d Other program services. (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ►

Part IV Checklist of Required Schedules

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

Form 990 (2009)

Part IV Checklist of Required Schedules (continued)

		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.	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.		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.	X	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to question 25.		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I.		
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.		
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.		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III.		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.	X	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.		X
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV.		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.		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.	X	
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.	X	
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.		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2.		
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.		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.	X	

Form 990 (2009)

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable.	21	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
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	47	
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	X	
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
4b	If "Yes," enter the name of the foreign country: ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
7h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
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?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from members or shareholders		
11b	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?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		

Form 990 (2009)

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

Section A. Governing Body and Management

		Yes	No
1a Enter the number of voting members of the governing body	1a 66		
b Enter the number of voting members that are independent	1b 64		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5 Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6 Does the organization have members or stockholders?	6		X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		X
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a The governing body?	8a	X	
b Each committee with authority to act on behalf of the governing body?	8b	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a		X

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

	Yes	No
10a Does the organization have local chapters, branches, or affiliates?	10a	X
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	
11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11 X	
11A Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	12a X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b X	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c X	
13 Does the organization have a written whistleblower policy?	13 X	
14 Does the organization have a written document retention and destruction policy?	14 X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	15a X	
b Other officers or key employees of the organization	15b X	
If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions)		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	X
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► MO,

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

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► RICK PERRY 30 W. PERSHING RD., SUITE 301 KANSAS CITY, MO 64108
816-221-2424

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

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

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

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
RANDALL O'DONNELL VICE CHAIR	1.00	X		X				0.	0	0.
T. NELSON MANN VICE CHAIR	1.00	X		X				0.	0	0.
TOM BOWSER VICE CHAIR	1.00	X		X				0.	0	0.
JOHN BLUFORD VICE CHAIR	1.00	X		X				0.	0	0.
ROBERT D. REGNIER VICE CHAIR	1.00	X		X				0.	0	0.
PAMELA R. BERNEKING MEMBER	1.00	X						0.	0	0.
KEVIN BARTH MEMBER	1.00	X						0.	0	0.
STEVE BERNSTEIN MEMBER	1.00	X						0.	0	0.
MATHEW J. BOWEN VICE CHAIR	1.00	X		X				0.	0	0.
MICHAEL BURKE VICE CHAIR	1.00	X		X				0.	0	0.
LEE A. DERROUGH VICE CHAIR	1.00	X		X				0.	0	0.
PETER DESILVA CHAIRMAN	10.00	X		X				0.	0	0.
DAVID M. FOWLER CO-CHAIR	1.00	X		X				0.	0	0.
E. FRANK ELLIS SECOND VICE CHAIR	10.00	X		X				0.	0	0.
RICHARD HASTINGS VICE CHAIR	1.00	X		X				0.	0	0.
RICK KRSKA MEMBER	1.00	X						0.	0	0.

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
FRED LOGAN VICE CHAIR	1.00	X		X				0.	0.	0.
WILLIAM P. LUCAS VICE CHAIR	1.00	X		X				0.	0.	0.
ROSHANN PARRIS VICE CHAIR	1.00	X		X				0.	0.	0.
BENNY LEE MEMBER	1.00	X						0.	0.	0.
LORI MALLORY MEMBER	1.00	X						0.	0.	0.
BRETT LEWIS MEMBER	1.00	X		X				0.	0.	0.
JOHN KELLY VICE CHAIR	1.00	X		X				0.	0.	0.
BRIDGETTE WILLIAMS VICE CHAIR	1.00	X		X				0.	0.	0.
WILLIAM H. DOWNEY VICE CHAIR/TREASURER	10.00	X		X				0.	0.	0.
SCOTT HALL VICE CHAIR	1.00	X		X				0.	0.	0.
KAREN ZECY VICE CHAIR	1.00	X		X				0.	0.	0.
KENNETH V. HAGER VICE CHAIR	1.00	X		X				0.	0.	0.
EDWARD HONESTY VICE CHAIR	1.00	X		X				0.	0.	0.
1b Total CONTINUED AT SCHEDULE J-2								2,117,639.	0.	83,299.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **6**

3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3	X	
4	X	
5		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 5		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **1**

