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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

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

Open to Public Inspection

Form 990 (2010)

A	For the	2010 calendar year, or tax year beginning OCT 1, 2010 and ending	ling S	EP 30, 2011					
В	Check if	C Name of organization		D Employer identific	ation number				
ā	Check if applicable	•		• •					
Г	Addres	S OSHKOSH CHAMBER OF COMMERCE							
一	Name			93-0765817					
<u> </u>	change ∵∏initial		m/suite	_					
늗	return □Termin	1	iii/Suite	E Telephone number 920-303-2266					
H	⊸ated □Amend	120 OHORDON OHADA			1,159,321.				
늗	⊒retum ∏Applica	City or town, state or country, and ZIP + 4 OSHKOSH, WI 54901	ŀ	G Gross receipts \$					
<u> </u>	Itiòn pendin	OBINODITY WI 34301		H(a) Is this a group re					
		F Name and address of principal officer: JOHN CASPER 120 JACKSON STREET, OSHKOSH, WI 54901		for affiliates?	Yes X No				
_				H(b) Are all affiliates incl					
		mpt status:	527		ist. (see instructions)				
		e: ► WWW.OSHKOSHCHAMBER.COM	<u>_</u>	H(c) Group exemption					
			L Year o	f formation: 1907 M	State of legal domicile WI				
Pa	art I	Summary	22700	WILL GENERAL	· · · · · · · · · · · · · · · · · · ·				
e	1	Briefly describe the organization's mission or most significant activities: TO ADVA	ANCE						
Activities & Governance		AND PROSPERITY OF THE OSHKOSH AREA SO THAT		CITIZENS A					
E		Check this box 🕨 📖 if the organization discontinued its operations or disposed o	of more						
Š	3 1	Number of voting members of the governing body (Part VI, line 1a)		3	34				
<u>ಷ</u>	4 1	Number of independent voting members of the governing body (Part VI, line 1b)		4	34				
es	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)		5	13				
, <u>'</u>	6	Total number of volunteers (estimate if necessary)		6	2000				
Ç	7 a	Fotal unrelated business revenue from Part VIII, column (C), line 12		7a	580,766.				
·	b l	Net unrelated business taxable income from Form 990-T, line 34		7b	0.				
R				Prior Year	Current Year				
1 0	8 (Contributions and grants (Part VIII, line 1h)		0.	0.				
Revenue	9 1	Program service revenue (Part VIII, line 2g)		1,068,691.	1,022,325.				
} }	10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		4,726.	3,292.				
	. مدا	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		122,831.	133,704.				
<u>n</u>	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,196,248.	1,159,321.				
Expenses Expenses	13 (Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.				
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.				
∑°	15 3	Salaries, other compensation, employee benefits (Partix column (A) Thes 5-10)		422,935.	411,045.				
ಌೣ	16a I	Professional fundraising fees (Part IX, column (A), the tra		0.	0.				
ē	ь.	Fotal fundraising expenses (Part IX, column (the line 25)							
Ä		Other expenses (Part IX column (A) lines 1 last id 15500 2 7 7012 10)	_	773,616.	721,908.				
	18	Fotal expenses. Add lines 13-17 (must equal Ran IX, column (A), line 25)		1,196,551.	1,132,953.				
	119 1	Revenue less expenses Subtract line 18 from line 78 CDEM		-303.	26,368.				
96 80	,	isvariae isas experises esastrati in e to itali in a dalle in .	Bed	ginning of Current Year	End of Year				
Net Assets or Fund Balances	20	Fotal assets (Part X, line 16)	1 20,	930,989.	949,351.				
Ass	21	Fotal liabilities (Part X, line 26)		319,135.	311,129.				
E E	22	Net assets or fund balances. Subtract line 21 from line 20		611,854.	638,222.				
	art II	Signature Block		011/0310	0307222.				
		ties of perjury, I declare that I have examined this return, including accompanying schedules and	d stateme	ents, and to the hest of my	/ knowledge and helief it is				
	•	, and complete. Declaration of preparer (other than officer) is based on all information of which p			knowledge and belief, it is				
tiue	, сольс	, and complete Decidation of preparer (other than officer) is based on an information of which p	preparer	x 2 ≈ 5	کی کے ۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔				
Sig	_	Algorature of officer		Date					
		JOHN CASPER, EXECUTIVE DIRECTOR							
nei	Here JOHN CASPER, EXECUTIVE DIRECTOR Type or print name and title								
				Date Check	PTIN				
Paid	,	Print/Type preparer's name JAMES R STAHL Preparer's signature James R Stall, (2/7/12 setf-employe					
	ŀ		4/1		<u> </u>				
	narer	Firm's name SCHENCK SC /		Firm's EIN ▶					
nze	Only	Firm's address 520 N. KOELLER ST, PO BOX 2543		100	0201225 0500				
		OSHKOSH, WI 54903-2543		Phone no (920)235-0590				
May	y the IP	S discuss this return with the preparer shown above? (see instructions)			X Yes No				

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

	990 (2010) OSHKOSH CHAMBER OF COMMERCE 93-0765817 Page 2
Pa	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
	TO PROVIDE LEADERSHIP AND TO SERVE AND REPRESENT OUR MEMBERS SO THEIR
	BUSINESSES AND OUR COMMUNITY WILL PROSPER.
2	Did the organization undertake any significant program services during the year which were not listed on
2	
_	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? X Yes No
3	
	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 \$745, 263 • including grants of \$) (Revenue \$)
	COMMUNITY PROGRAMS & EVENTS - PROVIDING TO THE CITY OF OSHKOSH AN
	ENVIRONMENT WHERE BUSINESS AND COMMUNITY GOALS CAN BE ACHIEVED.
4b	(Code) (Expenses \$12,454 • including grants of \$) (Revenue \$)
	SMALL BUSINESS SEMINARS - TO ASSIST LOCAL BUSINESS WITH CURRENT
	BUSINESS ISSUES
4c	(Code:) (Expenses \$ 29,511 • including grants of \$) (Revenue \$)
	NEWSLETTER - TO PROVIDE INFORMATION REGARDING CURRENT EVENTS AND LOCAL
	BUSINESSES TO MEMBERS
44	Other program services. (Describe in Schedule O.)
74	
4-	707.000
4e	
03200	Form 990 (2010)

