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Porm 990

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 2010

Open to Public

Depa	irtment of nal Rever	f the Treasury nue Service	► The organization may have to use a copy of this return to satisfy state reporting requirement	nts.		inspection	
			dar year, or tax year beginning 11/01 , 2010, and ending 10/31		, 2	011	
		applicable		Employe	r Identifica	tion Number	
_		iress change	WASHINGTON AREA CHAMBER OF COMMERCE	43-0	64710	7	
	\vdash	ne change		Telephor			
	\vdash	nal return	WASHINGTON, MO 63090-2124	636-	239-2	715	
	\vdash		<u> </u>			 -	
	\vdash	minated	ا	Gross re	countr ¢	2,231,	455
	-	ended return	F Name and address of principal officer H(a) is this a g				X No
	☐ App	olication pending	Traine and address of principal officer			Yes	No No
			SAME AS C ABOVE		(see instruct	tions)	□
느		xempt status	501(c)(3) X 501(c) (6) (Insert no) 4947(a)(1) or 527				
<u></u>			TP://WWW.WASHMO.ORG/CHAMBER H(c) Group ex			- 10	
K		of organization	Corporation Trust Association X Other ► L Year of Formation: 1939	IM S	tate of legal	domicile: MO	
Pa		Summa			DIVET OF		
	1 8	Briefly descri	be the organization's mission or most significant activities: <u>ECONOMIC/COMMUN</u>	T.I.A Di	FAETOF	WENT -	
8	-						
Activities & Governance	-			- 			
Je T							
é	2 (Check this bo	if the organization discontinued its operations or disposed of more than 25	% OT ITS I	net asset	is.	16
ಹ			oting members of the governing body (Part VI, line 1a) dependent voting members of the governing body (Part VI, line 1b)		4		16
69			of individuals employed in calendar year 2010 (Part V, line 2a)		5		70
Ž			of volunteers (estimate if necessary)		6		220
¥			ed business revenue from Part VIII, column (C), line 12		7a	175	,291.
-			business taxable income from Form 990-T, line 34		7b		,085.
		ivet uniciated		or Year		Current Y	
	8	Contributions	and grants (Part VIII, line 1h)	25,8	63.		,541.
•			vice revenue (Part VIII, line 2g)	417,6			,191.
Ę			ncome (Part VIII, column (A), lines 3, 4, and 7d)		55.		,071.
Revenue			te (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	204,7			,924.
_			e – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	651,0		582	
			imilar amounts paid (Part IX, column (A), lines 1-3)	41,7			,132.
				31, /	52.	- 13	, 102.
			I to or for members (Part IX, column (A), line 4)	327,5	20	320	,557.
ø	15	Salaries, oth	er compensation, employee benefits (Part IX, column (A), lines 5-10)	321,3	,20.	329	, 331.
Expenses	16a		fundraising tees (Part IX, column (A) line 11e)				
ē	Ь	Total fundrai	sing expenses (Part-IX, column (D), line 25)				
ũ	17	Other expen	ses (Part IX, column A), lines 11a-11d, 11f-24f)	247,1	79.	270	,639.
			ses. Add lines 13-17 (must equal Part IX, column (A), line 25)	616,4	151.	643	,328.
			s expenses. Subtract line 18 from line 12	34,6	510.		,601.
8 8	1	110101140 100	Beginning			End of Y	
2 5	20	Total assets		,418,4			,600.
Assets 3 Baland	21		es (Part X, line 26)	22,			,552.
P. Set				, 395, 6			,048.
-			· · · · · · · · · · · · · · · · · · ·	, 555, (747.	1,333	,040.
		Signatu					
Une	der penal npiete D	Ities of perjury, I eclaration of prej	declare that I have examined this return, including accompanying schedules and statements, and to the best of m pages Jother than efficer) is based on all information of which preparer has any knowledge	y knowledg	e and belief	, it is true, corre	ct, and
			Allack Land	-	9-1	7-19	
۵.		Signat	Date of officers Date	e	//_ .	/ ~	
Si	gn	~ Signal		_			
He	ere		- MARK WESSELS, President				
_			or print namé and title		100	TIN	
		1 "		Check	」"		-
Pa	nid	TIM U		self-employ	_{/ed} P	00368221	L
Pr	epare						
	se On		ress ► 18 WEST SECOND STREET	Firm's EIN	<u>► 20-</u>	0141333	
				Phone no	(636)	239-64	39
Ma	v the I	IRS discuss t	his return with the preparer shown above? (see instructions).			X Yes	No