Part VIII Statement of Revenue

44-0196840

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f					
	g	Noncash contributions included in lines 1a-1f: \$						
	h	Total. Add lines 1a-1f			0			
Program Service Revenue				Business Code				
	2a	PROGRAM AND EVENTS INCOME			1,537,177.	1,537,177.		
	b	MEMBERSHIP DUES			2,888,297.	2,888,297.		
	c							
	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f			4,425,474.			
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts). ATTACHMENT 6			16,292.	-92,032.	108,324
		4	Income from investment of tax-exempt bond proceeds			0.		
5		Royalties			0.			
		(i) Real	(ii) Personal					
6a		Gross Rents						
b		Less: rental expenses						
c		Rental income or (loss)						
d		Net rental income or (loss)			0.			
		(i) Securities	(ii) Other					
7a		Gross amount from sales of assets other than inventory						
b		Less: cost or other basis and sales expenses						
c		Gain or (loss)						
d		Net gain or (loss)			0.			
8a		Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18		a				
b		Less: direct expenses		b				
c		Net income or (loss) from fundraising events			0.			
9a		Gross income from gaming activities See Part IV, line 19		a				
b		Less: direct expenses		b				
c		Net income or (loss) from gaming activities			0.			
10a		Gross sales of inventory, less returns and allowances		a				
b	Less: cost of goods sold		b					
c	Net income or (loss) from sales of inventory			0.				
Miscellaneous Revenue				Business Code				
11a	ADMINISTRATIVE SERVICES			10,835.	10,835.			
b	CHAMBER CHOICE			630,000.	630,000.			
c	CENTURIONS REVENUE			32,184.	32,184.			
d	All other revenue							
e	Total. Add lines 11a-11d			673,019.				
12	Total Revenue. See instructions			5,114,785.	5,098,493.	-92,032.	108,324.	

Form 990 (2009)

Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 . . .	25,000.			
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	0.			
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0.			
4 Benefits paid to or for members	0.			
5 Compensation of current officers, directors, trustees, and key employees	1,076,642.			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . .	0.			
7 Other salaries and wages	1,199,499.			
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . .	47,197.			
9 Other employee benefits	188,704.			
10 Payroll taxes	150,363.			
11 Fees for services (non-employees):				
a Management	0.			
b Legal	54,551.			
c Accounting	170,361.			
d Lobbying	0.			
e Professional fundraising services See Part IV, line 17	0.			
f Investment management fees	0.			
g Other	0.			
12 Advertising and promotion	0.			
13 Office expenses	108,134.			
14 Information technology	0.			
15 Royalties	0.			
16 Occupancy	321,673.			
17 Travel	63,581.			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials . . .	0.			
19 Conferences, conventions, and meetings	9,954.			
20 Interest	0.			
21 Payments to affiliates	0.			
22 Depreciation, depletion, and amortization	38,784.			
23 Insurance	0.			
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a SPECIAL PROJECTS	946,489.			
b MEMBER DEVELOPMENT	495,036.			
c MEMBER SERVICES	318,468.			
d PARKING	56,993.			
e BANK CHARGES	30,839.			
f All other expenses	270,706.			
25 Total functional expenses. Add lines 1 through 24f	5,572,974.			
26 Joint Costs. Check here <input type="checkbox"/> If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	120,121.	1	16,688.
	2 Savings and temporary cash investments	649,466.	2	360,528.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	153,744.	4	57,085.
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	195,935.	9	245,731.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,368,373.		
	b Less: accumulated depreciation	10b 1,138,914.	10c 101,499.	229,459.
	11 Investments - publicly traded securities	2,163,393.	11	1,922,434.
	12 Investments - other securities See Part IV, line 11		12	
	13 Investments - program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	3,384,158.	16	2,831,925.	
Liabilities	17 Accounts payable and accrued expenses	351,782.	17	279,956.
	18 Grants payable		18	
	19 Deferred revenue	816,518.	19	791,683.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D	322,584.	25	307,178.
	26 Total liabilities. Add lines 17 through 25	1,490,884.	26	1,378,817.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	1,893,274.	27	1,453,108.
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	1,893,274.	33	1,453,108.
34 Total liabilities and net assets/fund balances	3,384,158.	34	2,831,925.	

Form 990 (2009)

Part XI Financial Statements and Reporting

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input type="checkbox"/> Accrual <input checked="" type="checkbox"/> Other <u>MODIFIED CASH</u> If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		X
b Were the organization's financial statements audited by an independent accountant?	X	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

Form **990** (2009)

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities
For Organizations Exempt From Income Tax Under section 501(c) and section 527

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

OMB No 1545-0047

2009

Open to Public
Inspection

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

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

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

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

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

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

Name of organization	Employer identification number
CHAMBER OF COMMERCE OF GREATER KANSAS CITY	44-0196840

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

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

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

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

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

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

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

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

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

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

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

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

Schedule C (Form 990 or 990-EZ) 2009

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

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

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

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

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

1 Dues, assessments and similar amounts from members	1	2,888,297.
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	672,895.
b Carryover from last year	2b	
c Total	2c	672,895.
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	722,074.
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	-49,179.

