

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



Form **990**

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 private foundations)

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

			endar year, or tax year beginning C Name of organization	g 04-01-2013 , 2013, and ending 0	3-31-2014	D Emple	over iden	itification number
	:ск іг ар ress cha	plicable ange	EL DORADO CHAMBER OF COMMERC	CE			029610	
_	ne chan	_	Doing Business As			71-0	029610	,
	al returr	_	Number and street (or P.O. box if m	all is not delivered to street address) Room	\/suito			
Terr	minated		PO BOX 10836	all is not delivered to street address) Room	i/ suite	E Teleph	none numb	per
Ame	ended re	eturn	City or town, state or province, cour	ntry, and ZIP or foreign postal code		(870)863-6	113
		pending	EL DORADO, AR 71730			G Gross	receipts \$	467 659
, , , ,		, , ,	F Name and address of prin	icipal officer	H(a)			•
			JEREMY STRATTON			Is this a group subordinates?		┌ Yes ┌ No
			111 W MAIN EL DORADO,AR 71730		ши	سمعانيمالمسم		┌ Yes ┌ No
			·			Are all subord included?	imates	j resj No
I Tax	r-exemp	pt status	「 501(c)(3)	insert no) 4947(a)(1) or 527	:	If "No," attac	h a list ((see instructions)
J W	ebsite:	► ww	/W GOELDORADO COM		H(c)	Group exemp	tion num	nber ►
K Form	n of orga	anızatıon	Corporation Trust Associatio	n	L Year	r of formation 1	921 M	State of legal domicile AR
Pai	rt I	Sum	mary					
e e			escribe the organization's mission NITY DEVELOPMENT	n or most significant activities				
Governance	- - 2 C	heck th	nis box 🔰 if the organization di	scontinued its operations or dispose	ed of more th	nan 25% of it:	s net ass	sets
5 5			,	, , , , , , , , , , , , , , , , , , , ,				
2 5				ing body (Part VI, line 1a)			3	46
ĕ			· -	of the governing body (Part VI, line	· ·		4	46
Activities				calendar year 2013 (Part V, line 2a ecessary)			5 6	8
द				art VIII, column (C), line 12			7a	0
				rom Form 990-T, line 34			7a 7b	0
	<u> </u>					Prior Year	<u> </u>	Current Year
	8	Contri	butions and grants (Part VIII, lii	ne 1 h)	_		,886	310,236
횰	9		ım service revenue (Part VIII, li		199		157,423	
Revenue	10			(A), lines 3, 4, and 7d)			0	0
~~	11			lines 5, 6d, 8c, 9c, 10c, and 11e)			0	0
	12			(must equal Part VIII, column (A),	line	F 3.0	407	467.650
	13			IX, column (A), lines 1-3)		528	,497 0	467,659
	14			X, column (A), line 4)			0	0
	15			ee benefits (Part IX, column (A), line				
82	13	5-10)		to benefits (vare1x, column (x), inc		323	,647	303,229
Expenses	16a	Profes	sional fundraising fees (Part IX,	column (A), line 11e)			0	0
ਡੀ	b	Total fu	ndraısıng expenses (Part IX, column (D)), line 25) 🕨 0	_			
_	17	Other	expenses (Part IX, column (A), !	ınes 11a-11d, 11f-24e)		212	,620	183,892
	18			st equal Part IX, column (A), line 25			,267	487,121
. 02	19	Reven	ue less expenses Subtract line	18 from line 12			,770	-19,462
Not Assets or Fund Balances					Begi	nning of Curre Year	ent	End of Year
See	20	Totala	assets (Part X, line 16)			205	,000	302,313
절	21	Totall	iabilities (Part X, line 26)			40	,826	199,154
žÏ	22	Net as	sets or fund balances Subtract	line 21 from line 20		164	,174	103,159
Par	t II	Sign	ature Block					
my kn	owled	ge and l		amined this return, including accomplete Declaration of preparer (othe				
	1	****	**			2014-11-14		
Sign			ature of officer			Date		
Here		JERE	MY STRATTON PRESIDENT & CEO					
		Туре	or print name and title					
	•		rint/Type preparer's name TACY D SCROGGINS	Preparer's signature	Date	Check / If	PTIN P00773	646
Paid	I	<u> </u>	im's name	LLP CPA'S		self-employed		

Firm's address ► 100 EAST PEACH SUITE 330

EL DORADO, AR 717305874

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

Preparer

Use Only

Phone no (870) 862-6510

✓ Yes ☐ No

age	2
-----	---

Form	990 (2013)				Page 2
Par		nt of Program Service A hedule O contains a response	Accomplishments or note to any line in this Part III		
1	Briefly describe th	e organization's mission			
		NITY DEVELOPMENT THRO NOMIC DEVELOPMENT	UGH ACTIVITIES TO BENEFIT IT	S MEMBERSHIP AND LOCAL	COMMUNITY AS
2	the prior Form 990	or 990-EZ?	rogram services during the year wh		┌ Yes ┌ No
	•	these new services on Sched			
3	services?			cts, any program	┌ Yes ┌ No
	If "Yes," describe	these changes on Schedule C)		
4	expenses Section		complishments for each of its three anizations are required to report the i program service reported		
4a	(Code) (Expenses \$	487,122 including grants of \$) (Revenue \$)
	TEACHER BREAKFAST COMMUNITYMEMBER	FOR COMMUNITY'S PUBLIC SCHOOL	IUAL COMMUNITY CHRISTMAS PARADE, ANN DISECONOMIC DEVELOPMENT ACTIVITIES, II DING ANNUAL MEETING, PUBLISHING OF ME DINESSES	NCLUDING RECRUITING NEW PROSPE	ECTS TO
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4 c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4d		rvices (Describe in Schedule			
	(Expenses \$		g grants of \$) (Revenue \$)
4e	Total program sei	vice expenses 🕨	487,122		

			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		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? $^{f colored}$	2	Yes	
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^{\bullet}	3		No
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? <i>If "Yes," complete Schedule C, Part II</i>	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	Yes	
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? <i>If "Yes," complete Schedule D, Part I</i>	6		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> 😼	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, 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^{\square}	9		N o
10	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		No
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			
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	Yes	
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		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
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	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
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.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
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 and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Νο
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, 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		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> "Yes," complete Schedule F, Parts III and IV	16		No
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 $11e^{2}$ If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		N o
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		-

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or 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		No
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? <i>If "Yes," complete Schedule J.</i>	23		No
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 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</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		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
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 entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			
		28a		Νo
U	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Νo
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		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Νo
b	If 'Yes' to line 35a, 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	35b		
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

	Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V		Yes	.) No
.a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 1		163	140
	Enter the number of Forms W-2G included in line 1a Enter-0- if not applicable 1b 0	1		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
•	gaming (gambling) winnings to prize winners?	1c	Yes	
	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	1		
1	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
ı	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		N
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
1	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		N
	If "Yes," enter the name of the foreign country 🕨			
ı	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
	1. 163, to line 3d of 3D, and the organization metrorin 0000-1.	5с		L
1	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 as charitable contributions?	6a		N
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c). 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		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
		1		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	70		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	<u> </u>		
	required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7h		
	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?			
		8		\vdash
	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 49662	0-		
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter Instruction focal and constal contributions unallyded on Bort VIII. line 12			
	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources	1		
	against amounts due or received from them)....................................			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year	1		
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
ı	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			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	İ	l N
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h	1	

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

													$\overline{}$
Check if Schedule O c	ontains a response o	or note to any li	ne in this Part VI	_	 _	_	 _	_	_	_	_	_	~