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		X
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates f	for 3		х
public office? If "Yes," complete Schedule C, Part I	-		
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in	4		
during the tax year? If "Yes," complete Schedule C, Part II 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments	<u> </u>		
Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
			 -
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		х
	,		
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	7	}	Х
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			<u> </u>
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			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		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or	or X		
as applicable.			
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule	<i>Đ</i> ,	İ	
Part VI	11a	X	$oxed{oxed}$
b 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	11b		X
c 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	11c		X
d 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			1
Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	L	X
e Did the organization report an amount for other liabilities in Part X, line 25° If "Yes," complete Schedule D, Part X	11e	X	ļ
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		٠,	
the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	-
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40	1	x
Schedule D, Parts XI, XII, and XIII	12a	1	<u> </u>
b Was the organization included in consolidated, independent audited financial statements for the tax year?	126	x	
If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		Х
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	14a	Ì	X
 Did the organization maintain an office, employees, or agents outside of the United States? 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, Parts I and IV	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		1	
or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individu			
located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		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	17		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lin	nes		
1c and 8a? If "Yes," complete Schedule G, Part II	18		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	19	<u> </u>	Х
20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a	 	X
b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 file	ers that		
operate one or more hospitals must attach audited financial statements (see instructions)	20b	000	

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		L
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		
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		<u> </u>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			١
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	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):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	<u> </u>	X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			v
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29_	 	├ ^
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			x
	contributions? If "Yes," complete Schedule M	30	-	Α_
31	Did the organization liquidate, terminate, or dissolve and cease operations?			x
	If "Yes," complete Schedule N, Part I	31		ΙΛ.
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	20	i	x
	Schedule N, Part II	32_	 	A
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	33	l	X
0.4	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	 	1
34	Was the organization related to any tax-exempt or taxable entity?	34	X	
25	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	35	X	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of	33	 **	
а	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
36	Section 512(b)(13) * If * res, complete Scriedule A, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
36	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	- 30	†	<u> </u>
57	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?	<u> </u>	†	† -
50	Note. All Form 990 filers are required to complete Schedule O	38	X	
			•	

Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V

	Check if Schedule O contains a response to any question in this Part V				
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 5			
þ	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and re	eportable 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 13		1	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retuined to the control of the control	ns? .	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instruction	s)		•	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a	Х	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b	Х	
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		Х
b	If "Yes," enter the name of the foreign country:				
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Accounts.		i f	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	ction?	5b		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ne organization solicit			
	any contributions that were not tax deductible?		6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions or gifts		.]	
	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).		_		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	vices provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required	_	. 1	
	to file Form 8282?		7c		
	If "Yes," indicate the number of Forms 8282 filed during the year	7d	,	l f	
e 4	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		7e 7f		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contribution of qualified intellectual property, did the organization file.				
9	If the organization received a contribution of qualified intellectual property, did the organization file Followship of the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, airplanes, air	·	7g 7h		
h 8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.		/ 11		
•	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at		8		
9	Sponsoring organizations maintaining donor advised funds.	any time during the year.	-		
а	Did the organization make any taxable distributions under section 4966?		9a		
ь	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:		1		
	Initiation fees and capital contributions included on Part VIII, line 12	10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter				
а	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
	amounts due or received from them)	11b			
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	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note. See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the				
	organization is licensed to issue qualified health plans	13b			l
С	Enter the amount of reserves on hand	13c	ļ		<u> </u>
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a	igsqcut	Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	e O	14b		L
			Form	990 ((2010)

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. Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 34 b Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision X 3 of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Does the organization have members or stockholders? 6 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the 7a governing body? X b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a a The governing body? Х 8b **b** Each committee with authority to act on behalf of the governing body? 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes Х 10a 10a Does the organization have local chapters, branches, or affiliates? **b** If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, Х 10b and branches to ensure their operations are consistent with those of the organization? X 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise 12b to conflicts? c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 12c in Schedule O how this is done Х 13 Does the organization have a written whistleblower policy? 13 Х 14 14 Does the organization have a written document retention and destruction policy? 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? 15a a The organization's CEO, Executive Director, or top management official Х 15b b Other officers or key employees of the organization 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 Х taxable entity during the year? 16a 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 16b exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶WI 17 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. X Upon request Another's website ☐ Own website
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 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial 19 statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the organization. JOHN CASPER - 920-303-2266 120 JACKSON STREET, OSHKOSH WI 54901 Form 990 (2010)