Form 990 (2010)

May the IRS discuss this return with the preparer shown above? (see instructions)

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Form 990 (2010)

Page 3

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2	_ 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	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I.	6		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 Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV.	9		х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			: 1
	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	х	
	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	11 b		Х
	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	11 c		х
	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 Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		х
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X
	f 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 (ASC 740)? If 'Yes,' complete Schedule D, Part X.	11 f		Х
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a		X
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13	-	X
14	a Did the organization maintain an office, employees, or agents outside of the United States?	14a	-	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? <i>If 'Yes,' complete Schedule F, Parts I and IV</i>	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, 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 (see instructions)	17		х
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	18	х	
	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		X
20	a Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20	+	X
	b If 'Yes' to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	201	<u>, </u>	

43-0647107 Page 4 Form 990 (2010) WASHINGTON AREA CHAMBER OF COMMERCE Part V Checklist of Required Schedules (continued) Yes Nο 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 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 Х 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 23 X Schedule J 24a Х 24b **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 24c any tax-exempt bonds? d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?.. ... 24d 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* 25b Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II. 26 X 27 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 **b** A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Х 28b Schedule L. Part IV c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV. 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 30 Х Х Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I . . . 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete 32 X Schedule N, Part II 33 Х Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V,

a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2........ Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is 37 37 X

......

Form 990 (2010)

X

X

34

35

Statements Regarding Other IRS Filings and Tax Compliance			
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	32		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	. 1c	X	
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	70		
b if at least one is reported on line 2a, did the organization file all required federal employment tax returns?	. 2b	Х	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule Q	_3b	Х	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, financial account in a foreign country (such as a bank account, securities account, or other financial account)?	a 4a		<u>x</u>
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.			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5a</u>		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<u>5b</u>		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5c	<u> </u>	<u> </u>
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?	6a		х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		<u> </u>
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 services provided to the payor?	. 7a		
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to find the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to find the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to find the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to find the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to find the organization sell.	ile 7c		
d If 'Yes,' indicate the number of Forms 8282 filed during the year			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<u>7e</u>	+	
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<u>7f</u>	—	
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?.	<u>7g</u>	<u> </u>	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	ie		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	<u>9</u> a	<u> </u>	—
b Did the organization make a distribution to a donor, donor advisor, or related person?	. <u>9</u> t	1	
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12 10a			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11 Section 501(c)(12) organizations. Enter:			ij.
a Gross income from members or shareholders			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.). 11b	12.		
12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a		
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. a is the organization licensed to issue qualified health plans in more than one state?	13a	3	
Note. See the instructions for additional information the organization must report on Schedule O.	130		
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			
c Enter the amount of reserves on hand			
14a Did the organization receive any payments for indoor tanning services during the tax year?	14:	+	X
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule Q	141	a	

b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule Q

Page 6

Pantill 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 16 1a Enter the number of voting members of the governing body at the end of the tax year ... 1 a **b** Enter the number of voting members included in line 1a, above, who are independent... Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х 2 officer, director, trustee or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors or trustees, or key employees to a management company or other person?. X Did the organization make any significant changes to its governing documents 4 since the prior Form 990 was filed?... Did the organization become aware during the year of a significant diversion of the organization's assets? ... 6 Does the organization have members or stockholders?...... 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? X 7Ы b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X 8a a The governing body? Х 8Ы **b** Each committee with authority to act on behalf of the governing body? q Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Х **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, 10b and branches to ensure their operations are consistent with those of the organization?..... X 11 a 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O 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 12b to conflicts? c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in 12 c Schedule O how this is done 13 X 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? Х 15a a The organization's CEO, Executive Director, or top management official Х **b** Other officers of key employees of the organization . . SEE SCHEDULE 0 . 15b 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 Х **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 16b organization's 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 ► NONE 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 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial SEE SCHEDULE O 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: ► MARK WESSELS 323 WEST MAIN STREET WASHINGTON MO 63090-2124 636-239-2715