36	ection A. Governing Body and Management			
			Yes	No No
1 a	Enter the number of voting members of the governing body at the end of the tax year	46		
	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			
b	Enter the number of voting members included in line 1a, above, who are independent	46		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with an other officer, director, trustee, or key employee?	/ ₂		No
3		3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	+	No
6	Did the organization have members or stockholders?	6	Yes	
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one of	or 7a		No
h	more members of the governing body?		_	No No
	or persons other than the governing body?	15, 70		110
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	<u> </u>
b	,,,,,	. 8b	Yes	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at organization's mailing address? If "Yes," provide the names and addresses in Schedule O	the 9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Interna	l Reve	านe Co	ode.)
			Yes	No No
10a	Did the organization have local chapters, branches, or affiliates?	10 a		No No
	Did the organization have local chapters, branches, or affiliates?	10a	1	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	101)	
b 11a	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before fil	10 l)	No
b 11a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before fil the form?	10 l		No
b 11a b 12a	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before fil the form?	10ting 11a		No No
b 11a b 12a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before fil the form?	10t 11a		No No
b 11a b 12a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filt the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," described to the process of the policy? If "Yes," described to the policy? If "Yes," described to the process of the policy? If "Yes," described to the process of the policy? If "Yes," described to the process of the policy? If "Yes," described to the process of the policy? If "Yes," described to the process of the policy? If "Yes," described to the process of the policy? If "Yes," described to the process of	10t 11a 12a 12t be . 12c		No No
b 11a b 12a b c	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filt the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," descrint Schedule O how this was done Did the organization have a written whistleblower policy?	10k 11a 12a 12k be 12a 13		No No No No
b 11a b 12a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filt the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describedule O how this was done Did the organization have a written whistleblower policy? Did 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	10ting 11a		No No
b 11a b 12a c 13 14	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filthe form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," descriin Schedule O how this was done Did the organization have a written whistleblower policy? Did 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	10k 11a 12a 12k be 12a 13 14		No No No No No
b 11a b 12a c 13 14 15	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filthe form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describedule O how this was done Did the organization have a written whistleblower policy? Did 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 The organization's CEO, Executive Director, or top management official	10k 11a 12a 12k be 12a 13 14	Yes	No No No No No
b 11a b 12a c 13 14 15	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filthe form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," described to how this was done. Did the organization have a written whistleblower policy? Did 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. The organization's CEO, Executive Director, or top management official.	10k 11a 12a 12k be 12a 13 14	Yes	No No No No No
b 11a b 12a c 13 14 15 a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before fil the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe the organization have a written whistleblower policy? Did the organization have a written whistleblower policy? Did 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. The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	10k 11a 12a 12k be 12a 13 14	Yes	No No No No No
b 11a b 12a c 13 14 15 a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filthe form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describedule O how this was done Did the organization have a written whistleblower policy? Did 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. The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with taxable entity during the year?	10k 11a 12a 12k be 12a 13 14	Yes	No No No No No
b 11a b 12a c 13 14 15 a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before fil the form?	10k 11a 12a 12k be 12a 13 14	Yes	No No No No No No
b 11a b 12a c 13 14 15 a b 16a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filthe form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," described the organization have a written whistleblower policy? Did 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. The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with taxable entity during the year? 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	10t 11a 12a 12a 12a 12a 12a 12a 12a 12a 12a	Yes	No No No No No No
b 11a b 12a c 13 14 15 a b 16a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before fil the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describedule O how this was done Did the organization have a written whistleblower policy? Did 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. The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with taxable entity during the year? 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 organization's exempt status with respect to such arrangements?	10t 11a 12a 12a 12a 12a 12a 12a 12a 12a 12a	Yes	No No No No No No

- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 - Own website Another's website Upon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►EMRICH & SCROGGINS LLP 100 EAST PEACH SUITE 330 EL DORADO, AR 71730 (870)862-6510

Form 990	(2013	
----------	-------	--

_				_
D	-	α	Δ	4
г	a	ч	_	•

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

Check if Schedule O contains a response or note to any line 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, or 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 nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more t	han o	one l both	box, an d r/tru	heck sofficer (stee) Highest compensated	Former	(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

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

	(A) Name and Title	(B) A verage hours per week (list any hours	more t	han o n is	ne l both	oox, an d	heck unless officer stee)	S	(D) Reportable compensation from the organization (W- 2/1099-MISC)		(E) Reportable compensation from related organizations (W	. -			
		for related organizations below dotted line)	Individual trusties or director	Institutional Trustee	Officei	Ke) employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)		ganizati relate organiza	d	
												-			
												+			
1b	Sub-Total							 							
C	Total from continuation sheet	s to Part VII, S	ection A	١.		•	•	•							
d	Total (add lines 1b and 1c) .				•	•		-		72,922		0		3,576	
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) w	ho receive	d more th	an				
											-		Yes	No	
3	Did the organization list any f oon line 1a? <i>If "Yes," complete S</i>					key •	emplo	yee	, or highes	t compen	sated employee	2		N -	
4	For any individual listed on line	e 1a, is the sum	of repo	rtabl	e co							3		No_	
	organization and related organ individual	izations greater	than \$:	150,	.000	' If '	"Yes,"	comp •	viete Schedi	ule J for s	uch	4		No	
5	Did any person listed on line 1 services rendered to the organ										or individual for	5		N.a	
			,						-	- •		<u> </u>		No_	
Se1	ection B. Independent Co Complete this table for your five		ensate	d inde	epen	dent	t contr	acto	rs that rec	eived mo	re than \$100.000	of			
	compensation from the organiz	zation Report co									thin the organizati			.	
	N	(A) lame and business	address							Des	(B) cription of services	\perp	(C Comper		
												\pm			
												+			

2 Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization $\blacktriangleright 0$

Part V	4 🛊 🖠 1	Statement o	f Revenue ule O contains a respon	se or note to any lin	ne in this Part VIII			
		Check if Select	are o contains a respon	Se of field to diffy fi	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
u 2	1a	Federated cam	paigns 1a					
ant	ь	Membership du	es 1b	198,182				
Gra mo	c	Fundraising eve	ents 1c					
ξ. A	_	_						
Gif ila⊔	d	_	rations 1d					
Contributions, Gifts, Grants and Other Similar Amounts	е	Government grants	s (contributions) 1e	60,000				
tio Pr.S	f	All other contribution	ons, gifts, grants, and 1f	52,054				
ibu ¥	a		ons included in lines	ł		i		
nt d C		1a-1f \$						
Cont and	h	Total. Add lines	s 1a-1f	· · · •	310,236			
e				Business Code				
nua	2a	MANAGEMENT FEE	S	541610	60,000	60,000		
Pæ√	b	SPONSORSHIPS		711300	51,433	51,433		
- Ce	С	REGISTRATION/AD	MISSION	900099	43,501	43,501		
erv	d							
S .	e							
Program Serwce Revenue	f	All other progra	ım service revenue		2,489	2,489		
<u>چ</u>	g	Total Add lines	 		157,423			
	3		ome (including divident		137,123			
		and other simila	aramounts)	• [
	4		tment of tax-exempt bond p	· · · · ·				
	5	Royalties		· · · •				
		C	(ı) Real	(II) Personal				
	6a b	Gross rents Less rental						
	6	expenses						
	C	Rental income or (loss)						
	d	Net rental inco	me or (loss)					
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of						
		assets other than inventory						
	ь	Less cost or other basis and						
		sales expenses						
	С	Gain or (loss)					1	
	d		s)					
nue	8a	Gross income f events (not inc	luding					
Other Revenue		of contributions See Part IV, lin	reported on line 1c) le 18 a					
the	Ь	Less direct ex	penses b					
Ò	С	Net income or (loss) from fundraising	events				
	9a		rom gaming activities					
		See Part IV, IIII	e 19 a l					
	ь	Less direct ex	penses b					
			ا (loss) from gamıng actı	/ities				
	10a	Gross sales of						
		returns and allo						
	h	Less cost of go	a a					
		=	oods sold . . b	entory				
	<u> </u>	Miscellaneous		Business Code				
	11a		·					
	ь	_						
	c							
	d	All other reven	ue					
	e		s 11a-11d	🕨				
				-				
	12	iotai revenue.	See Instructions	• • • ▶				_

Part IX Statement of Functional Expenses

ection 501(c)(3) and 501(c)(4) organizations must complete all columns /	All other organizations must complete column (A)

	Check if Schedule O contains a response or note to any line in this Part IX											
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses							
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21											
2	Grants and other assistance to individuals in the United States See Part IV, line 22											
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16											
4	Benefits paid to or for members											
5	Compensation of current officers, directors, trustees, and key employees	72,922										
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	168,252										
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	8,736										
9	Other employee benefits	31,744										
10	Payroll taxes	21,575										
11	Fees for services (non-employees)											
а	Management											
b	Legal											
C	Accounting	16,852										
d	Lobbying											
e	Professional fundraising services See Part IV, line 17											
f	Investment management fees											
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)											
12	Advertising and promotion											
13	Office expenses	3,003										
14	Information technology	6,241										
15	Royalties											
16	Occupancy	8,400										
17	Travel											
18	Payments of travel or entertainment expenses for any federal, state, or local public officials											
19	Conferences, conventions, and meetings											
20	Interest											
21	Payments to affiliates											
22	Depreciation, depletion, and amortization	424										
23	Insurance											
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)											
а	CHAMBER PROGRAM EXPENSE	81,088										
b	POSTAGE	15,262										
c	STAFF DEVELOPMENT	6,953										
d	TELEPHONE	6,822										
e	All other expenses	38,847										
25	Total functional expenses. Add lines 1 through 24e	487,121										
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)											