Part IV Supplemental Information

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

Part IV Supplemental Information *(continued)*

Lined area for supplemental information.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization

CHAMBER OF COMMERCE OF GREATER KANSAS CITY

Employer identification number

44-0196840

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

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

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

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

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

a ☐ Public exhibition
 b ☐ Scholarly research
 c ☐ Preservation for future generations

d ☐ Loan or exchange programs
 e ☐ Other _____

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

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

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

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

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

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

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

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

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

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

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

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

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

(i) unrelated organizations
 (ii) related organizations

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

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

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

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		138,034.	136,949.	1,085.
d Equipment				
e Other		1,230,339.	1,001,965.	228,374.
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)				229,459.

Schedule D (Form 990) 2009

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

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

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

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

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

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

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

(a) Description	(b) Book value

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

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

1. (a) Description of liability	(b) Amount
Federal income taxes	
DEFERRED COMPENSATION (MACGREG)	307,178.

Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)	307,178.

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

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	5,114,785.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	5,572,974.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-458,189.
4	Net unrealized gains (losses) on investments	4	18,023.
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	18,023.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	-440,166.

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

1	Total revenue, gains, and other support per audited financial statements	1	5,429,923.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	18,023.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	297,115.
e	Add lines 2a through 2d	2e	315,138.
3	Subtract line 2e from line 1	3	5,114,785.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	5,114,785.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	5,870,086.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	297,112.
e	Add lines 2a through 2d	2e	297,112.
3	Subtract line 2e from line 1	3	5,572,974.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	5,572,974.

Part XIV Supplemental Information

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

CMS EXPENSES

SCH. D, PART XII & XIII LINE 2D

EXPENSES FOR CHAMBER MANAGMENT SERVICES, LLC ARE REPORTED NET OF REVENUES

FOR TAX REPORTING PURPOSES AND GROSS FOR FINANCIAL REPORTING PURPOSES AND

\$3 IN ROUNDING DIFFERENCES

Part XIV Supplemental Information *(continued)*

PAGE 24

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

**Open to Public
Inspection**

Name of the organization

CHAMBER OF COMMERCE OF GREATER KANSAS CITY

Employer identification number

44-0196840

Part I Questions Regarding Compensation

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

- | | |
|--|---|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input checked="" type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

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

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

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

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

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

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?

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

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

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

- a** The organization?
- b** Any related organization?
- If "Yes" to line 5a or 5b, describe in Part III.

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

- a** The organization?
- b** Any related organization?
- If "Yes" to line 6a or 6b, describe in Part III.

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

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

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

Yes No

1b	X	
2	X	
4a		X
4b		X
4c		X
5a		
5b		
6a		
6b		
7		
8		
9		

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

Schedule J (Form 990) 2009

d.

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.

[illegible]

Part III Supplemental Information

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

OTHER REPORTABLE COMPENSATION

PART II, COLUMN III

OTHER REPORTABLE COMPENSATION REPORTED FOR PETE LEVI REPRESENTS THE

PAYOUT OF HIS DEFERRED COMPENSATION PLAN WHICH WAS PAID OUT UPON HIS

RETIREMENT FROM THE CHAMBER.

