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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)

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

OMB No 1545-0047 2011

Open to Public Inspection

<u>A</u>	For th	ne 2011 c	alendar year, or tax year beginning	, and ending					
В	Check if a	applicable	C Name of organization				D Emplo	yer identification nu	mber
	Address	change	BEAVERTON	AREA CHAMBER OF COMME	RCE				
	Name ch	ange	Doing Business As				93-	0423398	
$\equiv$		·	Number and street (or P O box if mail is not deliver	ed to street address)	-	Room/suite	E Teleph	one number	
$\sqsubseteq$	Initial retu	um	12655 SW CENTER ST.			140	503	3-644-012	23
	Terminate	ted	City or town, state or country, and ZIP + 4	· · · · · · · · · · · · · · · · · · ·	· ·				
	Amended	d return	BEAVERTON	OR 97005		Į.	G Gross reco	eints \$ 3	94,016
=		'	F Name and address of principal officer				0.000.00	5,5,5,5	
	Application	on pending	LORRAINE CLARNO			H(a) Is this a gro	oup return for	affiliates? Ye	es X No
			12655 SW CENTER ST.			H(b) Are atl affi	liates include	ıdə Ye	s No
			BEAVERTON	OR 97005				(see instructions)	_
								,	
~		mpt status		(insert no.) 4947(a)(1) or 527	/			_	
	Website		ww.beaverton.org			H(c) Group exe			
		organization	X Corporation Trust Association	Other >	L Ye	ar of formation 1	954	M State of legal dor	nicile OR
	art i		immary	<del></del>					
	1	=	scribe the organization's mission or most	_					
<u> </u>	1	TO P	ROMOTE BUSINESS IN BEAVE	RTON AREA.					
۵Ĭ									
Activities & Governance	2	Check th	is box ▶  if the organization discontinu	ed its operations or disposed of more	than 25%	6 of its net ass	ets		
<b>5</b> 0	1		of voting members of the governing body (	·			3	15	
Z 2	1		of independent voting members of the gov	,			4	15	
ڲٙڲٙ	1		nber of individuals employed in calendar y	• • • • • • • • • • • • • • • • • • • •			5	4	
? ≩	1		nber of volunteers (estimate if necessary)	ear 2011 (Fait V, line 2a)			6	0	
ĕ			•	lumn (C) line 12			7a		2,548
			elated business revenue from Part VIII, co	• •					2,729
	D	Net unrei	ated business taxable income from Form	990-1, line 34		Prior Year	7b	Current Ye	
	ا و	Contribut	ions and grants (Part VIII, line 1h)		-	71107 704	381	<u> </u>	125
e e	i		service revenue (Part VIII, line 2g)		<del> </del>	236	,695	23	4,481
Revenue	i	•	, , , , , , , , , , , , , , , , , , , ,	and 7d\	⊢	200	177		82
å			nt income (Part VIII, column (A), lines 3, 4	·	<u> </u>	113	,723	12	2,016
	1		enue (Part VIII, column (A), lines 5, 6d, 8d	·	⊢				
			enue – add lines 8 through 11 (must equal		<del>-</del>	350	976	35	6,704
			nd similar amounts paid (Part IX, column (				0		0
	14	Benefits	oaid to or for members (Part IX, column (A	A), line 4)	ડ્રો ⊢		0		0
es	15	Salaries,	other compensation, employee benefits (Fig. 1), and fundraising fees (Part IX, column (A)	242	,082	24	4,406		
penses	16a	Professio	nal fundraising fees (Part IX, column (A),	s . s/	ارًا الر		0		0
			draising expenses (Part IX, column (D), lin	e 25/1 =	트				
Щ	17 (	Other exp	enses (Part IX, column (A), lines 11a–11d	J, 11∱24e) <b>OGDEN, UT</b>	1		,926		<u>6,462</u>
	18	Total exp	enses Add imes 13–17 (must equal Part l	X, column (A), line 25)	- L	334	,008	35	0,868
	19 1	Revenue	less expenses Subtract line 18 from line	12			,968	!	5,836
5 5						Beginning of Curr		End of Ye	
Net Assets or Fund Balances	20	Total ass	ets (Part X, line 16)				,105		<u>5,296</u>
t As	21	Total liab	lities (Part X, line 26)				,645		<u>6,000</u>
22	22	Net asset	s or fund balances Subtract line 21 from	ine 20		-16	,540	-10	<u>0,704</u>
_P	art II	Sig	gnature Block						
			регјигу, I declare that I have examined this retui					owledge and belie	f, it is
tn	ue, com	ect, and co	omplete/Declaration of preparer (other than offi	cer) is based on all information of which pr	reparer ha	s any knowledge	·		
			1/2/ (main) / Sain.	<u> </u>		<u>-</u>	3-	-28-12	_
Sig	ın	Si	gnulturetor office				Date		
He	•		Lorraine Clarno	Pr	resid	ent			
	. •	T 75	pe or print name and title						
		Print/Type	preparer's name	Preparer's signature		Date	Check	of PTIN	
Paid	d			Russel & Ree	; U		12 self-em	□"	433
	parer	ļ ————	L T. RIES  TAPPADD CETRE	RT, POLLARD & CO,	<u></u>			93-062	
	Only	Firm's nan	<del></del>	<del></del>	יייר	Fir	m's EIN	93-002	7130
J30	City	ŀ	West Time On	ip Rd, Suite 450		1		503-723	7600
		Firm's add		97068-4191		Ph	one no		
			s this return with the preparer shown above					X Yes	
DAA	raper	WOLK KE	duction Act Notice, see the separate in	SUUCUUIIS.				Form	990 (2011)