Form 990 (2010) WASHINGTON AREA CHAMBER OF (COMMERCE	,

43-0647107

Page 7

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.
- 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 neither the organization	n nor any	relate	d or	gan	ızat	ion co	mpe	nsated any current of	ficer, director, or trust	ee.	
(A) (B)					;)			(D)	(E)	(F)	
Name and title	Average hours per week (describe hours for related organizations in Schedule O)	individual trustee or director	institutional trustee		key employee	Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations	
(1) COLLEEN HIMMELBERG DIRECTOR	2	х						0	0	0	
(2) JANE HABERBERGER		_	-		-		\vdash	0.	0.	0.	
DIRECTOR	2	X						0.	0.	0.	
(3) SANDY ANDERSON											
DIRECTOR	2	X	_		<u> </u>		_	0.	0.	0.	
(4) JULIE FRANKENGERG DIRECTOR	2	х						0.	0.	0.	
(5) RAY FRANKENBERG II	 	 ^						0.		<u> </u>	
DIRECTOR	2	х						0.	0.	0.	
(6) TOM HOLDMEIER	1	,								•	
EXECUTIVE DIREC	2	X	├—		-		-	0.	0.	0.	
O DAVID POLITTE DIRECTOR	2	X	1					0.	0.	0.	
(8) MIKE MARQUART	 	 ^						0.1		<u></u>	
DIRECTOR	2	X						0.	0.	0.	
(9) JEFF HELLEBUSCH]										
DIRECTOR	2	X	<u> </u>		<u> </u>			0.	0.	0.	
(10) CRAIG WALDE	4 .	١				ł			_	_	
DIRECTOR	2	X	├	_	├-	 	-	0.	0.	0.	
(11) DAN CASSETTE DIRECTOR	2	х						0.	0.	0.	
(12) JOE SCHNEIDER	 	† :			┢	1	 	<u> </u>			
PRESIDENT	2			Х		l.		0.	0.	0.	
(13) JON BAUER											
1ST VICE-CHAIR	2	ļ	 	X	ļ	!	<u> </u>	0.	0.	0.	
(14) RICH DEPPE 2ND VICE-CHAIR	2			x				0.	0.	0.	
(15) ROBERT WESSELS		1	T	Ť	1	<u> </u>		` ·			
EXECUTIVE DIREC	40		<u> </u>	<u> </u>	X	1	<u> </u>	37,936.	0.	0.	
(16) JAY NOWAK	-							_		•	
PAST FAIR CHAIR	2	1	\vdash	┢	⊢	+	X	0.	0.	0.	
<u>(17) BOB JONES</u> EX-OFFICIO	2						X	0.	0.	0.	
BAA			TEEA	0107	L 1	2/21/10		-		Form 990 (2010)	

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							
2 Total number of independent contractors (including but not limited to									

\$100,000 in compensation from the organization ► 0

Par	t VIII Statement of Revenue				 .
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<u></u>	1a Federated campaigns 1a		revenue	 	512, 513, 01 514
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	· • • • • • • • • • • • • • • • • • • •				
85					
A. S.					
불통	d Related organizations 1d			l	
S S	e Government grants (contributions). 1e 28,840.				
본피	f All other contributions, gifts, grants, and similar amounts not included above 1f 5, 701.				
문	•		-		
PS S	g Noncash contributions included in lns 1a-1f: \$	24 541			
	h Total. Add lines 1a-1f	34,541.	<u> </u>	, , , , , , , , , , , , , , , , , , , ,	
2	Business Code	161 571		1.61 571	
<u> </u>	2a LICENSE BUREAU FEES	161,571.	105 054	161,571.	
Ä,	b TOURISM SALES TAX	105,954.	105,954.		
≨	c MEMBERSHIP DUES & ASSESSMENTS	92,967.	92,967.		
SE	d SPONSORSHIP FEES	73,699.	73,699.		
Σ×	e				
Ö	f All other program service revenue				, , ,
- a	g Total. Add lines 2a-2f	434,191.		<u> </u>	1 3 3 3
1	3 Investment income (including dividends, interest and	2 071			2,971.
	other similar amounts)	2,971.			2,3/1.
	4 Income from investment of tax-exempt bond proceeds			<u> </u>	
	5 Royalties		7	······································	
	(i) Real (ii) Personal		1		
	6a Gross Rents 10,403.	,			
	b Less: rental expenses.	, ,	,		
	c Rental income or (loss) 10,403.	10 402	-	<u> </u>	10 403
	d Net rental income or (loss)	10,403.	,	<u> </u>	10,403.
	7a Gross amount from sales of (i) Securities (ii) Other	,			
	assets other than inventory 2,423.	, ,	1		
	b Less: cost or other basis				
	and sales expenses 2,323.	· ·			
	c Gain or (loss) 100.	100	100	 	<u> </u>
	d Net gain or (loss)	100.	100.	· · · · · · · · · · · · · · · · · · ·	
NUE	8a Gross income from fundraising events (not including \$				
OTHER REVEN	of contributions reported on line 1c).				,
2	See Part IV, line 18 a 1,746,098.	· · · · · · · · · · · · · · · · · · ·	基础图 图图的人	Bertham British	· 100 100 100 100 100 100 100 100 100 10
푠	b Less: direct expenses b 1,646,405.	00 600	05 070	12 700	
_	c Net income or (loss) from fundraising events .	99,693.	85,973	13,720.	
	9a Gross income from gaming activities. See Part IV, line 19	-	4.5		,
	b Less: direct expenses b		 	 	
	c Net income or (loss) from gaming activities	•	, , , , , , , , , , , , , , , , , , ,		
	10a Gross sales of inventory, less returns and allowances a	K			
		, · · · · · · · · · · · · · · · · · · ·			1
	b Less: cost of goods sold b		1	‡ · · · · · · · · · · · · · · · · · · ·	
	c Net income or (loss) from sales of inventory.	<u> </u>	ļ	 	
	Miscellaneous Revenue Business Code		<u> </u>	 	1 000
	11a MISCELLANEOUS	828.		 	828.
	b	1	 		
	C		-	 	
	d All other revenue		1	 	
	e Total. Add lines 11a-11d	828		155 001	14 000
	12 Total revenue. See instructions	582,727	358,693	175,291	. 14,202.