Form 990 (2013)

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X			· ·
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	204,576	1	208,871
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	92,742
ts	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6	Loans and other 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) Complete Part II of Schedule L		6	
assets	7	Notes and loans receivable, net		7	
₹	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	700
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 85,625	5		
	ь	Less accumulated depreciation 10b 85,625	424	10c	О
	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)	205,000		302,313
	17	Accounts payable and accrued expenses	4,930		16,238
	18	Grants payable	,	18	,
	19	Deferred revenue		19	124,519
	20	Tax-exempt bond liabilities		20	,
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
lities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
Liabili		persons Complete Part II of Schedule L		22	
ï	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule			
		D	35,896	25	58,397
	26	Total liabilities. Add lines 17 through 25	40,826	26	199,154
σ		Organizations that follow SFAS 117 (ASC 958), check here ▶ 🌾 and complete lines 27 through 29, and lines 33 and 34.			
Š	27	Unrestricted net assets	164,174	27	103,159
<u>≃</u>	28	Temporarily restricted net assets		28	,-2
=	29	Permanently restricted net assets		29	
Assets of Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 30 through 34.			<u> </u>
ō o	30	Capital stock or trust principal, or current funds		30	
ξ	31	Paid-in or capital surplus, or land, building or equipment fund		31	
S.	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	164,174	33	103,159
Ĕ	33	Total liabilities and net assets/fund halances	205,000		302 313

	330 (2013)			ľ	age 12
Par	t XI Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				
	<u> </u>				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		4	167,659
2	Total expenses (must equal Part IX, column (A), line 25)	2		4	187,121
3	Revenue less expenses Subtract line 2 from line 1	3			-19,462
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) \cdot .	4		1	L64,174
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			-41,553
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		1	103,159
Par	t XII Financial Statements and Reporting	<u> </u>			
	Check if Schedule O contains a response or note to any line in this Part XII				. ᅜ
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep basis, consolidated basis, or both	arate			
	▼ Separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of the	2c		No
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	n			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	ie	3a		No
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		

Software ID: Software Version:

EIN: 71-0029610

Name: EL DORADO CHAMBER OF COMMERCE

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Form 990, Part VII - Compensation Compensated Employees, and Inde				ıru	ste	es, ı	кеу	Employees, Higi	nest	
(A) Name and Title	(B) A verage hours per week (list any hours for related			(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				
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2,2033 11300)	2,1000	related organizations
BILL LUTHER	8 00	х						0	0	0
IMMEDIATE PAST CHAIR FELISHA AARON	1 00									
BOARD MEMBER		Х						0	0	0
EDWIN ALDERSON BOARD MEMBER	1 00	х						0	0	0
SAM ALLEN	1 00	х						0	0	0
JOHN BAINE	1 00									
BOARD MEMBER AUSTIN BARROW	1 00	×						0	0	0
BOARD MEMBER	1 00	х						0	0	0
ALEXANDRA BELL	1 00	х						0	0	0
BOARD MEMBER THOMAS BURGER	1 00	×						0	0	0
BOARD MEMBER BRUCE BUTTERFIELD	1 00									
BOARD MEMBER		Х						0	0	0
TREY CLARK BOARD MEMBER	1 00	×						0	0	О
SCOTT FIFE	1 00	х						0	0	0
BOARD MEMBER GEORGE GARTEN	1 00	Х						0	0	0
BOARD MEMBER ANGELA GATES	1 00	,,								
BOARD MEMBER MARK GIVENS	1 00	×						0	0	0
BOARD MEMBER		х						0	0	0
PAM GRIFFIN	1 00	х						0	0	0
TREASURER DON HALE	1 00	×						0	0	0
BOARD MEMBER KELLI HARRISON	1 00							_		
BOARD MEMBER	1.00	×						0	0	0
FRANK HASH BOARD MEMBER	1 00	х						0	0	О
JAY HELM	1 00	х						0	0	0
MARY HOSTETTER	1 00	×						0	0	0
BOARD MEMBER BARBARA JONES	1 00									
BOARD MEMBER CHARLIE CLARK	1.00	×						0	0	0
BOARD MEMBER	1 00	х						0	0	0
MIKE LOFTIN BOADD MEMBED	1 00	х						0	0	0
BOARD MEMBER CHRIS LUTMAN	1 00	Х						0	0	0
BOARD MEMBER ALICE MAHONY	1 00									
BOARD MEMBER]	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more th perso and a	ion (d nan oi n is b	ne bo oth a ctor/	ox, u an of trus	inless fficer tee)		(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	
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1033 MISC)	2/1033 14130)	related organizations	
JAMIE MCCONATHY	1 00	X						0	0	0	
BOARD MEMBER ALAN MEADOWS	1.00										
	1 00	×						0	0	0	
BOARD MEMBER JIM MOORE	1 00										
BOARD MEMBER		X						0	0	0	
RAY NOLAN	1 00	.						_			
BOARD MEMBER		Х						0	0	0	
ROBERT REYNOLDS	1 00	х						0	0	0	
BOARD MEMBER								Ů			
DAN ROBLEE	1 00	×						0	0	0	
SECRETARY JOHN THOMAS SHEPHERD	1.00										
	1 00	×						0	0	0	
BOARD MEMBER MATTHEW SHEPHERD	1 00	-									
BOARD MEMBER		×						0	0	0	
CARL SIVILS	1 00										
BOARD MEMBER		X						0	0	0	
WOODY SLEIMAN	1 00	Х						0	0	0	
BOARD MEMBER								Ů	0	<u> </u>	
JAY STAGGS	1 00	×						0	0	0	
BOARD MEMBER KYLE SWIFT	1.00										
	1 00	×						0	0	0	
BOARD MEMBER JEFF TEAGUE	1 00										
BOARD MEMBER		×						0	0	0	
JILL TEMPLE	1 00										
BOARD MEMBER		X						0	0	0	
JIM TIDWELL	1 00	Х						0	0	0	
CHAIRMAN								Ů	, , , , , , , , , , , , , , , , , , ,		
RAY TRAYLOR	1 00	×						0	0	0	
BOARD MEMBER JIM TUCKER	1.00										
	1 00	×						0	0	0	
BOARD MEMBER ROBERT WAGGONER	1 00	-									
CHAIR ELECT		×						0	0	0	
CHRIS WEBB	1 00										
BOARD MEMBER		×						0	0	0	
GREG WITHROW	1 00	Ţ								0	
BOARD MEMBER		Х						0	0	0	
HENRY FLORSHEIM	40 00			X				62,067	0	3,033	
PRESIDENT & CEO								==,=3,			
JEREMY STRATTON	40 00			х				10,855	0	543	
PRESIDENT & CEO	J							<u> </u>			

DLN: 93493321110154

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

► See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

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-FZ, Part V, line 35c (Proxy Tax), then

	me of the organization DORADO CHAMBER OF COMMERCE			Em	ployer iden	ntification number
	SOKADO CHAMBER OF COMMERCE			71-	0029610	
Par	t I-A Complete if the or	ganization is exempt under	section 501(c) or is a sec	tion 527	organization.
1	Provide a description of the org	ganızatıon's dırect and ındırect politi	cal campaign act	ivities in Part IV		
2	Political expenditures				.	\$
3	Volunteer hours					
Par	Complete if the or	ganization is exempt under	section 501(c)(3).		
1		e tax incurred by the organization un			>	\$
2	•	tax incurred by organization manag			.	\$
3	•	ection 4955 tax, did it file Form 477				☐ Yes ☐ No
4a	Was a correction made?	· ·	·			┌ Yes ┌ No
b	If "Yes," describe in Part IV					
Par	t I-C Complete if the or	ganization is exempt under	section 501(c), except se	ction 50)1(c)(3).
1	Enter the amount directly expe	nded by the filing organization for se	ection 527 exemp	ot function activi	ties 🕨	\$
2		rganization's funds contributed to o	ther organizations	s for section 527		
	exempt function activities				•	\$
3	Total exempt function expendit	tures Add lines 1 and 2 Enter here	and on Form 112	0-POL, line 17b	>	\$
4	Did the filing organization file F	form 1120-POL for this year?				☐ Yes ☐ No
5	Enter the names, addresses ar organization made payments F amount of political contributior separate segregated fund or a	nızatıon's lıtıcal orga	funds Also enter the anization, such as a			
	(a) Name	(b) Address	(c) EIN	(d) A mount filing organi funds If none	zatıon's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
			1			†