Continuation Sheet for Form 990

2009

**Open to Public
Inspection**

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.**

Name of the Organization

CHAMBER OF COMMERCE OF GREATER KANSAS CITY

Employer identification number

44-0196840

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
RALPH REID MEMBER	1.00	X						0.	0.	0.
TERRY CALAWAY VICE CHAIR	1.00	X						0.	0.	0.
BRENDA TINNEN MEMBER	1.00	X						0.	0.	0.
MICHAEL CHESSER CHAIR	1.00	X		X				0.	0.	0.
STEVE CORBEIL MEMBER	1.00	X						0.	0.	0.
TARA K. JOHNSON MEMBER	1.00	X						0.	0.	0.
DAN MCCARTHY MEMBER	1.00	X						0.	0.	0.
JOERG OHLE VICE CHAIR	1.00	X		X				0.	0.	0.
BOB PAGE MEMBER	1.00	X						0.	0.	0.
GAYDEN CARRUTH VICE CHAIR	1.00	X		X				0.	0.	0.
JACKIE SNYDER MEMBER	1.00	X						0.	0.	0.
LYNN CRAGHEAD MEMBER	1.00	X		X				0.	0.	0.
DANIEL EUSTON MEMBER	1.00	X		X				0.	0.	0.
W. RUSSELL WELSH MEMBER	1.00	X						0.	0.	0.
GREG M. GRAVES P.E. FIRST VICE CHAIR	1.00	X		X				0.	0.	0.
ANDY ATTERBURY VICE CHAIR	1.00	X		X				0.	0.	0.
ROBERT J. BERKEBILE MEMBER	1.00	X						0.	0.	0.
PETER C. BROWN MEMBER	1.00	X						0.	0.	0.
JANE CHU MEMBER	1.00	X						0.	0.	0.
DAVID W. FRANTZE VICE CHAIR	1.00	X		X				0.	0.	0.
TOM GERKE MEMBER	1.00	X						0.	0.	0.

Continuation Sheet for Form 990

2009

Open to Public
InspectionDepartment 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.

Name of the Organization

CHAMBER OF COMMERCE OF GREATER KANSAS CITY

Employer identification number

44-0196840

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
JAMES A. HEETER PRESIDENT	40.00	X						0.	0.	0.
L. PATRICK JAMES MD MEMBER	1.00	X						0.	0.	0.
RICK L. KAHLE MEMBER	1.00	X						0.	0.	0.
DENISE L. KRUSE MEMBER	1.00	X						0.	0.	0.
PATRICK J. MCCOWN MEMBER	1.00	X						0.	0.	0.
ERIC M. MORGENSTERN MEMBER	1.00	X						0.	0.	0.
HENRY SANDATE MEMBER	1.00	X						0.	0.	0.
MARILYN TOWNSEND MEMBER	1.00	X						0.	0.	0.
CAROLYN WATLEY MEMBER	1.00	X						0.	0.	0.
MARK ZIEMAN MEMBER	1.00	X						0.	0.	0.
LEO MORTAN MEMBER	1.00	X						0.	0.	0.
CLYDE MCQUEEN VICE CHAIR	1.00	X						0.	0.	0.
ORA REYNOLDS MEMBER	1.00	X						0.	0.	0.
BRENT STEWART VICE CHAIR	1.00	X						0.	0.	0.
OSCAR TSHIBANDA MEMBER	1.00	X						0.	0.	0.
JULIE WILSON VICE CHAIR	1.00	X						0.	0.	0.
RICHARD L. GIBSON VP & CHIEF ADMIN OFF	40.00			X		X		134,062.	0.	9,299.
PAMELA WHITING VP COMMUNICATIONS	40.00			X		X		111,519.	0.	16,203.
KRISTINA SMITH WYATT SENIOR VP GOVT REL	40.00			X	X	X		177,856.	0.	14,350.
CHRISTOPHER R LESTER SENIOR VP, BUSINESS GROWTH	40.00			X		X		100,500.	0.	25,012.
LUANN L FEEHAN VP, MEMBER DEVELOPMENT	40.00			X		X		110,623.	0.	6,303.

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

Schedule J-2 (Form 990) 2009

SCHEDULE L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

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

OMB No 1545-0047

2009

**Open To Public
Inspection**

Name of the organization

CHAMBER OF COMMERCE OF GREATER KANSAS CITY

Employer identification number

44-0196840

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

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

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

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year
under section 4958 ▶ \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$

Part II Loans to and/or From Interested Persons.

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

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

Part III Grants or Assistance Benefitting Interested Persons.

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

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

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
TOM BOWSER, BLUE CROSS BLUE SHIELD	BOARD MEMBER	284,031.	CHAMBER'S HEALTH INS. PROVIDER		X
TOM BOWSER, BLUE CROSS BLUE SHIELD	BOARD MEMBER	630,000.	CHAMBER EDORSES HLT INS PRGRM		X
CAROLYN WATLEY, CBIZ BENEFITS	BOARD MEMBER	159,587.	PROVIDES ACCT SERV. TO CHMBR		X

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

Schedule L (Form 990 or 990-EZ) 2009

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service
Name of the organization