Form 990 (2010)

Part IX... Statement of Functional Expenses

BAA

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) **(D)** Fundraising (A) Total expenses Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. Program service Management and general expenses expenses ex expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, 28,382 Grants and other assistance to individuals in the U.S. See Part IV, line 22 14,750 Grants and other assistance to governments. organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members. Compensation of current officers, directors, 5 trustees, and key employees 37,936. Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) n Other salaries and wages . . 201,693 Pension plan contributions (include section 401(k) and section 403(b) employer contributions). 7,303 58,682 Other employee benefits. 23,943. 10 Payroll taxes Fees for services (non-employees): a Management **b** Legal 4,470 c Accounting d Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other 93,912 12 Advertising and promotion 14,645 Office expenses 13 Information technology . 15 Royalties . 30,189 16 Occupancy 3,780. 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 37,989 20 Interest. 21 Payments to affiliates ... 49,535 Depreciation, depletion, and amortization 3,819. 23 Insurance 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 O.) 8,882. a REPAIRS AND MAINTANCE 8,832. **b** SUPPLIES c TELEPHONE 6,289. d MISCELLANEOUS 5,380 e DUES AND SUBSCRIPTIONS 2,198 719 f All other expenses 643,328 Total functional expenses. Add lines 1 through 24f Joint costs. Check here ► I 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

2 : 3 ! 4 . 5 !	Cash — non-interest-bearing. Savings and temporary cash investments	(A) Beginning of year 420, 442. 29, 329.	1 2 3	(B) End of year 319, 869.
2 : 3 ! 4 . 5 !	Savings and temporary cash investments	29,329.	2	319,869.
3 4 4 5	Pledges and grants receivable, net	29,329.		319,869.
5	Accounts receivable, net		3	
5				
	Receivables from current and former officers, directors, trustees, key employees.		4	53,959.
6	and highest compensated employees. Complete Part II of Schedule L		5	
	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
S 7 8	Notes and loans receivable, net		7	
Ĕ 8	Inventories for sale or use		8	
s 9	Prepaid expenses and deferred charges	7,170.	9	32,713
10a	Land, buildings, and equipment. cost or other basis. Complete Part VI of Schedule D			
ь	Less: accumulated depreciation	961,477.	10 c	954,059.
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)	1,418,418.	16	1,360,600
	Accounts payable and accrued expenses		17	7,902
18	Grants payable		18	<u> </u>
	Deferred revenue		19	17,650
L 20	Tax-exempt bond liabilities		20	
A 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	
E 1	Secured mortgages and notes payable to unrelated third parties		23	
	Unsecured notes and loans payable to unrelated third parties		24	
1	·		25	
		22,769.	26	25,552
	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ and complete lines		20	25,552
N	27 through 29 and lines 33 and 34.			
. I	Unrestricted net assets		27	
e 1	Temporarily restricted net assets		28	·
Ī 29	Permanently restricted net assets	-	29	
	Organizations that do not follow SFAS 117, check here ► X and complete			
	lines 30 through 34.		5× ~ .	
וצ	Capital stock or trust principal, or current funds		30	
	Paid-in or capital surplus, or land, building, or equipment fund		31	-
A 32	Retained earnings, endowment, accumulated income, or other funds		32	1,335,048
	Total net assets or fund balances		-	1,335,048
\$ 34	Total liabilities and net assets/fund balances			1,360,600