			423398	Page 2
	tatement of Program Servi	<u>-</u>	ш	$\Box$
	ribe the organization's mission	a response to any question in this Part	<u>    </u>	
	OTE BUSINESS IN B	EAVERTON AREA.		
_		program services during the year which were not	listed on the	
	990 or 990-EZ?	lula O		Yes X No
	scribe these new services on Sched inization cease conducting, or make	uie O e significant changes in how it conducts, any proj	aram	
services?	<b>U</b>			Yes X No
	scribe these changes on Schedule (		<b></b>	
		complishments for each of its three largest progrinizations and section 4947(a)(1) trusts are requi		
		ises, and revenue, if any, for each program servi		
a (Code	) (Expenses \$	including grants of \$	) (Revenue \$	
(Code	) (Expenses \$	including grants of \$	) (Revenue \$	
(Code	) (Expenses \$	including grants of \$	) (Revenue \$	
(Oode	/ (Expenses ψ	moleculing grants of $\phi$	) (Nevenue ψ	
	im services (Describe in Schedule		•	
(Expenses S		ding grants of \$ ) (Re	evenue \$	)
i iotai progra	am service expenses			Form <b>990</b> (2011
				Form 338 (2011

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

	1 990 (2011) BEAVERTON AREA CHAMBER OF COMMERCE 93-0423398		P	age :
P	art IV Checklist of Required Schedules			
		<u> </u>	Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	1		x
•	complete Schedule A	2		X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?  Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
3	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 for which 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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8_		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		X
0	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
1	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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	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	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			7.
	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			<b>3</b> 2
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	-	X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
Ť	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	446	x	
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		
2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	12a		x
<b>L</b>	Schedule D, Parts XI, XII, and XIII  Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	124		
D	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		х
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
J 4a	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,	1.12		
-	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
5	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		X
6	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
7	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		X
8	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	X	
9	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	1	X

Form **990** (2011)

20a

20b

Part IV	Checklist o	of Required Schedules	(continued)

	·		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part IX, column (A), line 12 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 29 If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X_
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25	24a		<u> </u>
	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		
	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		<del></del>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			4.5
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		<u> </u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			35
••	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
_	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			v
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b				v
_	Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	20-		x
29	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV  Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c		X
30		29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	30		
,	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	31		
,_	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	}	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,	-55		
	IV, and V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the	333		
	meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37	ļ	X
8	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	x	
			990	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V					X
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	4			
b	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					
	reportable gaming (gambling) winnings to prize winners?			1c		ļ
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	4			ł
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu			2b	X	<u> </u>
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)			v	•
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 O		<b>.</b>	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other		ту			
	over, a financial account in a foreign country (such as a bank account, securities account, or other fir account)?	ianciai		4a		x
b	If "Yes," enter the name of the foreign country			40		
U	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial	Accou	nts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	Accou	11.0	5a		x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year.	ction?		5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	50000		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 contribution	ons or				
	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	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		
þ	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 was	as				
	required to file Form 8282?	1 1		7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit c		7	7e		<u> </u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr			7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation file	a Form 1098-C7	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			8		
9	organization, have excess business holdings at any time during the year?  Sponsoring organizations maintaining donor advised funds.			•		
а	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter			1		
а	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					
а	Gross income from members or shareholders	11a				
þ	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?	ı	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	1 1				
	the organization is licensed to issue qualified health plans	13b				
С	Enter the amount of reserves on hand	13c				v
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
<u> </u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule	U		14b		

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule X 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 15 1a 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O 15 1b 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 X any other officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct X supervision of officers, directors, or trustees, or key employees to a management company or other person? X 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 6 Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint X 7a one or more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, X 7b stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X 8a a The governing body? X 8b 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 X 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 ) Nο 10a X 10a Did the organization have local chapters, branches, or affiliates? b If "Yes." did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12b b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c 13 Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? 14 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? X The organization's CEO, Executive Director, or top management official 15a X 15b 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 X 16a with a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the 16b organization's exempt status with respect to such arrangements? Section C. Disclosure OR List the states with which a copy of this Form 990 is required to be filed > 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy. 19 and financial statements available to the public during the tax year State the name, physical address, and telephone number of the person who possesses the books and records of the 20 12655 SW CENTER ST. organization > BEAVERTON CHAMBER OF COMMERCE OR 97005 503-644-0123 BEAVERTON