Supplemental Information to Form 990

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

OMB No 1545-0047

2009

**Open to Public
Inspection**

CHAMBER OF COMMERCE OF GREATER KANSAS CITY

Employer identification number

44-0196840

ATTACHMENT 1

OFFICER COMPENSATION

PART VI, SECTION A & B, LINE 15

THE PRESIDENT/CEO HAS A SALARY AND COMPENSATION PACKAGE SET BY THE BOARD'S GOALS & COMPENSATION COMMITTEE, IN ACCORDANCE WITH THE BOARD'S BYLAWS. THE COMMITTEE USES AN INDEPENDENT CONTRACTOR TO CONDUCT AN EXTENSIVE REVIEW OF CURRENT CHAMBERS OF COMMERCE PRESIDENTS/CEOS OF SIMILAR SIZE CHAMBERS WITH SIMILAR MISSION FOCUS ACROSS THE UNITED STATES. IN ADDITION, THE CONTRACTOR DETERMINES WHAT SALARIES AND COMPENSATION PACKAGES ARE FOR LOCAL AND REGIONAL NOT-FOR-PROFIT ORGANIZATIONS' PRESIDENTS/CEOS WITH SIMILAR SIZE OF STAFFING, BUDGET, AND REGIONAL SCOPE. ONCE THE CONTRACTOR HAS COMPLETED A THOROUGH ANALYSIS AND MADE A RECOMMENDATION, THE GOALS & COMPENSATION COMMITTEE ESTABLISHES THE SALARY AND COMPENSATION PACKAGE FOR THE PRESIDENT/CEO. FOR EACH VICE PRESIDENT, A SIMILAR PROCESS IS CONDUCTED BY THE CHAMBER, AND THE PRESIDENT/CEO DETERMINES EACH VP'S SALARY BASED ON INDEPENDENT CONTRACTOR ANALYSIS AND RECOMMENDATION. THE BENEFITS FOR VPS ARE THE SAME AS FOR ALL STAFF MEMBERS. THE GOALS & COMPENSATION COMMITTEE DETERMINES IF ANY YEARLY INCENTIVE PAYMENT WILL BE PAID TO ALL STAFF MEMBERS, WHICH INCLUDE EXECUTIVE OFFICERS, BASED ON THE CHAMBER MEETING CORPORATE GOALS ESTABLISHED BY THE GOALS & COMPENSATION COMMITTEE AT THE BEGINNING OF THE FISCAL YEAR AND THE YEAR-END FINANCIAL STATEMENTS. THE PRESIDENT/CEO ANNUALLY AT YEAR-END REVIEWS EXECUTIVE OFFICERS' COMPENSATION WITH THE GOALS & COMPENSATION COMMITTEE AND THE COMMITTEE DETERMINES WHAT IF ANY INCREASE WILL BE SET FOR THE COMING YEAR.

Name of the organization	Employer identification number
CHAMBER OF COMMERCE OF GREATER KANSAS CITY	44-0196840
<u>ATTACHMENT 1 (CONT'D)</u>	

PUBLIC DISCLOSURE

PART VI, SECTION C, LINE 19

THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST. THE FORM 990 WITH 990T IS ALSO AVAILABLE UPON REQUEST AND CAN BE FOUND ON WWW.GUIDESTAR.ORG AFTER FILING WITH THE IRS IS COMPLETED.

FORM 990 REVIEW

PART VI, SECTION A LINE 10

ANNUALLY, THE BOARD'S FINANCE & AUDIT COMMITTEE DIRECTS AN AUDIT BE CONDUCTED. THE AUDIT FIRM THEN PRESENTS THE AUDIT REPORT AND FINDINGS TO THE FINANCE & AUDIT COMMITTEE. THE COMMITTEE REVIEWS THE AUDIT REPORT AND RECOMMENDS FORWARDING THE AUDIT REPORT TO THE BOARD'S EXECUTIVE COMMITTEE FOR REVIEW AND APPROVAL. THE BOARD CHAIR SENDS COPIES OF THE ANNUAL AUDIT REPORT TO EACH EXECUTIVE COMMITTEE DIRECTOR AND ENCOURAGES EACH TO REVIEW THE AUDIT REPORT PRIOR TO ITS NEXT MONTHLY MEETING. THE BOARD TREASURER, WHO IS THE CHAIR OF THE FINANCE & AUDIT COMMITTEE, MAKES THE PRESENTATION TO THE NEXT MONTHLY EXECUTIVE COMMITTEE MEETING. THE EXECUTIVE COMMITTEE, AFTER REVIEW, THEN APPROVES THE AUDIT REPORT AND RECOMMENDS THE DOCUMENTS BE FORWARDED TO THE BOARD FOR REVIEW AND FINAL APPROVAL.