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Form **990** (2010)

Forn	990 (2010) WASHINGTON AREA CHAMBER OF COMMERCE	43-0647107	Pa	ge 12
Pa	Reconciliation of Net Assets			_
	Check if Schedule O contains a response to any question in this Part XI			\perp
_		1 - 1	E00 5	127
1	Total revenue (must equal Part VIII, column (A), line 12)	1 1	582,7	
2	Total expenses (must equal Part IX, column (A), line 25).	2	643,3	
3	Revenue less expenses. Subtract line 2 from line 1		-60,6	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	. 4	1,395,6	
5	Other changes in net assets or fund balances (explain in Schedule O).	5		<u>0.</u>
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)).	6	1,335,0	048.
Pa	Financial Statements and Reporting			
	Check if Schedule O contains a response to any question in this Part XII	<u></u>		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		Yes	No
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.			
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X
1	b Were the organization's financial statements audited by an independent accountant?		2b	Х
	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight review, or compilation of its financial statements and selection of an independent accountant?	nt of the audit,	2c	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
	d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year wer separate basis, consolidated basis, or both:	e issued on a		
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in Audit Act and OMB Circular A-133?	n the Single	3a	x
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits	e required audit	3b	
BA			Form 990	(2010)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 Open (o Public

Employer identification number

WAS	SHINGTON AREA CHAMBER OF COMME	RCE		43-0647107
Par	Organizations Maintaining Dono	r Advised Funds or Other Sim	ilar Funds or Acco	
	Organizations Maintaining Dono the organization answered 'Yes' t	o Form 990, Part IV, line 6.		·
		(a) Donor advised funds		unds 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 do funds are the organization's property, subject	nor advisors in writing that the assets to the organization's exclusive legal	held in donor advised control?	Yes No
6	Did the organization inform all grantees, dono used only for charitable purposes and not for purpose conferring impermissible private ben	ors, and donor advisors in writing that the benefit of the donor or donor adv efit?	grant funds can be	TYes No
	RIII Conservation Easements. Comp			
	Purpose(s) of conservation easements held b			, o, r a. c , v ,
•	Preservation of land for public use (e.g.,		servation of an historica	ally important land area
	Protection of natural habitat		servation of a certified	= -
	Preservation of open space			
2	Complete lines 2a through 2d if the organizat last day of the tax year.	on held a qualified conservation cont	ribution in the form of a	a conservation easement on the
			H	eld at the End of the Tax Year
1	a Total number of conservation easements.		2a	
1	b Total acreage restricted by conservation ease	ments		
(c Number of conservation easements on a cert	ified historic structure included in (a).	2c	
	d Number of conservation easements included structure listed in the National Register		2d	
3	Number of conservation easements modified tax year ▶		or terminated by the or	ganization during the
4	Number of states where property subject to c	onservation easement is located 🟲 _	····	
5	and enforcement of the conservation easeme			
6	Staff and volunteer hours devoted to monitor			
7	Amount of expenses incurred in monitoring, • \$	nspecting, and enforcing conservatio	n easements during the	year
8	Does each conservation easement reported of 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIV, describe how the organization repor include, if applicable, the text of the footnote conservation easements.	ts conservation easements in its revenue to the organization's financial statem	e and expense statement nents that describes the	, and balance sheet, and organization's accounting for
Pa	Organizations Maintaining Collection Complete of the organization and	ections of Art, Historical Treaswered 'Yes' to Form 990, Par	sures, or Other Sin t IV, line 8.	nilar Assets.
1	a If the organization elected, as permitted under art, historical treasures, or other similar asse in Part XIV, the text of the footnote to its final	ts held for public exhibition, educatio	n, or research in furthei	nt and balance sheet works of rance of public service, provide,
	b If the organization elected, as permitted und- historical treasures, or other similar assets h following amounts relating to these items:	er SFAS 116 (ASC 958), to report in i eld for public exhibition, education, or	ts revenue statement a r research in furtheranc	nd balance sheet works of art, e of public service, provide the
	(i) Revenues included in Form 990, Part VII	I, line 1		▶\$
	(ii) Assets included in Form 990, Part X.			▶\$
2	If the organization received or held works of amounts required to be reported under SFAS	art, historical treasures, or other simi 3 116 (ASC 958) relating to these iten	lar assets for financial ons:	gain, provide the following
	a Revenues included in Form 990, Part VIII, lin	e 1	•	. > \$
	b Assets included in Form 990, Part X			▶\$