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

Check if Schedule O contains a response to any question in this Part VII

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.
- 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, if any. 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.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and Title	(B) Average hours per	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (describe hours for related organizations in Schedule O)	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 CASPER	40.00	v		v				125,963.	0.	16 621
EXEC DIRECTOR, SECRETARY	40.00	Х	├	X	-	-		123,903.	· · · · · · · · · · · · · · · · · · ·	16,631.
JACK CARSTENS	1.00	Х				1		0.	0.	0.
DIRECTOR	1.00	^	-					0.	0.	•
BILL EVANS	1.00	X		l				0.	0.	0.
DIRECTOR RON JOHNSON	1.00	┢	\vdash	\vdash		├	-	0.	0.	<u> </u>
DIRECTOR	1.00	X						0.	0.	0.
VICKY UPDIKE	1.00	1	-				╁	· · · · · ·		
VICE CHAIRMAN	1.00	X		Х		l		0.	0.	0.
ROD OILSCHLAGER	1.00	1		11			\vdash			•
DIRECTOR	1.00	X				ľ		0.	0.	0.
STEVE SCHMUDLACH	+	 	\vdash			├─	\vdash			
DIRECTOR	1.00	X	ļ				l	0.	0.	0.
RICHARD WELLS	 		\vdash							<u></u> :
DIRECTOR	1.00	X						0.	0.	0.
BRIAN WIERZBINSKI										
TREASURER	1.00	X		Х				0.	0.	0.
JIM ZWICKEY										_
DIRECTOR	1.00	X						0.	0.	0.
JOHN ANDERSON										
CHAIRMAN ELECT	1.00	X		X	ļ			0.	0.	0.
BOB BEACH										
DIRECTOR	1.00	X						0.	0.	0.
SEAN FITZGERALD		l			ļ				i	
DIRECTOR	1.00	X						0.	0.	0.
RANDY KNUDTSON										
DIRECTOR	1.00	X					<u> </u>	0.	0.	0.
JOE LE ROY										
DIRECTOR	1.00	X	↓_	<u> </u>	<u> </u>		_	0.	0.	0.
MICHELLE LITJENS	1		İ					_	1	_
DIRECTOR	1.00	X	ot	<u> </u>	<u> </u>	L	4_	0.	0.	0.
JIM MACY				l					_	
CHAIRMAN	1.00	X	L.	X		<u></u>	1	0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											
(A)	(B)			•	C)			(D)	(E)		(F)
Name and title	Average				ition			Reportable	Reportable		tımated
	hours per	(c	neck	(all 1	that	app	ly)	compensation	compensation		nount of
	week (describe	횮						from the	from related organizations	i .	other pensation
	hours for	å	_			뎙		organization	(W-2/1099-MISC)		om the
	related	l se	Liste			SS SS		(W-2/1099-MISC)	(1	anızation
	organizations	로	lag 1	1	log Ba	8 8		,		and	d related
	in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Кеу етріоуее	Highest compensated employee	Former			orga	ınızations
DEBRA WIRTZ						-					
DIRECTOR	1.00	X			<u> </u>	<u> </u>	_	0.	0.	ļ	0.
KEN ARNESON		l									•
DIRECTOR	1.00	X	<u> </u>		-	₩	ļ	0.	0.	<u> </u>	0.
KENT BELVILLE	1 00					i		0.	0.		0.
DIRECTOR	1.00	X	-			ļ	ł.—	0.	0.	-	<u> </u>
BILL CALHOUN	1.00	Х						0.	0.		0.
DIRECTOR JOHN FEENEY	1.00	A	-		 	-	┢				
DIRECTOR	1.00	X					1	0.	0.		0.
BOB HEISLER		1		_			 				
DIRECTOR	1.00	Х	ļ					0.	0.		0.
RICK HOPPE											
DIRECTOR	1.00	Х	<u> </u>		_	_	<u> </u>	0.	0.		0.
KRIS LARSON	1 00							0.	О.		0
DIRECTOR	1.00	X	├	├-	╁	1		<u> </u>	0.	 	0.
CAROL SULLIVAN DIRECTOR	1.00	Х		1	1	l		0.	0.		0.
1b Sub-total		1	1	J	<u> </u>	<u> </u>		125,963.	0.		6,631.
c Total from continuation sheets to Part V	I, Section A					>		0.	0.	. 1	0.
d Total (add lines 1b and 1c)						▶		125,963.	0.	1	6,631.
2 Total number of individuals (including but n	ot limited to th	nose	liste	ed a	bov	e) w	ho r	eceived more than \$100	0,000 ın reportable		
compensation from the organization									· · ·		Yes No
3 Did the organization list any former officer,	director or tru	etoc	. ko	VAD	nnlo		or l	highest compensated ei	molovee on		103 110
line 1a? If "Yes," complete Schedule J for s			, NO	y Ci	пріс	ycc,	011	nightest compensated of	iipioyoo oii	3	X
4 For any individual listed on line 1a, is the si			omp	ens	atio	n an	d ot	her compensation from	the organization		
and related organizations greater than \$15										4	X
5 Did any person listed on line 1a receive or	accrue compe	nsat	lon	from	n an	y un	relat	ted organization or indiv	idual for services		l
rendered to the organization? If "Yes," com	plete Schedu	le J	for s	uch	per	son				5	X
Section B. Independent Contractors 1 Complete this table for your five highest co						rant	0.	that received more than	\$100,000 of compan	cation f	rom
1 Complete this table for your five highest co the organization. NONE	impensated in	uep	CHU	5111.0	JOIN	iact	013	that received more than	wroo,ooo or compen	Janon	10111
(A)	- 							(B)			C)
Name and business	address							Description of	services	Compe	nsation
· · · · · · · · · · · · · · · · · · ·											
			_								
											·
2 Total number of independent contractors (including but	not I	ımıte	ed to		_	ıste	d above) who received r	more than		
\$100,000 in compensation from the organi		mŦ	<u> </u>	70.00		0 N	CII	TERMC			000 :55 : 5
SEE PART VII, SECTIO	N A CON	ΤŢ	MO.	ΑT,	ΤO	IN	ъH	CLID		⊦orm	990 (2010)

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								93-076	5817	
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees							es (continued)			
(A) Name and title	(B) Average hours		(C) Position (check all that apply)					(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week			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
STEWART RIECKMAN	1 00	,,							0.	
DIRECTOR	1.00	X	_		ļ	-	<u> </u>	0.	0.	0.
JIM JANES	1 00	v		l.					_	_
PAST CHAIRMAN	1.00	X	_	X		_	<u> </u>	0.	0.	0.
DAVE OMACHINSKI	1 00	, .					ŀ		_	_
DIRECTOR	1.00	X					-	0.	0.	0.
CONNIE DREXLER	1 00							0.	0.	_
DIRECTOR	1.00	X	 	<u> </u>		-	-	<u> </u>	0.	0.
PAUL GREENINGER	1 00	X						0.	0.	0.
DIRECTOR	1.00	_	-	-				0.	0.	0.
JEFF SCHMIDT	1.00	X						0.	0.	0.
DIRECTOR TOM BELTER	1.00	1			-				0.	0
DIRECTOR	1.00	X						0.	0.	0.
BRITTANI VON RUDEN	1.00	Α.			 		╌	<u> </u>		,
DIRECTOR	1.00	X						0.	0.	0.
	J ·	1		-			-			
otal to Part VII, Section A, line 1c									<u> </u>	L