THE INDEPENDENT AUDIT FIRM UPON COMPLETION OF THE AUDIT ALSO PREPARES THE FORM 990 WITH 990T. THE FORM 990 AND 990T ARE ALSO REVIEWED BY THE FINANCE & AUDIT COMMITTEE AS WELL AS THE OFFICERS. THE FORMS 990 AND 990T ARE ALSO MADE AVAILABLE FOR REVIEW BY ANY BOARD MEMBER.

Name of the organization

CHAMBER OF COMMERCE OF GREATER KANSAS CITY

Employer identification number

44-0196840

ATTACHMENT 1 (CONT'D)

CONFLICT OF INTEREST

PART VI, SECTION B, LINE 12C

CONFLICT OF INTEREST STATEMENTS ARE COMPLETED AND SIGNED BY ALL BOARD DIRECTORS AND KEY EMPLOYEES ANNUALLY AND IMMEDIATELY BY ANY REPLACEMENT DIRECTORS AND KEY EMPLOYEES UPON TAKING THE NEW POSITION THROUGHOUT THE YEAR. THE CONFLICT OF INTEREST STATEMENT ALSO HAS A CODE OF ETHICS SECTION BY WHICH EACH DIRECTOR AND KEY EMPLOYEE IS EXPECTED TO CONDUCT THEMSELVES AND MUST BE SIGNED. IN THE CONFLICT OF INTEREST POLICY ARE SECTIONS THAT ADDRESS: FIDUCIARY RESPONSIBILITIES/DISCLOSURE; DEFINITION OF CONFLICT OF INTEREST; AND RESTRAINT ON VOTING. THE BOARD CHAIR REMINDS DIRECTORS OF THE NEED TO DECLARE ANY CONFLICTS OF INTEREST THROUGHOUT THE YEAR. THOSE DIRECTORS WITH A CONFLICT OF INTEREST ANNOUNCE BEFORE A VOTE IS TAKEN THAT THEY ARE ABSTAINING FROM THE VOTE AND STATE THE REASON FOR THE CONFLICT. THE BOARD, AS WELL AS THE EXECUTIVE COMMITTEE, MINUTES WILL THEN REFLECT WHICH DIRECTORS ABSTAINED DUE TO A CONFLICT OF INTEREST.

ATTACHMENT 24A PROGRAM SERVICE

THE CHAMBER ACCOMPLISHES ITS MISSION THROUGH THREE TENETS OF ASSISTING ITS MEMBER BUSINESSES IN BECOMING "SMARTER, MORE VISIBLE, AND BETTER CONNECTED." TO THIS END, MEMBER PROGRAMS AND EVENTS ARE DESIGNED TO ADDRESS ONE OR MORE OF THESE ORGANIZATIONAL PRINCIPLES. THE GOAL OF THESE EFFORTS IS TO GROW OUR MEMBER BUSINESSES AND, IN SO DOING, PROVIDE JOBS FOR LOCAL CITIZENS AND IMPROVE THE GREATER KANSAS CITY REGION OVERALL.

Name of the organization

CHAMBER OF COMMERCE OF GREATER KANSAS CITY

Employer identification number

44-0196840

FORM 990, PART III - PROGRAM SERVICESATTACHMENT 2 (CONT'D)

THE CHAMBER'S GOVERNMENT RELATIONS DEPARTMENT PROVIDES OPPORTUNITIES FOR MEMBERS BUSINESSES TO BE "BETTER CONNECTED" AND "MORE VISIBLE" WITH REGIONAL ELECTED OFFICIALS AT ALL LEVELS OF GOVERNMENT. THIS IS ACCOMPLISHED THROUGH VARIOUS COMMITTEES THAT DEVELOP AGENDAS DESIGNED TO CONVEY TO ELECTED OFFICIALS THE LEGISLATIVE NEEDS OF REGIONAL BUSINESSES. IN ADDITION, EVENTS ARE PLANNED TO ALLOW MEMBERS TO INTERACT DIRECTLY WITH ELECTED OFFICIALS. EXAMPLES INCLUDE THE CHAMBER'S ANNUAL GOVERNORS' SUMMIT, THE WASHINGTON, DC FLY-IN, SPOTLIGHT KC, AND THE LEADERSHIP EXCHANGE. IN ADDITION, ELECTED OFFICIALS REGULARLY CONNECT WITH CHAMBER MEMBERS THROUGH MEETINGS OF THE CHAMBER'S MISSOURI AND KANSAS STATE AFFAIRS, FEDERAL AFFAIRS, KANSAS CITY MISSOURI, AND JOHNSON COUNTY COMMITTEES AND LEADERSHIP COUNCILS. GOVERNMENT RELATIONS ALSO MANAGES THE CENTURIONS LEADERSHIP PROGRAM IN WHICH MEMBER BUSINESSES NOMINATE MID-LEVEL MANAGERS ANNUALLY FOR A 2-YEAR PROGRAM OF RESEARCH AND COMMUNITY PROJECTS. THE PROGRAM IS DESIGNED TO ENHANCE EACH CENTURION PARTICIPANT BY EXPANDING HIS OR HER UNDERSTANDING OF COMMUNITY ISSUES, AND OF GOVERNMENT ENTITIES AND LOCAL BUSINESS RELATIONSHIPS.