# 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
- 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 org	anization nor an	y rela	ated	orga	nıza	tions c	on	pensated any current offic	cer, director, or trustee		
(A) Name and Title	(B) Average hours per week (describe hours for related	off	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) Or director than the management of					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related	
	organizations in Schedule O)	Individual trustee or director	Institutional trustee	өг	Key employee	Highest compensated employee	er			organizations	
(1) ADA BOJE											
BOARD MEMBER	1.00	X						0	0	0	
(2) BRYAN JUSTROM										_	
TREASURER	4.00	X		X				0	0	0	
(3) JENNY BRUCE	1										
BOARD MEMBER	1.00	X				<u> </u>		0	0	0	
(4) TROY CUNNINGHAM									_	_	
BOARD MEMBER	1.00	X			<u> </u>	$\sqcup$		0	0	0	
(5) MATT PAYNE		1		<b>l</b> .							
BOARD MEMBER	1.00	X						0	0	0	
(6) MATTHEW CHRISMAN									_		
BOARD MEMBER	1.00	X	<u> </u>			Ш		0	0	0	
(7) JERRY JONES								_	_		
BOARD MEMBER	1.00	X						0	0	0	
(8) MATT KRILL		1				·		_	_		
BOARD MEMBER	1.00	X				<b> </b>		0	0	0	
(9) WENDI EILAND								_	_		
CHAIRMAN	9.00	X		X		<u> </u>	_	0	0	0	
(10) SCOTT BURGESS								_	_	_	
BOARD MEMBER	1.00	X				$\vdash$	_	0	0	0	
(11) MARK FRYBURG									_		
BOARD MEMBER	1.00	X				-	_	0	0	0	
(12) KEN MADDEN							- 1		_	_	
BOARD MEMBER	1.00	X						0	0	0	
(13) REBECCA LESLEY								_	_	-	
BOARD MEMBER	1.00	X					_	0	0	0	
(14) RON REICHEN								_	_		
BOARD MEMBER	1.00	X						0	0	0	

Part VII Section A. Officers  (A)  Name and title	(B) Average hours per week (describe hours for	off	x, unle icer a	Pos check ess pe nd a d	erson	than o	ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated emount of other compensation from the		
	related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		an	anization d related anizations	
(15) DR. FREDERICK W		<b>.</b>						0	0		<del></del>	
BOARD MEMBER (16) LORRAINE CLARNO	1.00	X			<u> </u>		-	0	0			0
PRESIDENT (17)	40.00			X				76,952	0		8	,319
(18)												
(19)											_	
(20)												
(21)												
(22)												
(23)												
(24)		ļ					ļ					<del></del>
(25)			 									
1b Sub-total c Total from continuation she	ets to Part VII. S	Secti	on A	4			<b>&gt;</b>	76,952			8	,319
d Total (add lines 1b and 1c)							<u> </u>	76,952			8	,319
Total number of individuals (in reportable compensation from				thos	e lis	ted a	bov	e) who received more than	\$100,000 in			
											Yes	s No
3 Did the organization list any for employee on line 1a? If "Yes,"								oyee, or highest compensa	ited	L:	3	x
4 For any individual listed on line organization and related organ										•		
ındıvıdual	-									<u> </u>	4	X
5 Did any person listed on line 1 for services rendered to the or									individual	!	5	<u>x</u>
Section B. Independent Contract						la at a			than \$100,000 of			
Complete this table for your five compensation from the organical compensation.	zation Report co	ompe	ensa	tion	for t	he ca	len	dar year ending with or with	in the organization's tax ye	ear		
Name and	(A) business address						ļ	Descript	(B) tion of services		(C) Compen	sation
								·····				
								······································				
2 Total number of independent of	contractors (incli	ıdına	but	not i	lmita	ed to	the	se listed above) who				
received more than \$100,000									0		<del></del>	<del></del>
DAA											Form 99	(2011)