Sch	nedule C (Form 990 or 990-EZ) 2013					Page 2
Pä	art II-A Complete if the organization	is exempt under	section 501(c)(3) and file	ed Form 5768	
_	under section 501(h)).		Link in Doub TV an	- h - 66:1: - h - d		a adduces FIN
٠.	Check ► If the filing organization belongs to a expenses, and share of excess lobb		iist in Part IV ea	ch amiliated gro	up members nam	e, address, EIN,
3	Check ► ☐ If the filing organization checked bo		l" provisions app	ly		
	Limits on Lobbying E (The term "expenditures" means ar		l .)		(a) Filing organization's totals	(b) Affiliated group totals
La	Total lobbying expenditures to influence public o	pinion (grass roots lob	bying)			
ь	Total lobbying expenditures to influence a legisl	ative body (direct lobby	yıng)			
c	Total lobbying expenditures (add lines 1a and 1	o)		Γ		
d	O ther exempt purpose expenditures			Γ		
e	Total exempt purpose expenditures (add lines 1	c and 1d)		Γ		
f	Lobbying nontaxable amount Enter the amount is columns					
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	00		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,0	000		
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25% of lir	ue 1f)				
h	Subtract line 1g from line 1a If zero or less, ent	er-0-				
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -				
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file	Form 4720 repo	orting	┌ Yes ┌ No
	(Some organizations that made a columns below. See t	he instructions fo	ection do not r lines 2a thro	havè to con ough 2f on p		ne five
	Lobbying Exp	enditures During	4-Year Avera ⊤	ging Period	1	1
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
C	Total lobbying expenditures					
d	Grassroots nontaxable amount					

e Grassroots ceiling amount (150% of line 2d, column (e))

Grassroots lobbying expenditures

	pach "Vee" recognize to lines to through to below r	arounds in Part IV a detailed description of the lebbying	(a	1)	(1	b)
	each "Yes" response to lines la through li below, p /ity.	rovide in Part IV a detailed description of the lobbying	Yes	No	Amo	ount
-	legislation, including any attempt to influence through the use of	empt to influence foreign, national, state or local public opinion on a legislative matter or referendum,				
a	Volunteers?					
)		ion in expenses reported on lines 1c through 1i)?				
:	Media advertisements?					
ı	Mailings to members, legislators, or the public Publications, or published or broadcast states	-				
e F	Grants to other organizations for lobbying pur	<u> </u>				
		·				
) 1	Direct contact with legislators, their staffs, go Rallies, demonstrations, seminars, conventio					
•	Other activities?					
	Total Add lines 1c through 1i	-				
	_	tion to be not described in section 501(c)(3)?	ı			
,	If "Yes," enter the amount of any tax incurred					
2		by organization managers under section 4912				
	If the filing organization incurred a section 49		I			
		n is exempt under section 501(c)(4), section 5	501(c)(5), c	r sect	ion
	501(c)(6).					
	W 1 1 1 1 1 1 1 (000)			_	Y •	-
	Were substantially all (90% or more) dues re-	•		L	1	1
	Did the organization make only in-house lobb			L	2 Y e	_
		ing and political expenditures from the prior year?	-01(-)	\(\bullet\)	3	1
EL		n is exempt under section 501(c)(4), section 5 BOTH Part III-A, lines 1 and 2, are answered "				
	Dues, assessments and similar amounts from	members	1			
	Section 162(e) nondeductible lobbying and poexpenses for which the section 527(f) tax was	olitical expenditures (do not include amounts of political as paid).				
1	Current year		2a			
)	Carryover from last year		2b			
3	Total	N4.V4.V	2c			
		e)(1)(A) notices of nondeductible section 162(e) dues	3			
		c exceeds the amount on line 3, what portion of the excess e reasonable estimate of nondeductible lobbying and				
	political expenditure next year?	e reasonable estimate of hondeductible lobbying and	4			
	Taxable amount of lobbying and political expe	nditures (see instructions)	5			
2	art IV Supplemental Information					
	ovide the descriptions required for Part I-A, line irt II-B, line 1 Also, complete this part for any a	1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grou	ıp lıst),	Part II	-A, line	2, an
_	Return Reference	Explanation				
	l					

201104410 3 (1 01111 3 3 0 01 3 3 0 12) 2 0 1 3		1 age 4				
Part IV Supplemental Information	on <i>(continued)</i>					
Return Reference	Explanation					

Schedule D (Form 990) 2013

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493321110154

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

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. ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public

	ne of the organization		Emn	loyer identifica	tion numbe	r
	ORADO CHAMBER OF COMMERCE				tion numbe	•
Pai	organizations Maintaining Donor Adv			0029610 or Accounts	. Complet	e ıf th
	organization answered Tes to Form 990	(a) Donor advised funds		(b) Funds and o	other accou	nts
	Total number at end of year					
	Aggregate contributions to (during year)					
	Aggregate grants from (during year)					
	Aggregate value at end of year					
	Did the organization inform all donors and donor adviso funds are the organization's property, subject to the organization's	-	nor advi	ısed	┌ Yes	┌ No
	Did the organization inform all grantees, donors, and do used only for charitable purposes and not for the benefic conferring impermissible private benefit?	_			┌ Yes	┌ No
a r	t II Conservation Easements. Complete if	the organization answered "Yes"	to Forn	n 990, Part IV	, line 7.	
	Purpose(s) of conservation easements held by the orga Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a	or education)	certifie	d historic struc	ture	
	easement on the last day of the tax year					
				Held at the	End of the	Year
1	Total number of conservation easements		2a			
)	Total acreage restricted by conservation easements		2b			
	Number of conservation easements on a certified histo	• •	2c			
	Number of conservation easements included in (c) acq historic structure listed in the National Register		2d			
	Number of conservation easements modified, transferrenthe tax year -	ed, released, extinguished, or terminat	ted by th	ne organization	during	
	Number of states where property subject to conservati	on easement is located 🛌				
	Does the organization have a written policy regarding t enforcement of the conservation easements it holds?	he periodic monitoring, inspection, hai	ndling of	violations, and	┌ Yes	┌ No
	Staff and volunteer hours devoted to monitoring, inspect	cting, and enforcing conservation ease	ements o	during the year		
	A mount of expenses incurred in monitoring, inspecting	, and enforcing conservation easemen	ts durin	g the year		
	Does each conservation easement reported on line 2(d and section 170(h)(4)(B)(II)?	d) above satisfy the requirements of se	ection 17	70(h)(4)(B)(ı)	┌ Yes	┌ No
	In Part XIII, describe how the organization reports con balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easeme	e footnote to the organization's financia				
art	Organizations Maintaining Collections Complete if the organization answered "You		or Ot	her Similar <i>i</i>	Assets.	
1	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asset service, provide, in Part XIII, the text of the footnote to	ts held for public exhibition, education	, or rese	arch in furthera		
)	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar assets service, provide the following amounts relating to these	ts held for public exhibition, education				С
	(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, historic following amounts required to be reported under SFAS					
	Revenues included in Form 990, Part VIII, line 1			► \$		
)	Accete included in Form 990 Part V			▶ ¢		