Schedule D (Form 990) 2010 WASHI	NGTON ARI	ЕА СНАМ	BER OF C	OMMER	CE		43-0647	107	,	Pagę 2
Part III Organizations Maintai										
Using the organization's acquisition items (check all that apply):										
a Public exhibition			d Loan o	r exchar	nge programs					
b Scholarly research			e Other							
c Preservation for future genera	ations						•			
4 Provide a description of the organ Part XIV.	nization's coll		•	•				ın		
5 During the year, did the organizat assets to be sold to raise funds ra								Yes		No
PartIV Escrow and Custodial 9, or reported an amou	Arrangem unt on Form	ents. Col n 990, Pa	mplete if o art X, line :	organiz 21.	ation answere	ed 'Yes' to) Form 99 	0, Pai	rt IV,	ine
1 a Is the organization an agent, trus included on Form 990, Part X?	tee, custodiar	n, or other	intermediary	for cont	ributions or othe	er assets not	Γ	Yes	Г	No
b If 'Yes,' explain the arrangement	ın Part XIV a	nd complet	e the followi	ng table			_	-		
•							Α	mount		
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 a	mount on For	m 990, Pai	t X, line 21?				[Yes		No
b If 'Yes,' explain the arrangement	ın Part XIV.							_		
Part V Endowment Funds. Co	mplete if the	ne organi	zation ans	wered	'Yes' to Forn	n 990, Par	t IV, line	10.		
	(a) Current	year	(b) Prior year	r	(c) Two years back	(d) Three	years back	(e) F	our years	back
1 a 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 .						: :		<u>-</u>		
g End of year balance				<u> </u>	. <u></u> .				<u></u>	
2 Provide the estimated percentage	e of the year	end balanc	e held as:							
a Board designated or quasi-endow	vment ►		%							
b Permanent endowment ▶	%									
c Term endowment ►	⁸									
3a Are there endowment funds not	n the posses	sion of the	organization	that are	held and admir	nistered for t	he	г		
organization by:								-	Yes	No
(i) unrelated organizations								3a(i)	,	
(ii) related organizations								3a(ii)		
b If 'Yes' to 3a(II), are the related of	_					• • • •	•	3b		
4 Describe in Part XIV the intended	uses of the	organizatio	n's endowm	ent fund	s.					
Part M. Land, Buildings, and							T	/.IN F	Doc!	
Description of investment		(a) Cost of	other basis stment)	(a) 0	ost or other sis (other)	(c) Accum deprecia		(a) t	Book va	nue
1a Land	,		2,918.						2,	, 918
b Buildings.					54,963.		4,748.			215
c Leasehold improvements.				1	,477,575.	52	6,228.		951	, 347
d Equipment										
e Other	. <u></u> .				195,980.	19	6,401.			-421
Total. Add lines 1a through 1e (Column	n (d) must ed	qual Form 9	990, Part X, d	column (B), line 10(c))		▶		954	,059.
BAA							Schedi	ule D (F	orm 99	0) 201

TEEA3302L 12/20/10

2. FIN 48 (ASC 740) 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 (ASC 740).

Sche	edule D (Form 990) 2010 WASHINGTON AREA CHAMBER OF COMMERCE	13-064710	7 Page 4
Par	t XI № Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements	N/A	
1	Total revenue (Form 990, Part VIII,column (A), line 12)		
2	Total expenses (Form 990, Part IX, column (A), line 25)		
3	Excess or (deficit) for the year. Subtract line 2 from line 1		
4	Net unrealized gains (losses) on investments		
5	Donated services and use of facilities	··	
6	Investment expenses		
7	Prior period adjustments		
8	Other (Describe in Part XIV)		
9	Total adjustments (net). Add lines 4 through 8		
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9.		
	TXII Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return N/	Δ
1	Total revenue, gains, and other support per audited financial statements		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	75.5	
	1 1		
	Net unrealized gains on investments		
	Donated services and use of facilities		
	Recoveries of prior year grants	<u> </u>	
	d Other (Describe in Part XIV)		
_	e Add lines 2a through 2d		
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
	a Investments expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Part XIV.)		
	Add lines 4a and 4b		
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		NT / 7
<u> </u>	Reconciliation of Expenses per Audited Financial Statements With Expenses p		N/A
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
	a Donated services and use of facilities		
	b Prior year adjustments	_	
	c Other losses		
	d Other (Describe in Part XIV.)		
(e Add lines 2a through 2d		
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
	a Investments expenses not included on Form 990, Part VIII, line 7b	— j	
	b Other (Describe in Part XIV.)		
5	c Add lines 4a and 4b		
	Total expenses. Add lines 3 and 4c. (This must equal Form 930, Fact I, line 10.)	<u> </u>	
Com	replete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; 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 compadditional information.	IV, lines 1b a lete this part t	ind 2b; to provide