Pa	rt V	131	Statement of Rever	nue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts s	1	а	Federated campaigns .	1a					
Contributions, gifts, grants and other similar amounts		b	Membership dues	1b					
S, g		С	Fundraising events	1c					
gift		d	Related organizations	1d					
S,E		е	Government grants (contribut	ions) 1e					
ir S		f	All other contributions, gifts, gran	ts, and					
혈			similar amounts not included abo	ve 1f					
E E		g	Noncash contributions included in lines	1a-1f \$					
<u>a</u>		h	Total. Add lines 1a-1f						
					Business Code		251 225		
8	2	а	MEMBERSHIP DUES	<u> </u>	511190	413,656.	361,895.	51,761.	
e S		b	WATERFEST		722210	352,584.	206 105	352,584.	
n S		C	PROGRAM SERVICE	REVENU	900099	206,127.	206,127.	40.050	
Se a		d	ADVERTISING		541800	49,958.		49,958.	
Program Service Revenue		е							
۱ ۱		f	All other program service reve	enue		1 022 225			
\dashv		9	Total. Add lines 2a-2f		<u> </u>	1,022,325.			
	3		Investment income (including	aividenas, inter	est, and	3,292.			3,292.
			other similar amounts)			3,292.			3,232.
	4		Income from investment of tax	x-exempt bona p	proceeds				-
	5		Royalties	(ı) Real	(ii) Personal				
	6	•	Gross Rents	(i) Near	(ii) Fersonai				
		b	Less rental expenses						
			Rental income or (loss)						
			Net rental income or (loss)	L	•		Ì		
			Gross amount from sales of	(i) Securities	(II) Other				
	•	_	assets other than inventory	() 0000111100	1.7.0 4.1.0.				
		ь	Less: cost or other basis						
			and sales expenses						
		C	Gain or (loss)						
		d	Net gain or (loss)		. •		1		
Other Revenue	8	а	Gross income from fundraisin including \$	g events (not of					
eve			contributions reported on line	1c). See					
π.			Part IV, line 18	a					
粪		b	Less: direct expenses	b					
0		С	Net income or (loss) from fund	draising events					
	9	а	Gross income from gaming ad	ctivities. See					
			Part IV, line 19	а					
		b	Less: direct expenses	b	·[
		C	Net income or (loss) from gam	ning activities					
	10	а	Gross sales of inventory, less	returns					
			and allowances	a					
l			Less: cost of goods sold	b	· [
ļ		С	Net income or (loss) from sale						
			Miscellaneous Revenu	ie	Business Code			106 460	
	11	а			541900	126,463.		126,463.	
		b	MISCELLANEOUS		900099	7,241.	7,241.		
		C							
		d	All other revenue			122 704			
		е			P	133,704. 1,159,321.		580,766.	3,292.
03200 12-21	12 9		Total revenue See instructions			1,139,361.	3/3,203.	300,700.	Form 990 (2010)
12-21	-10								1 01111 3 3 0 (2010)

Part IX Statement of Functional Expenses

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

	All other organizations must comp				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				······································
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				***************************************
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16		_		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,			06 700	
	trustees, and key employees .	120,999.	24,200.	96,799.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	000 457	100 224	101 222	
7	Other salaries and wages .	209,457.	108,234.	101,223.	
8	Pension plan contributions (include section 401(k)	16 021	0.005	7 026	
	and section 403(b) employer contributions)	16,931.	9,895. 20,256.	7,036.	
9	Other employee benefits	37,792.		9,829.	
10	Payroll taxes	25,866.	16,037.	7,029.	
11	Fees for services (non-employees):				
a	Management	200.		200.	
b	Legal	13,950.		13,950.	
c	Accounting	13,950.		13,750.	
d	Lobbying Professional fundamental agreement See Part IV, line 17				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g 40	Other	4,235.	4,060.	175.	
12 13	Advertising and promotion Office expenses	1,233.	1/0001		
14	Information technology			· · · · · · · · · · · · · · · · · · ·	
15	Royalties				
16	Occupancy	44,823.		44,823.	
17	Travel	6,417.	6,417.		
18	Payments of travel or entertainment expenses	·			
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	6,549.	6,023.	526.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	27,644.		27,644.	
23	Insurance	944.		944.	
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A)				
	amount, list line 24f expenses on Schedule 0)				
а	WATERFEST	334,615.	334,615.		
b	ECONOMIC DEVELOPMENT	105,811.	105,811.		
С	NEWSLETTER	29,511.	29,511.		
d	GOLF OUTING	24,816.	24,816.	-	
е	MISCELLANEOUS PROGRAM E	12,510.	12,510.	05 040	
f	All other expenses	109,883.	84,843.	25,040.	
25_	Total functional expenses Add lines 1 through 24f	1,132,953.	787,228.	345,725.	0.
26	Joint costs Check here ▶ ☐ If following SOP				
	98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a				
	combined educational campaign and fundraising				
	solicitation			<u> </u>	Form 990 (2010)