Pi	ırt \	III State	ment of Reve	enue						
		•					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ž ž	1a	Federated ca	mpaigns	1a						0.2, 0.0, 0.0,
Contributions, Gifts, Grants and Other Similar Amounts	b		· -	1b						
פֿבּ	c	_		1c						
ifts	d			1d						
0.5	ו ו	_								
Siz	e			1e						
ĔĔ	'	All other contribution	ons, gπs, grants, s not included above	4.0		105				
50				_1f_		125				
52	9		ons included in lines 1a-	-1f	\$					
$\frac{\sigma}{\Omega}$	<u> </u>	Total. Add lin	es 1a-1f			<del>, •</del> -	125			
Program Service Revenue						Busn Code	225 445			
eve	2a		HIP DUES				207,415	<del>;</del>		
e R	b	LEADERS	HIP BEAVERTO	N MGM	T FEE	ļ	21,000	<del></del>		
ξ	C	WCVA -	TAX SHARE				6,066	6,066		
Se	d								<del></del>	
E E	е									
ğ	f	All other prog	ram service reve	nue						
<u>~</u>	g	Total. Add lin	es 2a-2f			<b>&gt;</b>	234,481			
	3	Investment in	come (including	dıvıder	nds, intere	est,				
		and other sim	ılar amounts)			▶ [	82			82
	4	Income from t	nvestment of tax	-exem	pt bond p	roceeds ▶				
	5	Royalties				▶				
			(ı) Real		(II) F	Personal				
	6a	Gross rents								
	b	Less rental exps							1	
	С	Rental inc or (loss)								
	d	Net rental inco				<b>•</b>				
	7a	Gross amount from			(11)	Other				
		sales of assets			\ <u>'''</u>					
	h	other than inventory Less cost or other								
						i				
	_	basis & sales exps								
		Gain or (loss)			<u> </u>	•				
	d	Net gain or (lo							·	<del></del>
ne	oa		om fundraising evei	nis						
Other Revenue		(not including \$								
Re			reported on line 1c)							
e		See Part IV, line		a		85,443				
盲		Less direct ex	-	ь[		37,312				
			(loss) from fund		events	<b></b>	48,131			45,470
	9a		om gaming activities	s						
		See Part IV, line		a						
İ		Less direct ex	•	b∤						
			(loss) from gam	ıng act	ivities	<b>•</b>				
	10a	Gross sales of	f inventory, less						1	
		returns and all	owances	a		12,548			†	
- 1	b	Less cost of g	joods sold	ь						
	С	Net income or	(loss) from sales	s of inv	entory	<b>•</b>	12,548		12,548	
			cellaneous Revenue			Busn Code				
Ì	11a	CERTIFICA	TES OF ORIGI	N			59,981	59,981	İ	
ļ	b		EOUS INCOME				1,356	1,356		
-	c						, <u> </u>			
ļ		All other reven	ue				· · · · · · · · · · · · · · · · · · ·	* *		
		Total. Add line			'	<b></b>	61,337			······································
			. See instruction	ıs		<b> </b>	356,704	295,818	12,548	45,552

Page 10

Part IX **Statement of Functional Expenses** 

Section 501(c)(3) and 501(c)(4) organizations must complete all columns	All other organizations must complete column (A) but are not
required to complete columns (B), (C), and (D)	

	Check if Schedule O contains a respons	e to any question in this Pa	irt IX		
Do	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	( <b>D</b> ) Fundraising
7b	, 8b, 9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	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,		<u></u>		
Ŭ	organizations, and individuals outside the				
	U S See Part IV, lines 15 and 16				
	•		<del></del>		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	05 070			
	trustees, and key employees	85,272	· · · · · · · · · · · · · · · · · · ·		
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	111,330			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	2,865			
9	Other employee benefits	18,032		_	
10	Payroli taxes	26,907			
11	Fees for services (non-employees)				
а	Management				
b	Legal				
-	Accounting	850			
٦	Lobbying				
ū	Professional fundraising services See Part IV, line 17	- "		· · · · · · · · · · · · · · · · · · ·	
T _	Investment management fees				
g	Other				
12	Advertising and promotion	14 163			
13	Office expenses	14,163			
14	Information technology	13,459			· · · · · · · · · · · · · · · · · · ·
15	Royalties	00.060	·		
16	Occupancy	33,368			
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	10,351			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	4,155	•		
23	Insurance	3,536			
24	Other expenses Itemize expenses not covered			***************************************	
	above (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)				
_	TELEPHONE & COMMUNICATION	6,371			
a	EQUIPMENT RENTALS	6,219			<u> </u>
Ь		4,976			<u> </u>
C	EDUCATION & TRAINING				
d	PUBLICATION EXPENSES	3,865		· · · · · · · · · · · · · · · · · · ·	
	All other expenses	5,149			
25	Total functional expenses. Add lines 1 through 24e	350,868	0	0	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation Check here ▶ ☐ if				
	following SOP 98-2 (ASC 958-720)				
DAA					Form <b>990</b> (2011)