TEEA3304L 02/11/11

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Schedule **D** (Form 990) 2010

SCHEDULE G (Form 990 or 990-EZ)

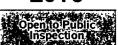
Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

OMB No 1545-0047



Name of the organization						Employer identifica	
WASHINGTON AREA CHAMBER C	F COMMERC	E				43-064710	7
Parties Fundraising Activities. Comp							
1 Indicate whether the organization i	raised funds thi	rough any	of the follo	wing activities. Check	all that	apply.	
a Mail solicitations			е	Solicitation of non-	governn	nent grants	
b Internet and email solicitations	5		f	Solicitation of gove	rnment	grants	
c Phone solicitations			g	X Special fundraising	events		
d In-person solicitations			•				
2a Did the organization have a writter employees listed in Form 990, Par	n or oral agreer t VII) or entity	ment with	any individ	lual (including officers, rofessional fundraising	director services	rs, trustees or k	ey Yes X No
b If 'Yes,' list the ten highest paid in compensated at least \$5,000 by the	dividuals or en ne organization.	tities (func	iraisers) pi	ursuant to agreements	under w	hich the fundra	iser is to be
(i) Name and address of individual	(ii) Activity	(iii) Did	fundraiser	(iv) Gross receipts	(v) Ar	mount paid to	(vi) Amount paid to
or entity (fundraiser)			dy or control ibutions?	from activity	fundr	retained by) aiser listed in olumn (i)	(or retained by) organization
		Yes	No				
1							
2	:						
3							
4							
5							
6							
7							
8							
9							
10							
Total			•				0.
List all states in which the organiz or licensing.	ration is registe	ered or lice	ensed to so	olicit contributions or ha	as been	notified it is ex	empt from registration
							
	- -						
			- -				
						-	
						 -	

Saha	دا. اد	C (Face 000 a 000 FT 0010 MACHING	TON ADDA GUAND		42.064	,
Par	tule (III)	G (Form 990 or 990-EZ) 2010 WASHING Fundraising Events. Complete if reported more than \$15,000 of ful and 6a. List events with gross recommendations.	the organization ar	nswered 'Yes' to Fo	43-064 rm 990, Part IV, Iir s income on Form	ne 18. or
RE			(a) Event #1 WASHINGTON TOW (event type)	(b) Event #2 FAIR ADVERTISI (event type)	(c) Other events	(d) Total events (add column (a) through column (c))
MCZM <m2< th=""><th>1</th><th>Gross receipts</th><th>1,691,048.</th><th>55,050.</th><th></th><th>1,746,098.</th></m2<>	1	Gross receipts	1,691,048.	55,050.		1,746,098.
Ŀ	2	Less: Charitable contributions .				
	_3	Gross income (line 1 minus line 2)	1,691,048.	55,050.		1,746,098.
	4	Cash prizes	80,747.			80,747.
	5	Noncash prizes				
D-RECF	6	Rent/facility costs	81,793.	26,381.		108,174.
	7	Food and beverages .	553,893.			553,893.
E X P	8	Entertainment	385,886.			385,886.
EXPEZSES	9	Other direct expenses	502,756.	14,949.		517,705.
	11	Direct expense summary. Add lines 4- th Net income summary. Combine line 3, co Gaming. Complete if the organiza \$15,000 on Form 990-EZ, line 6a	olumn (d), and line 10 ation answered 'Ye		<u> ▶</u>	1,646,405. 99,693. ported more than
REVENUE		\$15,000 0111 01111 990-E2, line oa	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
E N	1	Gross revenue				
E	2	Cash prizes				
DIRECT	3	Non-cash prizes			· · · · · · · · · · · · · · · · ·	
C S T E S	4	Rent/facility costs	· · · · · · · · · · · · · · · · · · ·			
	5	Other direct expenses				
	6	Volunteer labor	Yes%	Yes%	Yes%	
	7	Direct expense summary. Add lines 2 thr	ough 5 in column (d)			