Part	Tit Organizations Maintaining Co	llections of Art,	<u>, Hist</u>	ori	cal Tr	<u>easur</u>	es, or C	<u> </u>	· Similai	r Asse	ets (co	<u>ntınued)</u>
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other record	ds, che	eck	any of t	the follo	wing that	are a	sıgnıfıcan	t use of	its	
а	Public exhibition		d	Γ	Loan	or exch	ange prog	rams				
b	Scholarly research		e	Γ	Other	-						
С	Preservation for future generations											
4	Provide a description of the organization's co	ollections and explai	n how	the	/ furthe	er the or	ganızatıoı	n's ex	empt purp	ose in		
5	During the year, did the organization solicit								ılar	_		_
	assets to be sold to raise funds rather than t										Yes	No
Pair	Escrow and Custodial Arrang Part IV, line 9, or reported an an						answere	eu re	25 10 70	mii 990), 	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	lian or other interme	dıary f	or c	ontrıbu	itions or	other as:	sets n	ot	Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follow	ng t	able		г					
							-			Amou	ınt	
С	Beginning balance						-	1c				
d	Additions during the year							1d				
е	Distributions during the year							1e				
f	Ending balance						Ĺ	1f				
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?							Γ	Yes	☐ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	explai	nati	on has	been pr	ovided in	Part >	(III			Γ
Pa	rt V Endowment Funds. Complete											
		(a)Current year	(b) F	Prior	/ear	b (c) Tw	o years bac	k (d) ⊺	hree years	back (e	Four ye	ears back
1a	Beginning of year balance							+				
b	Contributions							+				
С	Net investment earnings, gains, and losses											
d	Grants or scholarships											
e	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the cur	rent year end balanc	e (line	1g,	colum	n (a)) h	eld as					
а	Board designated or quasi-endowment 🕨											
Ь	Permanent endowment ►											
c	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c sho	uld equal 100%										
За	Are there endowment funds not in the posse	ssion of the organiza	ition th	nat a	re hel	d and ad	lmınıstere	d for	the			
	organization by									- 45	Yes	No
	(i) unrelated organizations			•				•		3a(i) 3a(ii)		
b	(ii) related organizations									3b	<u> </u> 	
4	Describe in Part XIII the intended uses of th							•			<u> </u>	
	t VI Land, Buildings, and Equipme					n answ	ered 'Ye:	s' to	Form 990). Part	IV. lu	ne
	11a. See Form 990, Part X, line			9		. 41.61.	0,04,,0			o, . a		
	Description of property				a) Cost o sıs (ınve	or other estment)	(b)Cost o basis (of		(c) Accui deprec		(d) B	ook value
1a	Land											
b	Buildings											
c	Leasehold improvements											
d	Equipment							85,625		85,62	5	0
	Other											
	I. Add lines 1a through 1e <i>(Column (d) must e</i>			• ,		10())	•				1	0

Part VII Investments—Other Securities. Co	mplete if the organization	answered 'Yes' to Form 990, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	F	
Part VIII Investments—Program Related. (
See Form 990, Part X, line 13.	omplete if the organization	Transmered res to rorm 330, rare 14, mile 11e
(a) Description of investment	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	F	
		0, Part IV, line 11d See Form 990, Part X, line 15
(a) Desc	ription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line	15.)	
Part X Other Liabilities. Complete if the org	janization answered 'Yes'	to Form 990, Part IV, line 11e or 11f. See
Form 990, Part X, line 25.	(In Death of	
1 (a) Description of liability	(b) Book value	
Federal income taxes		
REFUNDABLE ADVANCES	58,397	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	▶ 58,397	
2 Liphility for uncertain toy positions In Dart VIII areas	de the tayt of the feetnest to the	

Par		Revenue per Audited Financial Stat wered 'Yes' to Form 990, Part IV, line 1		its With	Revenue	e per R	eturn Complete if
1	•	er support per audited financial statements				1	467,659
2	A mounts included on line 1 be	ut not on Form 990, Part VIII, line 12					
а	Net unrealized gains on inves	tments	2a				
b	Donated services and use of	facilities	2b				
c	Recoveries of prior year grant	ts	2c				
d	Other (Describe in Part XIII)	2d				
e	Add lines 2a through 2d .					. 2e	0
3	Subtract line ${f 2e}$ from line ${f 1}$.					3	467,659
4	Amounts included on Form 99	90, Part VIII, line 12, but not on line 1					
а	Investment expenses not inc	luded on Form 990, Part VIII, line 7b .	4a				
b	Other (Describe in Part XIII)	4b				
С	Add lines 4a and 4b					4c	0
5	Total revenue Add lines 3 an	d 4c. (This must equal Form 990, Part I, line	12)			5	467,659
Par		xpenses per Audited Financial Stanswered 'Yes' to Form 990, Part IV, line		nts Wit	h Expens	es per	Return. Complete
1		er audited financial statements				1	487,121
2		ut not on Form 990, Part IX, line 25					,===
– a		facilities	2a	1			
b			2b				
С			2c				
d	Other (Describe in Part XIII)		2d				
e	` '	·		'		2e	0
3	Subtract line 2e from line 1 .					3	487,121
4	A mounts included on Form 99	0, Part IX, line 25, but not on line 1:					
а		luded on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII))	4b				
С	Add lines 4a and 4b		-			4c	0
5	Total expenses Add lines 3 a	ind 4c. (This must equal Form 990, Part I, line	e 18)			5	487,121
Par	t XIII Supplemental In	formation					•
Part		r Part II, lines 3, 5, and 9, Part III, lines 1a a I, lines 2d and 4b, and Part XII, lines 2d and					de any additional
	Return Reference	Explanation					
PART	X, LINE 2	U S GAAP REQUIRES AN ENTITY TO RE ANY UNRELATED BUSINESS INCOME AS LIABLE FOR TAXES TO THE EXTENT OF IRS REGULATIONS MANAGEMENT BELI ANY UNRELATED BUSINESS INCOME ACMORE LIKELY THAN NOT THAT THIS POAS SUCH, THERE WERE NO LIABILITIES MARCH 31, 2014	DEFI ANY U EVES CTIVIT SITIO	NED BY 1 NRELAT THAT TH TIES AS I N WOUL	RS REGULA ED BUSINE E CHAMBE DEFINED B D BE SUSTA	ATIONS SS INCO R HAS N Y IRS RE AINED U	THE CHAMBER IS OME AS DEFINED BY NOT ENGAGED IN EGULATIONS AND IS OPON EXAMINATION

•	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493321110154

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 to provide any additional information.

► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public
Inspection

OMB No 1545-0047

2013

Name of the organization EL DORADO CHAMBER OF COMMERCE Employer identification number

71-0029610

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	THE CHAMBER OF COMMERCE DOES HAVE MEMBERS WHO PAY ANNUAL DUES
FORM 990, PART VI, SECTION B, LINE 11	THE FORM 990 WAS REVIEWED BY ITS PRESIDENT/CEO AND TREASURER BEFORE FILING WITH THE IRS T HE FULL BOARD OF DIRECTORS WILL REVIEW AT ITS NEXT MEETING
FORM 990, PART VI, SECTION B, LINE 15A	THE BOARD ANNUALLY REVIEWS THE SALARY OF THE PRESIDENT/CEO AND MAKES SALARY ADJUSTMENTS ACCORDINGLY
FORM 990, PART VI, SECTION C, LINE 19	THE GOVERNING DOCUMENTS AND ALL FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST BY ITS MEMBERS
FORM 990, PART XII, LINE 1	IN PRIOR YEARS, THE CHAMBER FOLLOWED THE MODIFIED CASH BASIS OF ACCOUNTING WHICH IS A COMP REHENSIVE BASIS OF ACCOUNTING OTHER THAN ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE U NITED STATES OF AMERICA EFFECTIVE APRIL 1, 2013, THE CHAMBER ELECTED TO CHANGE TO GENERAL LY ACCEPTED ACCOUNTING PRINCIPLES THE CHAMBER BELIEVES FOLLOWING THE GENERALLY ACCEPTED A CCOUNTING PRINCIPLES PROVIDES A MORE MEANINGFUL PRESENTATION OF ITS FINANCIAL POSITION SIN CE THE METHOD MORE ACCURATELY REFLECTS REVENUES AND EXPENSES IN THE FINANCIAL STATEMENTS UNRESTRICTED NET ASSETS AT THE BEGINNING OF THE PERIOD HAVE BEEN RESTATED AT \$122,621, A D ECREASE OF \$41,553 DUE TO THE EFFECT OF RETROACTIVE APPLICATION OF THE NEW ACCOUNTING METH OD