ATTACHMENT 34B PROGRAM SERVICE

THE BUSINESS GROWTH AND MEMBERSHIP DEPARTMENTS PROVIDE PROGRAMS AND EVENTS FOR MEMBERS TO BECOME "MORE VISIBLE" AND "BETTER

Name of the organization	Employer identification number
CHAMBER OF COMMERCE OF GREATER KANSAS CITY	44-0196840

FORM 990, PART III - PROGRAM SERVICESATTACHMENT 3 (CONT'D)

CONNECTED" THROUGH THE ANNUAL FIVE-MONTH SMALL BUSINESS CELEBRATION, WHICH RECOGNIZES THE IMPACT OF SMALL BUSINESSES ON THE ECONOMIC FABRIC AND WORK FORCE DEVELOPMENT THROUGHOUT THE REGION. WITH PROGRAMS, SUCH AS THE CHAMBER'S ECONOMIC FORECAST, BUSINESS BRAIN FOOD, MANUFACTURING SUMMIT, AND INNOVATION CONFERENCE, MEMBERS "GET SMARTER" THROUGH THESE SERIES OF SEMINARS AND CLASSES ON BEST PRACTICES AND CURRENT ECONOMIC AND BUSINESS CONDITIONS REGIONALLY, WHILE EXPLORING BUSINESS OPPORTUNITIES INTERNATIONALLY. TO ENSURE MEMBER BUSINESSES AND THEIR EMPLOYEES HAVE CHANCES TO BE "BETTER CONNECTED," SHARING IDEAS AND GENERATING NEW BUSINESS, THE CHAMBER'S, BUSINESS GROWTH DEPARTMENT OFFERS PROGRAMS LIKE FACE2FACE, GENKC, BUSINESS LIVE KC EXPO, SUPERINTENDENTS' FORUM, MORNING SCHMOOZE, AND CHAMBER CHAMPIONS.

ATTACHMENT 44C PROGRAM SERVICE

THE COMMUNICATIONS AND MEDIA RELATIONS DEPARTMENT PROVIDES THE MEMBERSHIP, EACH YEAR AT THE ANNUAL CHAMBER DINNER MEETING, THE OPPORTUNITY TO BE "MORE VISIBLE, BETTER CONNECTED, AND SMARTER," BY ATTENDING THIS PREMIER BUSINESS DINNER WITH BUSINESS LEADERS AND ELECTED OFFICIALS. MEMBERS ARE UPDATED ON THE CHAMBER'S ACCOMPLISHMENTS OF THE PREVIOUS YEAR AND THE ORGANIZATION'S PLANS FOR THE UPCOMING YEAR. THE PAST AND INCOMING CHAIRS SHARE THEIR REMARKS AND PASS CONTROL OF THE CHAMBER FROM ONE TO THE OTHER.

Name of the organization CHAMBER OF COMMERCE OF GREATER KANSAS CITY	Employer identification number 44-0196840
--	--

FORM 990, PART III - PROGRAM SERVICESATTACHMENT 4 (CONT'D)

COMMUNICATIONS, ALSO HOSTS ONE OF THE NATION'S LARGEST NETWORKING OPPORTUNITIES THROUGH ITS BUSINESS AFTER HOURS PROGRAMS WITH ATTENDANCE AVERAGING OVER 350 PEOPLE PER EVENT.

IN ADDITION, COMMUNICATIONS HELPS MEMBERS "GET SMARTER, MORE VISIBLE, AND BETTER CONNECTED" THROUGH VARIOUS MEMBER PUBLICATIONS, MARKETING MATERIALS, AND MEMBER UPDATES.