	art )	Balance Sheet			-0423330	•	
				1	(A)		(B)
					Beginning of year		End of year
	1	Cash—non-interest bearing			18,900	1	39,628
	2	Savings and temporary cash investments		Ī	22,283		22,365
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			21,989	4	21,434
	5	Receivables from current and former officers, directors	s, trustees, key				
		employees, and highest compensated employees. Co		l			
		Schedule L	•	i	•	5	
	6	Receivables from other disqualified persons (as define	ed under section	[			
		4958(f)(1)), persons described in section 4958(c)(3)(B		ŀ			
		employers and sponsoring organizations of section 50					
ς,		employees' beneficiary organizations (see instructions		Ī		6	
Assets	7	Notes and loans receivable, net	,			7	
As	8	Inventories for sale or use			2,052	8	2,498
	9	Prepaid expenses and deferred charges			5,312	9	5,958
	10a	Land, buildings, and equipment cost or		ľ			
		other basis Complete Part VI of Schedule D	10a	84,529			
	b	Less accumulated depreciation	10b	81,116	7,569	10c	3,413
	11	Investments—publicly traded securities				11	
	12	Investments—other securities See Part IV, line 11		Γ		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)		78,105	16	95,296
	17	Accounts payable and accrued expenses		6,425	17	21,238	
ľ	18	Grants payable			18		
ĺ	19	Deferred revenue			88,220	19	84,762
ł	20	Tax-exempt bond liabilities		Ĺ		20	
	21	Escrow or custodial account liability Complete Part IV	of Schedule D			21	
န္မ	22	Payables to current and former officers, directors, trus	tees, key				
≝		employees, highest compensated employees, and dis-	qualified persons				
Liabilities		Complete Part II of Schedule L				22	···-
-	23	Secured mortgages and notes payable to unrelated the	ird parties			23	
- 1	24	Unsecured notes and loans payable to unrelated third	parties			24	
İ	25	Other liabilities (including federal income tax, payables	to related third	j		· .	
ļ		parties, and other liabilities not included on lines 17-24	) Complete Part X				
		of Schedule D		_		25	
	26	Total liabilities. Add lines 17 through 25			94,645	26	106,000
		Organizations that follow SFAS 117, check here ▶	X and complete				
ë		lines 27 through 29, and lines 33 and 34.					
틸	27	Unrestricted net assets		-	-16,540	27	-10,704
<u> </u>	28	Temporarily restricted net assets		-		28	
틸	29	Permanently restricted net assets	here ▶ and	ļ		29	
띠		Organizations that do not follow SFAS 117, check I	İ				
Net Assets or Fund Balances		complete lines 30 through 34.			-		
set	30	Capital stock or trust principal, or current funds	L		30		
¥	31	Paid-in or capital surplus, or land, building, or equipme		-		31	
ē ∤	32	Retained earnings, endowment, accumulated income,	or other funds	-	9,0 9,4	32	40 704
	33	Total net assets or fund balances		}	-16,540	33	-10,704
1	34	Total liabilities and net assets/fund balances			78,105	34	95,296

Form **990** (2011)

om	1 990 (2011) BEAVERTON AREA CHAMBER OF COMMERCE 93-0423398			Pa	ge <b>12</b>
Pa	ert XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			<u>704</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	3:		868
3	Revenue less expenses Subtract line 2 from line 1	3			<u>836</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		16,	<u>540</u>
5	Other changes in net assets or fund balances (explain in Schedule O)	5			
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		10,	<u>704</u>
Pá	irt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
			r	Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X	
b	Were the organization's financial statements audited by an independent accountant?		2b		X
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O				
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were				
	issued on a separate basis, consolidated basis, or both				
	X Separate basis Consolidated basis Both consolidated and separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		1 1		
	the Single Audit Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Fort	n 990	(2011)

### 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

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.

**Open to Public** Inspection

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

Section 501(c)(4), (5), or (6) organizations Complete Part 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 35c (Proxy Tax), then

Nar	me of organization	Employer identificat						
	BEAVERTON AREA CHAMBER OF COMMERCE	93-04233						
Pa	Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.							
1	Provide a description of the organization's direct and indirect political campaign activities in Part IV							
2	Political expenditures	▶ \$						
3	Volunteer hours							
Pai	rt i-B Complete if the organization is exempt under section 501(c)(3).							
1	Enter the amount of any excise tax incurred by the organization under section 4955	<b>▶</b> \$						
2	Enter the amount of any excise tax incurred by organization managers under section 4955	<b>▶</b> \$						
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?		Yes No					
4a	Was a correction made?		Yes No					
b	If "Yes," describe in Part IV							
Pa	rt I-C Complete if the organization is exempt under section 501(c), except section	on 501(c)(3).						
1	Enter the amount directly expended by the filing organization for section 527 exempt function							
	activities	<b>▶</b> \$						
2	Enter the amount of the filing organization's funds contributed to other organizations for 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 employer identification number (EIN) of all section 527 political organization	s to which the filing						
	organization made payments. For each organization listed, enter the amount paid from the filing organization	's funds Also enter						
	the amount of political contributions received that were promptly and directly delivered to a separate political	organization, such						
	as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide in	nformation in Part IV						
	(a) Name (b) Address (c) EIN	(d) Amount paid from	(e) Amount of political					
		filing organization's	contributions received and promptly and directly					
		funds If none, enter -0-	delivered to a separate					
			political organization If					
			none, enter -0-					
(1)								
(2)								
(2)								
(3)								
(4)								
(5)								
			<del> </del>					
(6)								