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		(A) Beginning of year		(B) End of year
		54,832	+ - +	114,490.
1	Cash · non-interest-bearing	548,844		542,333.
2	Savings and temporary cash investments	340,044	1 1	342,333.
3	Pledges and grants receivable, net	·· ·· 65 021	3	4E 020
4	Accounts receivable, net	65,931	4	45,829.
5	Receivables from current and former officers, directors, trustees, key		1 1	
1	employees, and highest compensated employees. Complete Part II		1 1	
-	of Schedule L		5	
6	Receivables from other disqualified persons (as defined under section		1 1	
1	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary		1 1	
	employees' beneficiary organizations (see instructions)		6	
7	Notes and loans receivable, net		7	
8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges	4,045	9	4,184.
10a	Land, buildings, and equipment: cost or other			
ļ	basis. Complete Part VI of Schedule D 10a 779	,806. ,291. 257,337		,
b	Less: accumulated depreciation 10b 537	,291. 257,337	10c	242,515.
11	Investments - publicly traded securities		11	
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)	930,989		949,351
17	Accounts payable and accrued expenses	127,015	- 17	122,482
18	Grants payable		18	
19	Deferred revenue	186,795	- 19	179,272
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
21 22	Payables to current and former officers, directors, trustees, key emplo	/ees,		
	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	5,325		9,375
26	Total liabilities. Add lines 17 through 25	319,135	- 26	311,129
	Organizations that follow SFAS 117, check here X and co	nplete		
ļ	lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets	611,854	• 27	638,222
28	Temporarily restricted net assets		28	-
29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here	and		
-	complete lines 30 through 34.	į.		
30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
27 28 29 30 31 32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	611,854		638,222
34	Total liabilities and net assets/fund balances	930,989		949,351

or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

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

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

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

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, 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.

Continue E01(a)(4) (E) or (C) organizations: Complete Port III

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), or Form 990-EZ, Part V, line 35a (Proxy Tax), then

Section 50 (c)(4), (5), or (6) organizat	ions. Compiete Part III.								
Name of organization	Emplo	Employer identification number							
OSHKOSH	CHAMBER OF COMM	ERCE		93-0765817					
Part I-A Complete if the org	anization is exempt und	er section 501(c)	or is a section 527 or	ganization.					
 Provide a description of the organiz Political expenditures Volunteer hours 									
Part I-B Complete if the org	anization is exempt und	er section 501(c)	(3).						
1 Enter the amount of any excise tax			▶\$						
2 Enter the amount of any excise tax									
3 If the organization incurred a section			•	Yes No					
4a Was a correction made?	, , , , , , , , , , , , , , , , , , , ,	,	•	Yes No					
b If "Yes," describe in Part IV.	•								
Part I-C Complete if the org	anization is exempt und	ler section 501(c)	, except section 501(c)(3).					
Enter the amount directly expended	by the filing organization for se	ction 527 exempt fund	ction activities >\$						
2 Enter the amount of the filing organi	zation's funds contributed to ot	her organizations for s	section 527						
exempt function activities			▶\$						
3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL,									
line 17b			▶\$						
4 Did the filing organization file Form	1120-POL for this year?			Yes No					
5 Enter the names, addresses and en made payments. For each organization contributions received that were pro- political action committee (PAC). If a	tion listed, enter the amount pai omptly and directly delivered to	d from the filing organi a separate political org	ization's funds Also enter th ganization, such as a separa	e amount of political					
(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-					

032041 02-02-11

LHA

Schedule C (Form 990 or 990-EZ) 2010

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

Schedule C (Form 990 or 990-EZ) 2010	ознкозн сн.	AMBER OF CO	MMERCE		765817 Page 2
Part II-A Complete if the organ	nization is exer	npt under section	n 501(c)(3) and file	d Form 5768	
(election under section					
A Check ► ☐ If the filing organizatio	n belongs to an affil	iated group.			
B Check ▶ ☐ If the filing organizatio	-		visions apply.		
Limits	on Lobbying Exper			(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influer	nce public opinion (araes roots lobbying)			
b Total lobbying expenditures to influen			·		
c Total lobbying expenditures (add line		, (all ook lobb)g)	·		
d Other exempt purpose expenditures	o ra ano ro,		• •		
e Total exempt purpose expenditures (add lines 1c and 1c	t)			
f Lobbying nontaxable amount. Enter			h columns.		
If the amount on line 1e, column (a) or (bying nontaxable am	16		
Not over \$500,000		the amount on line 1e.			1
Over \$500,000 but not over \$1,000,0		0 plus 15% of the exc			
Over \$1,000,000 but not over \$1,500		0 plus 10% of the exc			1
Over \$1,500,000 but not over \$17,00		0 plus 5% of the exce			1
Over \$17,000,000	\$1,000,0	000.			
g Grassroots nontaxable amount (ente	r 25% of line 1f)		<u> </u>		
h Subtract line 1g from line 1a. If zero o	or less, enter -0-		Ļ		
i Subtract line 1f from line 1c. If zero o	r less, enter -0-				
j If there is an amount other than zero	on either line 1h or	line 1i, did the organiz	ation file Form 4720		
reporting section 4911 tax for this ye	ar?				Yes No
		eraging Period Under			
(Some organizat	ions that made a s	ection 501(h) election	n do not have to comp	lete all of the five	
colu			es 2a through 2f on pa	ge 4.)	
	Lobbying Exper	nditures During 4-Yea	ar Averaging Period		<u> </u>
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying nontaxable amount				<u>.</u>	
b Lobbying ceiling amount					
(150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots celling amount		" - -			
(150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990 EZ) 2010 OSHKOSH CHAMBER OF COMMERCE 93-076581

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)).

				<u>) </u>
	Yes	No	Amo	ount
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:		1		
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?		ļ		
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?	ļ			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		<u> </u>		_
i Other activities? If "Yes," describe in Part IV				
j Total. Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		ļ		
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), sect	ion 501(c)(5), or se	ction	
501(c)(6).			Yes	l No.
			res	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1	v	X
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	X	Х
3 Did the organization agree to carryover lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), sect	FO4/-	3	-41	
501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa" "Yes."	art III-A, I	ine 3 is a	nswered	l
1 Dues, assessments and similar amounts from members		1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	licai			
expenses for which the section 527(f) tax was paid).		0-		
a Current year		2a		
b Carryover from last year		2b		
c Total		2c		
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex				
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	political			
·				
	_			
expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) 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; for any additional information.		4 5 3, line 1: Also	o, complete	e this
		· · · · · · · · · · · · · · · · · · ·		
		<u>.</u>		
	_			

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.