3115

(Rev December 2009)
Department of the Treasury

Application for Change in Accounting Method

OMB No 1545-0152

	evenue Service						
Name of	f filer (name of parent corporation if a consolic	dated group) (see instructions)		Identification number (see ins	•		
EL DO	DRADO CHAMBER OF COMMERC	Œ		71-0029610			
				Principal business activity code	number (see instruction	ons)	
Number	, street, and room or suite no. If a P.O. box, s	ee the instructions		Tax year of change begins (MM	(/DD/YYYY) 0.4 (01/2013	
	BOX 10836			Tax year of change ends (MM/E		31/2014	
	own, state, and ZIP code			Name of contact person (see in		31/2014	
	DRADO, AR 71730			JEREMY STRATTON	,		
Name of	applicant(s) (if different than filer) and identifi	cation number(s) (see instructions)			Contact person's telep	hone number	
					(870) 863-6°		
	applicant is a member of a consolid					• 🗆	
	n 2848, Power of Attorney and Dec	· · · · · · · · · · · · · · · · · · ·		•			
	ed), check this box the box to indicate the type of a	nnlicant					
	tividual	Cooperative (Sec. 138	1	heck the appropriate bo f accounting method cha			
_	rporation	☐ Partnership		ee instructions)	inge being reque	ssieu.	
	ntrolled foreign corporation	S corporation	'	Depreciation or Amortiz	ation		
	ec. 957)	☐ Insurance co. (Sec 81		Financial Products and/		ities of	
□ 10/	/50 corporation (Sec. 904(d)(2)(E))	Insurance co. (Sec. 83		Financial Institutions			
☐ Qu	alified personal service	Other (specify) ►] Other (specify) ▶			
	poration (Sec. 448(d)(2))						
✓ Exe	empt organization. Enter Code sect	ion ► 501(c)6					
	any other information that is not spectaxpayer must attach all applicable Information For Automatic	supplemental statements r	requested	throughout this form.			
1	Enter the applicable designated auto- only one designated automatic acco- IRS. If the requested change has no- both a description of the change and	ounting method change numb designated automatic accoun	er, except iting metho	as provided for in guidance od change number, check "C	e published by the Other," and provide		
	► (a) Change No122	(b) Other Description	n ▶				
2	Do any of the scope limitations d				tic consent to be		
Moto	unavailable for the applicant's requ					hve-10-66-0-	
	Complete Part II below and then Part II Information For All Reques		through i	z от triis топтт (іт арріісаріє	<i>y.</i>	基础等等	
Part	Did or will the applicant cease to		uningge t	a which the requested o	banco reletas ou	Yes No	
3	terminate its existence, in the tax y If "Yes," the applicant is not eligible	ear of change (see instructi	ons)?			/	
4a	Does the applicant (or any present applicable tax year(s)) have any Fe If "No," go to line 5.						
b	Is the method of accounting the appresent or former consolidate.		-	·		activities a serie of ortific rate. A	
	either (i) under consideration or (ii)						
		Signature (see	instruction				
the appl	enalties of perjury, I declare that I have exam iCation contains all the relevant facts relating ion of which preparer has any knowledge	ined this application, including according to the application, and it is true, or	ompanying s orrect, and c	chedules and statements, and to complete Declaration of preparer	the best of my knowl (other than applicant	edge and belief,) is based on all	
_	Filer	16		Preparer (other than	ı filer/applicant)		
y Je Te	Signature and days	10-08-2019 10-08-2019	STACY	Senature of individual preparin D. SCROGGINS, CPA			
<u>. — — — — — — — — — — — — — — — — — — —</u>	Name and title (print or ty	pe)		lame of individual preparing the		type)	
				Name of firm preparin	g the application		

Part	Intormation For All Req	uests (continu	ea)		Yes	No
4c	applicant or any present or form	ner consolidated	group in which the applica	sue pending (with respect to either the ant was a member during the applicable		
d	tax year(s)) for any tax year under Is the request to change the midivision director consent to the	ethod of accoun	ting being filed under the	procedures requiring that the operating	18.7804-7 18.8804-7	
	If "Yes," attach the consent stat					医
е				-day or 120-day window period?		V
	If "Yes," check the box for the a	pplicable windo	w period and attach the rec	uired statement (see instructions).		
	☐ 90 day ☐ 120 day:	Date examination	on ended ▶			
f	year(s) under examination.			the examining agent and the tax		
	Name >	***************************************	Telephone number ▶	Tax year(s) ▶	Wir.	州楼
g	Has a copy of this Form 3115 be		• •			 -
5a	applicable tax year(s)) have any lf "Yes," enter the name of the (o	Federal income	tax return(s) before Appeals	the applicant was a member during the s and/or a Federal court? or		/
	telephone number, and the tax y		- ··	-		
	Name ▶		elephone number 🕨	Tax year(s) ▶		
b		peen provided to		or counsel for the government identified		1
С		plicant or any p	resent or former consolidate	under consideration by Appeals and/or ted group in which the applicant was a		
	If "Yes," attach an explanation.	•				
6	attach a statement that provide	s each parent c	orporation's (a) name, (I	present or former consolidated group, b) identification number, (c) address, r examination, before an Appeals office,		
7	a partnership or an S corporation	on, is it requesti , before Appeal	ng a change from a metho s, or before a Federal cour	ng a limited liability company) treated as od of accounting that is an issue under t, with respect to a Federal income tax		·
	If "Yes," the applicant is not el	gible to make th	e change			
8a	Does the applicable revenue pre receive audit protection for the r			nsent) state that the applicant does not		/
b	If "Yes," attach an explanation.					
9a		ring advance co		de (under either an automatic change d of accounting within the past 5 years		
b	If "Yes," for each trade or bus (including the tax year of change			ested change in method of accounting consent.		
С				t Agreement granting a change was not in the requested year of change, attach		
10a				e pending any request (including any counting, or technical advice?		1
b	type of request (private letter rul in the request(s).	ıng, change in m	ethod of accounting, or tec	e taxpayer, identification number(s), the chnical advice), and the specific issue(s)		
11	Is the applicant requesting to chilf "Yes," check the appropriat accounting Also, complete Sch	e boxes below	to indicate the applicant	and proposed methods of	<u> </u>	
	Present method:	Cash	☐ Accrual	☐ Hybrid (attach description)		
	Proposed method:	☐ Cash	Accrual	☐ Hybrid (attach description)		

the amount of the section 481(a) adjustment attributable to each applicant.

Pari	Section 481(a) Adjustment (continued)	Yes No
26	If the section 481(a) adjustment is an increase to income of less than \$25,000, does the applicant elect to take the entire amount of the adjustment into account in the year of change?	1
27	Is any part of the section 481(a) adjustment attributable to transactions between members of an affiliated group, a consolidated group, a controlled group, or other related parties?	
	If "Yes," attach an explanation.	Francisco (Francis
Sche	dule A-Change in Overall Method of Accounting (If Schedule A applies, Part I below must be completed)	eted.)
Pai	Change in Overall Method (see instructions)	
1	Enter the following amounts as of the close of the tax year preceding the year of change. If none, state "None." All statement providing a breakdown of the amounts entered on lines 1a through 1g.	so, attach a
		Amount
а	Income accrued but not received (such as accounts receivable)	75,528
b	Income received or reported before it was earned (such as advanced payments). Attach a description of the income and the legal basis for the proposed method	-112,678
С	Expenses accrued but not paid (such as accounts payable)	-4,403
d	Prepaid expenses previously deducted	
е	Supplies on hand previously deducted and/or not previously reported	
f	Inventory on hand previously deducted and/or not previously reported. Complete Schedule D, Part II	
g	Other amounts (specify) Attach a description of the item and the legal basis for its inclusion in the calculation of the section 481(a) adjustment. ▶	
h	Net section 481(a) adjustment (Combine lines 1a-1g.) Indicate whether the adjustment is an increase (+) or decrease (-) in income. Also enter the net amount of this section 481(a) adjustment amount on Part IV, line 25	-41,553
2	Is the applicant also requesting the recurring item exception under section 461(h)(3)?	licable, as o
	preparing the balance sheet. If books of account are not kept, attach a copy of the business schedules subm Federal income tax return or other return (e.g., tax-exempt organization returns) for that period. If the amounts in 1a through 1g, do not agree with those shown on both the profit and loss statement and the balance sheet, attack explaining the differences.	Part I, lines
Par	t II Change to the Cash Method For Advance Consent Request (see instructions)	
Applio	cants requesting a change to the cash method must attach the following information:	
1	A description of inventory items (items whose production, purchase, or sale is an income-producing factor) and r supplies used in carrying out the business.	
2_	An explanation as to whether the applicant is required to use the accrual method under any section of the Code of	regulations.
Sche	dule B—Change to the Deferral Method for Advance Payments (see instructions)	1,2,00
	If the applicant is required to change to the Deferral Method for advance payments described in section 5.02	of Rev. Proc

Form 3115 (Rev 12-2009)