ATTACHMENT 5990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
CBIZ MHM, LLC 11440 TOMAHAWK CREEK PARKWAY LEAWOOD, KS 66211	ACCOUNTING SERVICES	152,845.
TOTAL COMPENSATION		<u>152,845.</u>

ATTACHMENT 6FORM 990, PART VIII - INVESTMENT INCOME

<u>DESCRIPTION</u>	<u>(A) TOTAL REVENUE</u>	<u>(B) RELATED OR EXEMPT REVENUE</u>	<u>(C) UNRELATED BUSINESS REV.</u>	<u>(D) EXCLUDED REVENUE</u>
INVESTMENT IN CHAMBER MANAGEMENT SERVICE	-92,032		-92,032	
INVESTMENT INCOME	108,324			108,324
TOTALS	<u>16,292</u>		<u>-92,032</u>	<u>108,324</u>

ATTACHMENT 7

Name of the organization

Employer identification number

CHAMBER OF COMMERCE OF GREATER KANSAS CITY

44-0196840

ATTACHMENT 7 (CONT'D)FORM 990, PART X - PREPAID EXPENSES AND DEFERRED CHARGES

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>
PREPAID INSURANCE	13,358.
PREPAID POSTAGE	1,156.
PREPAID TAXES	0.
PREPAID ANNUAL DINNER	24,057.
PREPAID PROGRAMS & EVENTS	90,233.
PREPAID RENT	114,840.
PREPAID OTHER	2,087.
TOTALS	<u>245,731.</u>

ATTACHMENT 8FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>
INVESTMENTS - SECURITIES	1,515,256.
RESTRICTED FUNDS - INVESTMENTS	307,178.
INVESTMENTS - CD'S	100,000.
TOTALS	<u>1,922,434.</u>

ATTACHMENT 9

Name of the organization

CHAMBER OF COMMERCE OF GREATER KANSAS CITY

Employer identification number

44-0196840

ATTACHMENT 9 (CONT'D)FORM 990, PART X - DEFERRED REVENUE

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>
DEFERRED MEMBERSHIP FEES	262,578.
DEFERRED ANNUAL DINNER REVENUE	282,063.
DEFERRED PROGRAM & EVENT REV.	247,042.
TOTALS	<u>791,683.</u>

Name of the organization

CHAMBER OF COMMERCE OF GREATER KANSAS CITY

Employer identification number

44-0196840

ATTACHMENT 9 (CONT'D)FORM 990, PART X - DEFERRED REVENUE

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>
DEFERRED MEMBERSHIP FEES	262,578.
DEFERRED ANNUAL DINNER REVENUE	282,063.
DEFERRED PROGRAM & EVENT REV.	247,042.
TOTALS	<u>791,683.</u>

Part I

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

[illegible]

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

[illegible]

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

Schedule R (Form 990) 2009

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

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

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

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

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

	(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved
(1)	KC CHAMBER OF COMMERCE	M	10,950.
(2)	KC CHAMBER OF COMMERCE	N	63,330.
(3)	KC CHAMBER OF COMMERCE	R	137,189.
(4)			
(5)			
(6)			

Schedule R (Form 990) 2009

Application for Extension of Time To
Exempt Organization Return

OMB No 1545-1709

▶ File a separate application for each return.

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box ☒ X
- If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits

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

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

Part I only ☐

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

Type or print File by the due date for filing your return. See instructions	Name of exempt organization	Employer identification number
	CHAMBER OF COMMERCE OF GREATER KANSAS CITY	44-0196840
	Number, street, and room or suite no. If a P.O. box, see instructions	
	30 W. PERSHING ROAD, SUITE 301	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	KANSAS CITY, MO 64108	

Enter the Return code for the return that this application is for (file a separate application for each return)

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ▶ CHRIS LESTER

Telephone No. ▶ 816 221-2424

FAX No. ▶

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

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 06/15, 20 11, to file the exempt organization return for the organization named above. The extension is for the organization's return for
- ▶ ☐ calendar year 20 or
- ▶ ☒ tax year beginning 11/01, 20 09, and ending 10/31, 20 10.

- 2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
- ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a \$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b \$
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c \$ NONE

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

For Paperwork Reduction Act Notice, see Instructions.

Howe Park & Dobratz, P.C.
Certified Public Accountants
605 West 47th Street, Suite 301
Kansas City, MO 64112 FED ID #43-1562209

Form 8868 (Rev. 1-2011)