2010
Open to Public Inspection

Name of the organization

OSHKOSH CHAMBER OF COMMERCE

Employer identification number 93-0765817

Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	sed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor	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
. 	ımpermissible private benefit?		Yes No
Pa	rt II Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990, F	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).	
	Preservation of land for public use (e.g., recreation or		storically important land area
	Protection of natural habitat	Preservation of a cert	ified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qual	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic st		2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic struct))
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the	e organization during the tax
	year -	annual to located	
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the per- violations, and enforcement of the conservation easements		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) abo		
Ü	and section 170(h)(4)(B)(ii)?	ve satisfy the requirements of section 170	Yes No
9	In Part XIV, describe how the organization reports conservation	tion easements in its revenue and expensi	
•	include, if applicable, the text of the footnote to the organiza		
	conservation easements.		
Pai	rt III Organizations Maintaining Collections	of Art, Historical Treasures, or C	Other Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (A	SC 958), not to report in its revenue state	ment and balance sheet works of art,
	historical treasures, or other similar assets held for public ex	hibition, education, or research in furthera	ance of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that described	ribes these items.	
b	If the organization elected, as permitted under SFAS 116 (A	SC 958), to report in its revenue statemen	t and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of pu	iblic 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 tre	easures, or other similar assets for financia	
	the following amounts required to be reported under SFAS	116 (ASC 958) relating to these items	
а	Revenues included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		► \$ ► \$

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

Schedule D (Form 990) 2010

195,996. 399,129 595,125. **b** Buildings c Leasehold improvements 27,763. 165,925 138,162. d Equipment e Other

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

Schedule D (Form 990) 2010

242,515.

Part VII Investments - Other Securities. Sec	e Form 990, Part X, line	12.		
(a) Description of security or category (including name of security)	(b) Book value	(c) N	lethod of valuati end-of-year mark	
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)			 .	
(E)				
(G)				
(H)		- 		
				······································
Total. (Col (b) must equal Form 990, Part X, col (B) line 12)	- F 000 P-+V I	- 40		
Part VIII Investments - Program Related. Se	ee Form 990, Part X, IIn		Method of valuat	
(a) Description of Investment type	(b) Book value		end-of-year mark	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				······································
Total. (Col (b) must equal Form 990, Part X, col (B) line 13)	45			
Part IX Other Assets. See Form 990, Part X, line	Description			(b) Book value
	Description			(b) Book value
(1)				
(2)	· · · · · ·			
(4)				•
(5)				
(6)				
(7)				
(8)	· -			
(9)			-	
(10)	_ _			
Total. (Column (b) must equal Form 990, Part X, col (B) line	e 15.)		>	
Part X Other Liabilities. See Form 990, Part X,	line 25.			
1. (a) Description of liability		(b) Amount		
(1) Federal income taxes				
(2) ADVANCE DEPOSITS		9,375.		
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)		0 375		
Total. (Column (b) must equal Form 990, Part X, col (B) line FIN 48 (ASC 740) Footnote in Part XIV, provide the text of the footnote to Pin 48 (ASC 740)	e 25.) o the organization's financial st	タ, 3 / 5。 atements that reports the organization	's liability for uncertai	n tax positions under

Schedule D (Form 990) 2010

APPLICABLE. THE ORGANIZATIONS HAD NO INTEREST AND PENALTIES RELATED TO INCOME TAXES FOR THE YEARS ENDED SEPTEMBER 30, 2011 AND 2010. THE ORGANIZATIONS' FEDERAL INCOME TAX RETURNS ARE SUBJECT TO EXAMINATION GENERALLY FOR THREE YEARS AFTER THEY ARE FILED AND THEIR STATE INCOME TAX RETURNS GENERALLY FOR FOUR YEARS AFTER THEY ARE FILED.

Schedule D (Form 990) 2010

Schedule D (Form 990) 2010 OSHKOSH CHAMBER OF COMMERCE	93-0765817 Page 5
Part XIV Supplemental Information (continued)	
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
AFFILIATE REVENUE REPORTED ON TAX RETURN ID#26-0015746	84,465.
AFFILIATE REVENUE REPORTED ON TAX RETURN ID#39-1622920	210,194.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	294,659.
PART XIII, LINE 2D - OTHER ADJUSTMENTS:	
AFFILIATE EXPENSES REPORTED ON TAX RETURN ID#26-0015746	94,490.
AFFILIATE EXPENSES REPORTED ON TAX RETURN ID#39-1622920	214,094.
UNREALIZED LOSS ON INVESTMENT REPORTED ON TAX RETURN	
ID#26-0015746	589.
TOTAL TO SCHEDULE D, PART XIII, LINE 2D	202 172
	Schedule D (Form 990) 2010

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2010
Open to Public Inspection

Name of the organization

WITH THE PRINTING COMPANY.

OSHKOSH CHAMBER OF COMMERCE

AREAS OF ITS BUSINESS COMMUNITIES SHALL PROSPER.

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

Employer identification number 93-0765817

FORM 990, PART III, LINE 3, CHANGES IN PROGRAM SERVICES:

MEMBERSHIP SALES ARE NOW CONTRACTED OUT INSTEAD OF HAVING A DEDICATED

STAFF MEMBER. WE HAVE ALSO CHANGED THE PROCESS FOR HANDLING THE

MEMBERSHIP DIRECTORY. WE HANDLE ALL ADVERTISING SALES, WITH THE HELP OF

A CONTRACTED PERSON, AS WELL AS TAKING CARE OF THE LAYOUT AND WORKING

FORM 990, PART VI, SECTION A, LINE 7A: MEMBERS OF THE OSHKOSH CHAMBER OF COMMERCE ARE GIVEN THE OPPORTUNITY TO SUBMIT NAMES OF PROPOSED CANDIDATES WHICH ARE GIVEN TO THE BOARD MANAGEMENT & TO SERVE AS DIRECTORS, THE BOARD MANAGEMENT & DEVELOPMENT COMMITTEE DEVELOPMENT COMMITTEE. CONSIDERS ALL PROPOSED CANDIDATES AND SUBMITS A PROPOSAL SLATE OF NINE CANDIDATES FOR DIRECTORSHIP TO THE BOARD FOR ITS APPROVAL. FOLLOWING APPROVAL OF THE PROPOSED SLATE THE PRESIDENT/CEO MUST NOTIFY MEMBERS THE NAMES OF PERSONS NOMINATED AS CANDIDATES FOR DIRECTORS AND THE RIGHT OF PETITIION FOR ADDITIONAL NOMINATIONS. IF NO PETITION IS FILED WITHIN THE DESIGNATED PERIOD, THE NOMINATIONS ARE CLOSED AND THE PROPOSED SLATE OF NINE CANDIDATES ARE DECLARED ELECTED BY THE BOARD OF DIRECTORS AT THE ANNUAL SEPTEMBER MEETING. IF A PETITION IS FILED, THE NAMES OF ANY ADDITIONAL CANDIDATES NOMINATED, ALONG WITH THE PROPOSED SLATE ARE SENT TO THE MEMBERS WITH INSTRUCTIONS ON THE BALLOT TO VOTE FOR NINE CANDIDATES. THE CHAIRMAN OF THE BOARD OF DIRECTORS WILL THEN APPOINT AN ELECTION

COMMITTEE, THREE DIRECTORS WHOSE TERMS EXPIRE AT THE END OF THE LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form

Schedule O (Form 990 or 990-EZ) (2010)

032211 01-24-11 ORGANIZATION'S FISCAL YEAR, TO ENSURE THAT THE ELECTION OF DIRECTORS IS

FOLLOWED ACCORDING TO THE TERMS AND CONDITIONS OF THE BY-LAWS. THE CURRENT

CHAIRMAN OF THE BOARD GETS TO APPOINT ONE DIRECTOR TO THE BOARD.

FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 WAS PREPARED BY

INDEPENDENT AUDITORS, SCHENCK CPAS, WHICH IS GIVEN TO THE PRESIDENT,

CONTROLLER, CHAIRMAN OF THE BOARD, BOARD TREASURER AND AUDIT COMMITTEE FOR

REVIEW.

FORM 990, PART VI, SECTION B, LINE 12C: EACH YEAR ALL BOARD MEMBERS SIGN A

CONFLICT OF INTEREST DISCLOSURE TO MAKE THE BOARD AWARE OF ANY POTENTIAL

CONFLICTS. THESE STATEMENTS ARE KEPT ON FILE AT THE ORGANIZATION'S OFFICE.

FORM 990, PART VI, SECTION B, LINE 15: THE CEO MANAGEMENT COMMITTEE

CONDUCTS THE ANNUAL EVALUATION PROCESS FOR THE PRESIDENT. THIS COMMITTEE

CONSISTS OF FIVE MEMBERS OF THE BOARD OF DIRECTORS, WITH THE CHAIR,

CHAIR-ELECT AND PAST CHAIR AS MEMBERS TO ENSURE CONSISTENCY. THIS COMMITTEE

IS RESPONSIBLE FOR DETERMINING THE PRESIDENT'S ANNUAL GOALS AND PERFORMANCE

STANDARD. THE PRESIDENT PROVIDES A QUARTERLY STATUS REPORT TO THE CHAIR

OUTLINING PROGRESS ON THE ANNUAL PROGRAM OF WORK. THIS, ALONG WITH THE

PRESIDENT'S GOALS, IS USED TO EVALUATE PERFORMANCE. THE EVALUATION IS

HANDLED AS PART OF THE SALARY REVIEW PROCESS. THIS DISCUSSION IS LED BY THE

CURRENT CHAIR. LEVEL OF PERFORMANCE IS BASED ON THE PROGRESS AND/OR

SUCCESSFUL COMPLETION OF THE ACTIVITIES OUTLINED IN THE ANNUAL PROGRAM OF

ACTION. THE EVALUATION PROCESS PLACES EMPHASIS ON ATTAINING GOALS AND

OBJECTIVES OF THE ORGANIZATION.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

Employer identification number 93-0765817

 Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
 ► Attach to Form 990. ► Attach to Form 990. OSHKOSH CHAMBER OF COMMERCE Name of the organization Department of the Treasury Internal Revenue Service

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

Part

ntrolling			p t	E 1 20	Yes No
(f) Direct controlling entity		 	related tax-exem	(f) Direct controlling entity	
(e) End-of-year assets			ıt had one or more	ty	501(5)(3))
(d) Total income			34 because		20
<u> </u>), Part IV, line	(d) Exempt Code section	
(c) Legal domicile (state or foreign country)			if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt	(c) Legal domicile (state or foreign country)	
(b) Primary activity			ions (Complete if the organization ar	(b) Primary activity	
(a) Name, address, and EIN of disregarded entity			Identification of Related Tax-Exempt Organizations (Complete organizations during the tax year.)	(a) Name, address, and EIN of related organization	
			Partil		

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

032161 12-21-10 LHA

Schedule R (Form 990) 2010

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A/N

501(C)(4)

WISCONSIN

CTIVITIES TO PROMOTE THE

VARIOUS COMMUNITY

COMMERCIAL, ECONOMIC &

VARIOUS COMMUNITY

OSHKOSH CHAMBER OF COMMERCE FOUNDATION, INC. 26-0015746, 120 JACKSON STREET, OSHKOSH,

54901

CORPORATION - 39-1622920, 120 JACKSON OSHKOSH AREA ECONOMIC DEVELOPMENT

STREET, OSHKOSH, WI 54901

501(C)(3)

MISCONSIN

ACTIVITIES TO PROMOTE AND

ADVANCE EDUCATIONAL

×

93-0765817

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Schedule R (Form 990) 2010 OSHKOSH CHAMBER OF COMMERCE

Part 111 organization 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.)