- 1 If the applicant is requesting to change to the Deferral Method for advance payments described in section 5.02 of Rev. Proc. 2004-34, 2004-1 C.B. 991, attach the following information:
 - a A statement explaining how the advance payments meet the definition in section 4.01 of Rev. Proc. 2004-34.
 - b If the applicant is filing under the automatic change procedures of Rev. Proc. 2008-52, the information required by section 8.02(3)(a)-(c) of Rev. Proc. 2004-34.
 - c If the applicant is filing under the advance consent provisions of Rev. Proc. 97-27, the information required by section 8.03(2)(a)-(f) of Rev. Proc. 2004-34.
- 2 If the applicant is requesting to change to the deferral method for advance payments described in Regulations section 1.451-5(b)(1)(ii), attach the following.
 - a A statement explaining how the advance payments meet the definition in Regulations section 1.451-5(a)(1).
 - **b** A statement explaining what portions of the advance payments, if any, are attributable to services, whether such services are integral to the provisions of goods or items, and whether any portions of the advance payments that are attributable to non-integral services are less than five percent of the total contract prices. See Regulations sections 1.451-5(a)(2)(i) and (3).
- c A statement explaining that the advance payments will be included in income no later than when included in gross receipts for purposes of the applicant's financial reports. See Regulations section 1.451-5(b)(1)(ii).
- d A statement explaining whether the inventoriable goods exception of Regulations section 1.451-5(c) applies and if so, when substantial advance payments will be received under the contracts, and how the exception will limit the deferral of income.

Page 4

Page **5**

Schedule C-Changes Within the LIFO Inventory Method (see instructions)

Part I General LIFO Information

Complete this section if the requested change involves changes within the LIFO inventory method. Also, attach a copy of all **Forms 970,** Application To Use LIFO Inventory Method, filed to adopt or expand the use of the LIFO method.

- 1 Attach a description of the applicant's present and proposed LIFO methods and submethods for each of the following items:
- a Valuing inventory (e.g., unit method or dollar-value method)
- **b** Pooling (e.g., by line or type or class of goods, natural business unit, multiple pools, raw material content, simplified dollar-value method, inventory price index computation (IPIC) pools, vehicle-pool method, etc.).
- c Pricing dollar-value pools (e.g., double-extension, index, link-chain, link-chain index, IPIC method, etc.).
- d Determining the current-year cost of goods in the ending inventory (i.e., most recent acquisitions, earliest acquisitions during the current year, average cost of current-year acquisitions, or other permitted method).
- 2 If any present method or submethod used by the applicant is not the same as indicated on Form(s) 970 filed to adopt or expand the use of the method, attach an explanation.
- 3 If the proposed change is not requested for all the LIFO inventory, attach a statement specifying the inventory to which the change is and is not applicable
- If the proposed change is not requested for all of the LIFO pools, attach a statement specifying the LIFO pool(s) to which the change is applicable.
- Attach a statement addressing whether the applicant values any of its LIFO inventory on a method other than cost. For example, if the applicant values some of its LIFO inventory at retail and the remainder at cost, identify which inventory items are valued under each method.
- 6 If changing to the IPIC method, attach a completed Form 970

Part II Change in Pooling Inventories

- 1 If the applicant is proposing to change its pooling method or the number of pools, attach a description of the contents of, and state the base year for, each dollar-value pool the applicant presently uses and proposes to use.
- 2 If the applicant is proposing to use natural business unit (NBU) pools or requesting to change the number of NBU pools, attach the following information (to the extent not already provided) in sufficient detail to show that each proposed NBU was determined under Regulations section 1.472-8(b)(1) and (2):
- a A description of the types of products produced by the applicant. If possible, attach a brochure.
- b A description of the types of processes and raw materials used to produce the products in each proposed pool.
- c If all of the products to be included in the proposed NBU pool(s) are not produced at one facility, state the reasons for the separate facilities, the location of each facility, and a description of the products each facility produces.
- **d** A description of the natural business divisions adopted by the taxpayer. State whether separate cost centers are maintained and if separate profit and loss statements are prepared.
- e A statement addressing whether the applicant has inventories of items purchased and held for resale that are not further processed by the applicant, including whether such items, if any, will be included in any proposed NBU pool.
- f A statement addressing whether all items including raw materials, goods-in-process, and finished goods entering into the entire inventory investment for each proposed NBU pool are presently valued under the LIFO method. Describe any items that are not presently valued under the LIFO method that are to be included in each proposed pool.
- **g** A statement addressing whether, within the proposed NBU pool(s), there are items both sold to unrelated parties and transferred to a different unit of the applicant to be used as a component part of another product prior to final processing.
- If the applicant is engaged in manufacturing and is proposing to use the multiple pooling method or raw material content pools, attach information to show that each proposed pool will consist of a group of items that are substantially similar. See Regulations section 1.472-8(b)(3).
- If the applicant is engaged in the wholesaling or retailing of goods and is requesting to change the number of pools used, attach information to show that each of the proposed pools is based on customary business classifications of the applicant's trade or business. See Regulations section 1.472-8(c).

Form 3115 (Rev 12-2009) Page 6

Schedule D-Change in the Treatment of Long-Term Contracts Under Section 460, Inventories, or Other Section 263A Assets (see instructions) Part I Change in Reporting Income From Long-Term Contracts (Also complete Part III on pages 7 and 8.) To the extent not already provided, attach a description of the applicant's present and proposed methods for reporting income and expenses from long-term contracts. Also, attach a representative actual contract (without any deletion) for the requested change. If the applicant is a construction contractor, attach a detailed description of its construction activities. Are the applicant's contracts long-term contracts as defined in section 460(f)(1) (see instructions)? ☐ Yes ☐ No If "Yes," do all the contracts qualify for the exception under section 460(e) (see instructions)? Yes □ No If line 2b is "No," attach an explanation. c If line 2b is "Yes," is the applicant requesting to use the percentage-of-completion method using cost-to-□ No ☐ Yes If line 2c is "No," is the applicant requesting to use the exempt-contract percentage-of-completion ☐ Yes ☐ No If line 2d is "Yes." attach an explanation of what cost comparison the applicant will use to determine a contract's completion factor. If line 2d is "No," attach an explanation of what method the applicant is using and the authority for its use. Does the applicant have long-term manufacturing contracts as defined in section 460(f)(2)? ☐ Yes ☐ No If "Yes," attach an explanation of the applicant's present and proposed method(s) of accounting for longterm manufacturing contracts. Attach a description of the applicant's manufacturing activities, including any required installation of manufactured goods. To determine a contract's completion factor using the percentage-of-completion method: Will the applicant use the cost-to-cost method in Regulations section 1.460-4(b)? ☐ Yes ☐ No If line 4a is "No," is the applicant electing the simplified cost-to-cost method (see section 460(b)(3) and ☐ No ☐ Yes Attach a statement indicating whether any of the applicant's contracts are either cost-plus long-term contracts or Federal long-term contracts. Change in Valuing Inventories Including Cost Allocation Changes (Also complete Part III on pages 7 and 8.) Attach a description of the inventory goods being changed. 1 2 Attach a description of the inventory goods (if any) NOT being changed. Is the applicant subject to section 263A? If "No," go to line 4a . . . ☐ Yes □ No Is the applicant's present inventory valuation method in compliance with section 263A (see instructions)? ☐ No ☐ Yes Inventory Not Inventory Being Changed Being Changed Check the appropriate boxes below. Present method Identification methods: Proposed method Present method FIFO Other (attach explanation) Valuation methods: Cost . Cost or market, whichever is lower **b** Enter the value at the end of the tax year preceding the year of change If the applicant is changing from the LIFO inventory method to a non-LIFO method, attach the following information (see instructions). Copies of Form(s) 970 filed to adopt or expand the use of the method. Only for applicants requesting advance consent. A statement describing whether the applicant is changing to the method

required by Regulations section 1.472-6(a) or (b), or whether the applicant is proposing a different method.

Proc. 2008-52 (or its successor).

Only for applicants requesting an automatic change. The statement required by section 22.01(5) of the Appendix of Rev.

Form 3115 (Rev 12-2009)

Method of Cost Allocation (Complete this part if the requested change involves either property subject to section 263A or long-term contracts as described in section 460 (see instructions)).