9 Enter the state(s) in which the organization operates gaming activities: a Is the organization licensed to operate gaming activities in each of these states?		No
10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	 Yes	
b If 'Yes,' explain'	 	

Sche	edule G (Form 990 or 990-EZ) 2010 WASHINGTON AREA CHAMBER OF COMMERCE	43-0647107	Page 3
11	Does the organization operate gaming activities with nonmembers?	Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity administer charitable gaming?	formed to Yes	No
a t	Indicate the percentage of gaming activity operated in: The organization's facility	and records:	<u> </u>
	Address ►		
t	Does the organization have a contact with a third party from whom the organization receives gaming reversed if 'Yes,' enter the amount of gaming revenue received by the organization		No
	Name •		
	Address ►		
16	Gaming manager information:		
	Name •		
	Gaming manager compensation ► \$		
	Description of services provided ▶		
	Director/officer Employee Independent contractor		
17	Mandatory distributions		
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to state gaming license? b Enter the amount of distributions required under state law to be distributed to other exempt organizations organization's own exempt activities during the tax year	∐Yes	No
Pa	Supplemental Information. Complete this part to provide the explanations requestions (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as a this part to provide any additional information (see instructions).	uired by Part I, line pplicable. Also con	2b, nplete
			
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Schedule D (Form 990) 2010 WASHINGTON AREA CHAMBER OF COMMERCE	43-0647107	Page 5
Schedule D (Form 990) 2010 WASHINGTON AREA CHAMBER OF COMMERCE Part XIV Supplemental Information (continued)		
		
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SCHEDULE I

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22.

Attatch to Form 990.

201

OMB No 1545-0047

2 (h) Purpose of grant or assistance DEVELOPMENT **A** ECONOMIC GENERAL SUPPORT Employer identification number Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. X Yes Partilly Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to 43-0647107 (g) Description of non-cash assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . (f) Method of valuation (book, FMV, appraisal, other) SEE PART IV : o o (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. : 5,100 (d) Amount of cash grant 17,250 (c) IRC section if applicable Part II can be duplicated if additional space is needed Enter total number of section 501(c)(3) and government organizations Par的集 General Information on Grants and Assistance 43-6003962 43-1259237 WASHINGTON AREA CHAMBER OF COMMERCE (b) EIN WASHINGTON HISTORICAL PO BOX 146 WASHINGTON, MO 63090 1 (a) Name and address of organization or government WASHINGTON, MO 63090 405 JEFFERSON STREET CITY OF WASHINGTON 1111 Name of the organization 3 은 € E ଞ୍ଚ ଫ୍ର ପ୍ର ତ୍ର

Schedule 1 (Form 990) 2010

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

Enter total number of other organizations...

Page 2

Schedule I (Form 990) 2010 WASHINGTON AREA CHAMBER OF COMMERCE

Parkill Cants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 SCHOLARSHIPS	21	14,750.			
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4					
· ·					
Partive Supplemental Information. Complete this part to provide the information required in Part I	olete this part to p	rovide the informat	tion required in Par	, line 2,	and any other additional information.
<u>PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANTS FUNDS IN U.S.</u> _	<u>MONITORING USE</u>	<u>: OF GRANTS FUN</u>	IDS IN U.S.		
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ВАА					Schedule I (Form 990) 2010

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No. 1545-0047

WASHINGTON AREA CHAMBER OF COMMERCE 43-0647107
FORM_990, PART VI. LINE 11B - FORM 990 REVIEW PROCESS
FORM 990 IS PREPARED BY CPA WHO IS A FORMER BOARD MEMBER AND THEN IS REVIEWED BY THE
ORGANIZATION'S PRESIDENT AND ACCOUNTANT BEFORE IT IS SIGNED AND SUBMITTED FOR FILING
FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCESS FOR OFFICERS & KEY EMPLOY
ANNUAL REVIEW BY THE BOARD MEMBERS
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE
COPIES OF GOVERNING DOCUMENTS, POLICIES AND TAX RETURNS ARE AVAILABLE FOR REVIEW AT
THE CHAMBER OFFICE