	, , , , , , , , , , , , , , , , , , , ,					
			CHAMBER OF		93-0423398	Page
Pa	rt II-A Complete if the organ	ization is exemp	t under section (	501(c)(3) and fi	led Form 5768 (ele	ection under
	section 501(h)). Check ▶ ☐ if the filing organizat	ion belongs to an	affiliated group (a	nd list in Part IV	/ each affiliated gro	un member's
`	name, address, EIN	•	• , ,			up member 5
3	Check ▶ ☐ if the filing organization				· · · · · · · · · · · · · · · · · · ·	
		bbying Expendi	<del></del>		(a) Filing	(b) Affiliated
	(The term "expenditures"				organization's totals	group totals
1a	Total lobbying expenditures to influence	public opinion (grass r	oots lobbying)			
b	Total lobbying expenditures to influence	a legislative body (dire	ect lobbying)			
C	: Total lobbying expenditures (add lines 1a	and 1b)			,,,	
d	Other exempt purpose expenditures					
е	Total exempt purpose expenditures (add	lines 1c and 1d)				
1	f Lobbying nontaxable amount Enter the a	mount from the follow	ving table in both			
ſ	columns	<del></del>				
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxal	ble amount is			
- }	Not over \$500,000	20% of the amount on Ir	ne 1e			
-	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	ne excess over \$500,000			
-	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of th	ne excess over \$1,000,000			
ŀ	Over \$1,500,000 but not over \$17,000,000		e excess over \$1,500,000	<del></del>	1	
	Over \$17,000,000	\$1,000,000		<del></del>		
g	Grassroots nontaxable amount (enter 25	•				
	Subtract line 1g from line 1a If zero or le			<del>                                     </del>		
	Subtract line 1f from line 1c If zero or les	•	. did the ermonimetical	L		
J	If there is an amount other than zero on a	eitner line in or line it	, did the organization i	ile Form 4/20		Yes No
	reporting section 4911 tax for this year?			<del></del>		165 140
			ng Period Under			
	(Some organizations th					he five
	columns be	low. See the ins	tructions for line	s 2a through 2	f on page 4.)	
	Lob	bying Expenditu	res During 4-Yea	r Averaging Pe	eriod	
	Calendar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	( <b>d)</b> 2011	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
С	Total lobbying expenditures					
d	Grassroots nontaxable amount					
е	Grassroots ceiling amount (150% of line 2d, column (e))					
				1		-

Schedule C (Form 990 or 990-EZ) 2011

f Grassroots lobbying expenditures

BEAVERTON AREA CHAMBER OF COMMERCE 93-0423398

Sched	ule C (Form 990 or 990-EZ) 2011 BEAVERTON AREA CHAMBER OF COMMERCE 93-0	<u>)423</u>	<u> 398</u>				Page
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has NOT	filed	Form	1 5768			
(election under section 501(h)).					(b)		
	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description e lobbying activity	Yes	No		Amou	ınt	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of						
а	Volunteers?	l					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  Media advertisements?						
d	Mailings to members, legislators, or the public?						
	Publications, or published or broadcast statements?						
f	Grants to other organizations for lobbying purposes?						
g	Direct contact with legislators, their staffs, government officials, or a legislative body?						
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?						
i	Other activities?						
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)?						
b	If "Yes," enter the amount of any tax incurred under section 4912						
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		Ļ		<del></del>		
<u>d</u>	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	<u>.                                    </u>					
Pa	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(501(c)(6).	c)(5),	or se	ction			
						Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			L	1		X
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			L	2	X	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?				3		X
Pa	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" Canswered "Yes."				line	3, is	s
1	Dues, assessments and similar amounts from members		1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of						
	political expenses for which the section 527(f) tax was paid).						
а	Current year		2a				
b	Carryover from last year		2b				
С	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						
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying						
	and political expenditure next year?		4				
5	Taxable amount of lobbying and political expenditures (see instructions)		5				

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, Part II-A, and Part II-B, line

1 Also, complete this part for any additional information

BEAVERTON AREA CHAMBER OF COMMERCE Schedule C (Form 990 or 990-EZ) 2011

93-0423398

Page 4

Part IV Supplemental Information (continued)

Schedule C (Form 990 or 990-EZ) 2011

### 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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Name of the organization Employer identification number BEAVERTON AREA CHAMBER OF COMMERCE 93-0423398 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year Total number of conservation easements 2a 2b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) Yes (i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenues included in Form 990, Part VIII, line 1