Section A-Allocation and Capitalization Methods

Attach a description (including sample computations) of the present and proposed method(s) the applicant uses to capitalize direct and indirect costs properly allocable to real or tangible personal property produced and property acquired for resale, or to allocate and, where appropriate, capitalize direct and indirect costs properly allocable to long-term contracts. Include a description of the method(s) used for allocating indirect costs to intermediate cost objectives such as departments or activities prior to the allocation of such costs to long-term contracts, real or tangible personal property produced, and property acquired for resale. The description must include the following:

- 1 The method of allocating direct and indirect costs (i.e., specific identification, burden rate, standard cost, or other reasonable allocation method).
- 2 The method of allocating mixed service costs (i.e., direct reallocation, step-allocation, simplified service cost using the labor-based allocation ratio, simplified service cost using the production cost allocation ratio, or other reasonable allocation method).
- 3 The method of capitalizing additional section 263A costs (i.e., simplified production with or without the historic absorption ratio election, simplified resale with or without the historic absorption ratio election including permissible variations, the U.S. ratio, or other reasonable allocation method).

Section B-Direct and Indirect Costs Required To Be Allocated

Check the appropriate boxes showing the costs that are or will be fully included, to the extent required, in the cost of real or tangible personal property produced or property acquired for resale under section 263A or allocated to long-term contracts under section 460. Mark "N/A" in a box if those costs are not incurred by the applicant. If a box is not checked, it is assumed that those costs are not fully included to the extent required. Attach an explanation for boxes that are not checked.

		Present method	Proposed method
1	Direct material		
2	Direct labor		
3	Indirect labor		
4	Officers' compensation (not including selling activities)		
5	Pension and other related costs		
6	Employee benefits		
7	Indirect materials and supplies		
8	Purchasing costs		
9	Handling, processing, assembly, and repackaging costs		
10	Offsite storage and warehousing costs		
11	Depreciation, amortization, and cost recovery allowance for equipment and facilities		
	placed in service and not temporarily idle		
12	Depletion		
13	Rent		
14	Taxes other than state, local, and foreign income taxes		
15	Insurance		
16	Utilities		
17	Maintenance and repairs that relate to a production, resale, or long-term contract activity		
18	Engineering and design costs (not including section 174 research and experimental		
	expenses)	4.00	
19	Rework labor, scrap, and spoilage		
20	Tools and equipment		
21	Quality control and inspection		
22	Bidding expenses incurred in the solicitation of contracts awarded to the applicant		
23	Licensing and franchise costs		
24	Capitalizable service costs (including mixed service costs)		
25	Administrative costs (not including any costs of selling or any return on capital)		
26	Research and experimental expenses attributable to long-term contracts		-
27	Interest	,	
28	Other costs (Attach a list of these costs.)	1	

Form 3115 (Rev 12-2009) Page 8 Part III Method of Cost Allocation (see instructions) (continued) Section C-Other Costs Not Required To Be Allocated (Complete Section C only if the applicant is requesting to change its method for these costs) Present method Proposed method 1 2 Research and experimental expenses not included in Section B, line 26 Bidding expenses not included in Section B, line 22 3 4 General and administrative costs not included in Section B 5 6 Warranty and product liability costs 7 8 9 On-site storage 10 Depreciation, amortization, and cost recovery allowance not included in Section B. Other costs (Attach a list of these costs.) 11 Schedule E—Change in Depreciation or Amortization (see instructions) Applicants requesting approval to change their method of accounting for depreciation or amortization complete this section. Applicants must provide this information for each item or class of property for which a change is requested. Note. See the List of Automatic Accounting Method Changes in the instructions for information regarding automatic changes under sections 56, 167, 168, 197, 1400I, 1400L, or former section 168. Do not file Form 3115 with respect to certain late elections and election revocations (see instructions). ☐ No Is depreciation for the property determined under Regulations section 1.167(a)-11 (CLADR)? ☐ Yes If "Yes," the only changes permitted are under Regulations section 1.167(a)-11(c)(1)(iii). Is any of the depreciation or amortization required to be capitalized under any Code section (e.g., section ☐ Yes ☐ No If "Yes," enter the applicable section ▶ Has a depreciation, amortization, or expense election been made for the property (e.g., the election under ☐ No ☐ Yes If "Yes," state the election made ▶ 4a To the extent not already provided, attach a statement describing the property being changed. Include in the description the type of property, the year the property was placed in service, and the property's use in the applicant's trade or business or income-producing activity. b If the property is residential rental property, did the applicant live in the property before renting it? . . . ☐ Yes □ No ☐ Yes ☐ No To the extent not already provided in the applicant's description of its present method, attach a statement explaining how the property is treated under the applicant's present method (e.g., depreciable property, inventory property, supplies under Regulations section 1.162-3, nondepreciable section 263(a) property, property deductible as a current expense, etc.). If the property is not currently treated as depreciable or amortizable property, attach a statement of the facts supporting the proposed change to depreciate or amortize the property. If the property is currently treated and/or will be treated as depreciable or amortizable property, provide the following 7 information for both the present (if applicable) and proposed methods: The Code section under which the property is or will be depreciated or amortized (e.g., section 168(g)). The applicable asset class from Rev. Proc. 87-56, 1987-2 C.B. 674, for each asset depreciated under section 168 (MACRS) or under section 1400L; the applicable asset class from Rev. Proc. 83-35, 1983-1 C B. 745, for each asset depreciated under former section 168 (ACRS); an explanation why no asset class is identified for each asset for which an asset class has not been identified by the applicant.

- c The facts to support the asset class for the proposed method.
- The depreciation or amortization method of the property, including the applicable Code section (e.g., 200% declining balance method under section 168(b)(1)).
- The useful life, recovery period, or amortization period of the property.
- The applicable convention of the property.
- A statement of whether or not the additional first-year special depreciation allowance (for example, as provided by section 168(k), 168(l), 168(m), 168(n), 1400L(b), or 1400N(d)) was or will be claimed for the property. If not, also provide an explanation as to why no special depreciation allowance was or will be claimed.

EL DORADO CHAMBER OF COMMERCE Statement of Assets, Liabilities, and Net Assets – Modified Cash Basis March 31, 2013

ASSETS

700270	
Current Assets	
Cash	\$ 129,576
Cash - savings	75,000
•	
Total Current Assets	204,576
Long-term Assets	
Property and equipment, net	424
TOTAL ASSETS	\$ 205,000
	
LIABILITIES AND NET ASSETS	
Current Liabilities	
Accrued payroll liabilities	\$ 4,930
Refundable advances	35,896
	
Total Current Liabilities	40,826
	
Net Assets	
Unrestricted	164,174
Total Net Assets	164,174
TOTAL LIABILITIES AND NET ASSETS	\$ 205,000
· · · · · · · · · · · · · · · · · · ·	

EL DORADO CHAMBER OF COMMERCE Statement of Revenues, Expenses, and Other Changes in Net Assets – Modified Cash Basis For the Year Ended March 31, 2013

	_Un	restricted
Support and Revenue		
Grant income	\$	60,000
Membership dues		166,013
Contributions		102,873
Management fees		60,000
Registration/Admission		60,058
Directory		7,000
Program service revenue		71,877
Other income		676
Total Support & Revenue		528,497
Expenses		
Salaries		256,780
Retirement contributions		10,736
Employee benefits		32,082
Payroll taxes		24,049
Professional fees		5,669
Office supplies		1,809
Information technology		7,314
Occupancy		8,400
Depreciation		2,052
Programs		102,182
Supplies		12,091
Staff development		14,295
Dues		7,590
Other	-	51,216
Total Expenses	,	536,265
Change in Net Assets		(7,768)
Net Assets - Beginning of Year		171,942
Net Assets - End of Year	\$	164,174

El Dorado Chamber of Commerce 71-0029610 Form 3115

Effective April 1, 2013, El Dorado Chamber of Commerce elected to change from Modified Cash Basis to Accrual Basis for financial reporting. The following account changes are the results of the change and a restatement to equity:

	Debit		Cre	Credit	
Cash				239	
Interest Income			1	9	
Miscellaneous Expense	1	248			
Accounts Receivable		75,528			
Accrued Liabilities			1	.,582	
Deferrals			112	2,678	
Membership Fees	1	13,205			
Accounts Payable			2	2,582	
Technology - Maintenance	(1)	336			
Accounting	(1)	463			
Leadership Union County Expense	①	403			
Supplies		415			
Technology Subscriptions	1	89			
Board Members	1	10			
Automobile	1	217			
Business Meals	(1)	157			
Membership Expense	① ① ①	89			
Technology - Purchases	1	38			
Annual Banquet	1	365			
Payroll Taxes	①	1,582			
Bad Debts	1	23,945			
Σ ① Equity			(41	.,553)	