(a) (b)	(q)	()	(0)	(e)		£	(b)	Œ	8	9	3
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	trolling y	Predominant income (related, unrelated, excluded from tax under sections 512-514)	income related, tax under 2-514)	Share of total income	of /ear Is	Disproportionate allocations?	Code 20 of 8 K-1 (Fo	General or managing e partner? 5) Yes No	Pero
						-					
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.)	ganizations Taxable a	as a Corp	oration or Trust (Co	omplete if the	organizatio	n answered "Yes"	to Form 990, Pa	rt IV, line 34	because it had	l one or mo	re related
(a) Name, address, and EIN of related organization	<u> </u>		(b) Primary activity	ivity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	of total Sh	(g) Share of end-of-year assets	(h) Percentage ownership
										;	
					:		ļ	-			
032162 12-21-10				26				1	Sched	ule R (For	Schedule R (Form 990) 2010

Page 3

Schedule R (Form 990) 2010 OSHKOSH CHAMBER OF COMMERCE

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

Note. Complete line 1 if any entity is listed in Parts II III or IV of this schedule.				*	Yes	',
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?	s with one or more re	ated organizations listed	in Parts II-IV?		Į	` ا
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)				1	×	١
c Gift, grant, or capital contribution from other organization(s)				10	×	ال
d Loans or loan guarantees to or for other organization(s)			:	19	×	
e Loans or loan guarantees by other organization(s)				-	×	۱
					ļ 	t
f Sale of assets to other organization(s)				+	×	ا. ا
g Purchase of assets from other organization(s)			:	19	×	ال
h Exchange of assets				ŧ	×	ال
i Lease of facilities, equipment, or other assets to other organization(s)				;=	×	
j Lease of facilities, equipment, or other assets from other organization(s)				;=	×	1. 1
k Performance of services or membership or fundraising solicitations for other organization(s)	zation(s)			-	×	1
	zation(s)			+	×	ال
				+	< >	1
n Sharing of paid employees				=	4	I
 Reimbursement paid to other organization for expenses 				9	×	
p Reimbursement paid by other organization for expenses				1	×	1
 q Other transfer of cash or property to other organization(s) r Other transfer of cash or property from other organization(s) 		:	:	5 +	××	
ns for infor	ho must complete th	is line, including covered	mation 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	(d) Method of determining amount involved			
OSHKOSH AREA ECONOMIC DEVELOPMENT (1) CORPORATION	0	110,000.SERVICE	SERVICE AGREEMENT		 	I
OSHKOSH AREA ECONOMIC DEVELOPMENT (2) CORPORATION	Ъ	152,067.	152,067. INTERCOMPANY BILLINGS			
(3)						
(4)						
(5)						١
(9)				,		
032163 12-21-10	27		Schedule	Schedule R (Form 990) 2010	90) 2010	l e

93-0765817

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Schedule R (Form 990) 2010 OSHKOSH CHAMBER OF COMMERCE

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

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) (b)	(q)	(0)	(Q	(e)	€	(6)	ε
		مانمسمام امعم ا	Are all partners	Chord	Dispropri	(al 1/1 lb)	
Name, address, and EIN of entity	Filliary activity	(state or foreign	section 501(c)(3) organizations?		tionate allocations?	amount in box 20	managing partner?
		country)	Yes No		Yes No	(Form 1065)	1 1
			-				
							-
				į			ł
	,						
	1						
	-						
							-
						Schedule R (Form 990) 2010	n 990) 2010

Schedule R (Form 990) 2010 OSHKOSH CHAMBER OF COMMERCE 93-07	65817 Page 5
Schedule R (Form 990) 2010 OSHKOSH CHAMBER OF COMMERCE 93-07 Part VII Supplemental Information	
Complete this part to provide additional information for responses to questions on Schedule R (see instructions).	
Complete this part to provide additional information for responses to questions on concease in constitutions.	
	
	

2011 BOARD OF DIRECTORS OSHKOSH CHAMBER OF COMMERCE, INC.

Terms Expire September 30, 2011

Oshkosh, WI 54901

Evans, Bill 120 Jackson Street

Oshkosh, WI 54901

Johnson, Ron 120 Jackson Street

Oshkosh, WI 54901

Updike, Vicky 120 Jackson Street

Oshkosh, WI 54901

Vice Chairman

Treasurer

Oilschlager, Rod 120 Jackson Street

Oshkosh, WI 54901

Schmudlach, Steve 120 Jackson Street

Oshkosh, WI 54901

Wells, Richard 120 Jackson Street

Oshkosh, WI 54901

Wierzbinski, Brian 120 Jackson Street

Oshkosh, WI 54901

Zwickey, Jim 120 Jackson Street

Oshkosh, WI 54901

2011 BOARD OF DIRECTORS OSHKOSH CHAMBER OF COMMERCE, INC.

Terms Expire September 30, 2012

Anderson, John	120 Jackson Street Oshkosh, WI 54901	Chairman Elect
Beach, Bob	120 Jackson Street Oshkosh, WI 54901	
Fitzgerald, Sean	120 Jackson Street Oshkosh, WI 54901	
Knudtson, Randy	120 Jackson Street Oshkosh, WI 54901	
Le Roy, Joe	120 Jackson Street Oshkosh, WI 54901	
Litjens, Michelle	120 Jackson Street Oshkosh, WI 54901	
Macy, Jim	120 Jackson Street Oshkosh, WI 54901	Chairman of the Board
Wirtz, Debra	120 Jackson Street Oshkosh, WI 54901	

2011 BOARD OF DIRECTORS OSHKOSH CHAMBER OF COMMERCE, INC.

Terms Expire September 30, 2013

Arneson, Ken 120 Jackson Street

Oshkosh, WI 54901

Belville, Kent 120 Jackson Street

Oshkosh, WI 54901

Calhoun, Bill 120 Jackson Street

Oshkosh, WI 54901

Feeney, John 120 Jackson Street

Oshkosh, WI 54901

Heisler, Bob 120 Jackson Street

Oshkosh, WI 54901

Hoppe, Rick 120 Jackson Street

Oshkosh, WI 54901

Larson, Kris 120 Jackson Street

Oshkosh, WI 54901

Sullivan, Carol 120 Jackson Street

Oshkosh, WI 54901