Scne	edule D (Form 990) 2011 BEAVERIO	N AREA CHA	MOEK	OF COM	MEKCE	33-U4.	43330			Page Z
Pź	art III Organizations Maintainir	g Collections o	f Art, H	istorical T	reasures, c	or Other	Similar A	ssets	(continue	d)
3	Using the organization's acquisition, access collection items (check all that apply)	sion, and other record	ls, check	any of the fol	lowing that are	e a significa	nt use of its			
а	Public exhibition	d	Loan or	exchange pro	grams					
b	Scholarly research	е 🗍	Other	- ,	_					
С	Preservation for future generations									
4	Provide a description of the organization's	collections and explai	n how the	ey further the	organization's	exempt pu	rpose in Par	t		
	XIV									
5	During the year, did the organization solicit	or receive donations	of art, his	storical treasu	res, or other s	ımılar				
	assets to be sold to raise funds rather than	to be maintained as	part of th	e organization	's collection?				Yes	☐ No
Pa	art IV Escrow and Custodial Ar	rangements. Co	mplete	if the organ	nization ans	wered "Y	es" to For	m 990	, Part IV,	
	line 9, or reported an amou	int on Form 990,	Part X,	line 21						
1a	Is the organization an agent, trustee, custo	dian or other intermed	diary for d	contributions of	or other assets	not				
	included on Form 990, Part X?								Yes	No
b	If "Yes," explain the arrangement in Part XI	V and complete the fe	ollowing t	able						
									Amount	
C	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on	Form 990, Part X, line	e 21?						Yes	No
<u>b</u>	If "Yes," explain the arrangement in Part XI	V								
Pa	art V Endowment Funds. Com	plete if the organi	zation a	answered "	Yes" to For	m 990, Pa	art IV, line	10		
		(a) Current year	(E	) Prior year	(c) Two year	s back	(d) Three years	s back	(e) Four yea	irs back
1a	Beginning of year balance									
b	Contributions									
C	Net investment earnings, gains, and									
	losses		ļ							
d	Grants or scholarships									
е	Other expenditures for facilities and					į				
	programs									
f	Administrative expenses									
g	End of year balance		<u> </u>							
2	Provide the estimated percentage of the cu	rrent year end baland	e (line 1g	g, column (a))	held as					
a	Board designated or quasi-endowment ▶	%								
b	Permanent endowment ▶ %									
С	Temporarily restricted endowment ▶	%								
	The percentages in lines 2a, 2b, and 2c sho	ould equal 100%								
3a	Are there endowment funds not in the possi	ession of the organiz	ation that	are held and	administered	for the				
	organization by								Ye	s No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organization	ns listed as required o	on Sched	ule R?					3b	
4	Describe in Part XIV the intended uses of the	e organization's end	owment f	unds	<u> </u>					
Pa	rt VI Land, Buildings, and Equ	ipment. See For	m 990,	Part X, line	10					
	Description of property	(a) Cost or other	basis	(b) Cost or o	ther basis	(c) Accu	ımulated		(d) Book valu	B
		(investment)		(othe	er)	depre	ciation			
1a	Land									
b	Buildings									
С	Leasehold improvements		]							
d	Equipment				84,529		81,116	5	3	,413
	Other							<u> </u>	<del></del>	
otal	I. Add lines 1a through 1e (Column (d) must	equal Form 990, Par	t X, colur	nn (B), line 10	)(c) )			<u>·                                     </u>	3	<u>,413</u>
							_			

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Part VII	orm 990) 2011 BEAVERTON AREA CHAMBE Investments—Other Securities. See Form 990	Part X line 12	E 93-0423398	
L WIT A11	(a) Description of security or category	(b) Book value	(c) Method of	valuation
	(including name of security)	(b) Book value	Cost or end-of-year	
(1) Financial of				
	ld equity interests			
(3) Other	io equity interests			
		,		
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				<del></del>
(H)				
(1)	<del></del>			
	n (b) must equal Form 990, Part X, col. (B) line 12.)			·
Part VIII	Investments—Program Related. See Form 990	), Part X, line 13		
	(a) Description of investment type	(b) Book value	(c) Method of Cost or end-of-yea	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)		<u> </u>		
(10)		· · · · · · · · · · · · · · · · · · ·	*	
	n (b) must equal Form 990, Part X, col (B) line 13)			
Part IX	Other Assets. See Form 990, Part X, line 15	1	<u> </u>	<del></del>
I dit ix	(a) Description			(b) Book value
(1)	(4) 5004. p.to.			
(1)				
(2)				
_(3)				
_(4)				
(5)				
(6)				
(6) (7)				
(6) (7) (8)				
(6) (7)				
(6) (7) (8) (9) (10)				
(6) (7) (8) (9) (10) <b>Total.</b> (Column	n (b) must equal Form 990, Part X, col (B) line 15)		<b>&gt;</b>	
(6) (7) (8) (9) (10)	n (b) must equal Form 990, Part X, col. (B) line 15.) <b>Other Liabilities.</b> See Form 990, Part X, line 25		•	
(6) (7) (8) (9) (10) <b>Total.</b> (Column		(b) Book value		
(6) (7) (8) (9) (10) Total. (Column Part X 1.	Other Liabilities. See Form 990, Part X, line 25	(b) Book value	<b>•</b>	
(6) (7) (8) (9) (10) Total. (Column Part X 1. (1) Federal	Other Liabilities. See Form 990, Part X, line 25 (a) Description of liability	(b) Book value	<b>&gt;</b>	
(6) (7) (8) (9) (10)  Total. (Column Part X  1. (1) Federal (2)	Other Liabilities. See Form 990, Part X, line 25 (a) Description of liability	(b) Book value	<b>&gt;</b>	
(6) (7) (8) (9) (10) Total. (Column Part X 1. (1) Federal (2) (3)	Other Liabilities. See Form 990, Part X, line 25 (a) Description of liability	(b) Book value	<b>&gt;</b>	
(6) (7) (8) (9) (10)  Total. (Column  Part X  1. (1) Federal (2) (3) (4)	Other Liabilities. See Form 990, Part X, line 25 (a) Description of liability	(b) Book value		
(6) (7) (8) (9) (10)  Total. (Column Part X  1. (1) Federal (2) (3) (4) (5)	Other Liabilities. See Form 990, Part X, line 25 (a) Description of liability	(b) Book value		
(6) (7) (8) (9) (10)  Total. (Column Part X  1. (1) Federal (2) (3) (4) (5) (6)	Other Liabilities. See Form 990, Part X, line 25 (a) Description of liability	(b) Book value		
(6) (7) (8) (9) (10)  Total. (Column Part X  1. (1) Federal (2) (3) (4) (5) (6) (7)	Other Liabilities. See Form 990, Part X, line 25 (a) Description of liability	(b) Book value		
(6) (7) (8) (9) (10)  Total. (Column Part X  1. (1) Federal (2) (3) (4) (5) (6) (7) (8)	Other Liabilities. See Form 990, Part X, line 25 (a) Description of liability	(b) Book value		
(6) (7) (8) (9) (10)  Total. (Column  Part X  1. (1) Federal (2) (3) (4) (5) (6) (7) (8) (9)	Other Liabilities. See Form 990, Part X, line 25 (a) Description of liability	(b) Book value	<b>&gt;</b>	
(6) (7) (8) (9) (10)  Total. (Column  Part X  1. (1) Federal (2) (3) (4) (5) (6) (7) (8) (9) (10)	Other Liabilities. See Form 990, Part X, line 25 (a) Description of liability	(b) Book value		
(6) (7) (8) (9) (10)  Total. (Column  Part X  1. (1) Federal (2) (3) (4) (5) (6) (7) (8) (9) (10) (11)	Other Liabilities. See Form 990, Part X, line 25  (a) Description of liability Income taxes	(b) Book value		
(6) (7) (8) (9) (10)  Total. (Column  Part X  1. (1) Federal (2) (3) (4) (5) (6) (7) (8) (9) (10) (11)  Total. (Column  Total. (Column	Other Liabilities. See Form 990, Part X, line 25  (a) Description of liability Income taxes  (b) must equal Form 990, Part X, col (B) line 25)			
(6) (7) (8) (9) (10) Total. (Column Part X  1. (1) Federal (2) (3) (4) (5) (6) (7) (8) (9) (10) (11) Total. (Column 2. FIN 48 (AS	Other Liabilities. See Form 990, Part X, line 25  (a) Description of liability Income taxes			

Sche	edule D (Form 990) 2011 BEAVERTON AREA CHAMBER OF COMMERCE 93-042339	8	Page 4
Pá	art XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statem	ents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV )	8	
9	Total adjustments (net) Add lines 4 through 8	9	<u> </u>
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	
Pa	art XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Ref	turn	
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities 2b		
C	Recoveries of prior year grants 2c		
d	Other (Describe in Part XIV )		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
þ	Other (Describe in Part XIV )		
С	Add lines 4a and 4b	4c	
5		5	
Pa	art XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per R	<u>letur</u>	'n
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities 2a 2a		
b	Prior year adjustments 2b		
С	Other losses 2c		
	Other (Describe in Part XIV )		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
	Other (Describe in Part XIV )		
С	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18)	5	

art XIV Supplemental Information

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

#### Part X - FIN 48 Footnote

The Chamber files income tax returns in the U.S. federal jurisdiction and Oregon. The Chamber is no longer subject to U.S. federal and state income tax examinations by tax authorities for years before 2008.

The Chamber follows the provisions of uncertain tax positions as addressed in FASB Accounting Standards Codification 740-10-65-1. The

Part XIV Supplemental Information (continued)

Chamber recognized no increase in the liability for unrecognized tax benefits. The Chamber has no tax position at December 31, 2011 for which the ultimate deductibility is highly certain but for which there is uncertainty about the timing of such deductibility. The Chamber recognizes interest accrued related to unrecognized tax benefits in interest expense and penalties in operating expenses. No such interest or penalties were recognized during the periods presented. The Chamber had no accruals for interest and penalties at December 31, 2011.

### 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.

2011
Open to Public Inspection

Name of the organization

### BEAVERTON AREA CHAMBER OF COMMERCE

Employer identification number 93 - 0423398

Form 990, Part V - Additional Information

LINE 2A - EMPLOYEES ARE LEASED FROM ANOTHER COMPANY; NO W-3'S FOR BACC

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

THE 990 IS PREPARED BY A PUBLIC ACCOUNTING FIRM, REVIEWED BY THE PRESIDENT,

AND CIRCULATED TO ALL BOARD MEMBERS FOR REVIEW PRIOR TO IRS SUBMISSION.

Form 990, Part VI, Line 15a - Compensation Process for Top Official COMPENSATION FOR THE PRESIDENT/EXECUTIVE DIRECTOR IS PREPARED BY AN EXECUTIVE BOARD SUBCOMMITTEE.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation AVAILABLE FOR BOARD REVIEW.