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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

A Fo	r the	2013 cal	endar year, or tax year beginning	, 07-01-2013 , 2013, and end	ing 06-30-	2014			
		applicable	C Name of organization SALT LAKE AREA CHAMBER OF COMI	MERCE			D Emplo	yer idei	ntification number
_	dress c	_	Doing Business As				_ 87-01	2190	1
	me cha tial reti	_							
_	rmınate		Number and street (or P O box if m 175 EAST 400 SOUTH SUITE 600	ail is not delivered to street address)	Room/suite	2	E Telepho	ne num	ber
		return	City or town, state or province, cour	ntry, and ZIP or foreign postal code			(801)	364-3	631
		n pending	SALT LAKE CITY, UT 84111	,, <u></u>			G Gross re	acainte d	\$ 3,842,939
	•	, ,	F Name and address of prin	cipal officer		H(a) Ist	this a group		
			R LANE BEATTIE 175 EAST 400 SOUTH SUI				ordinates?	recuiii	「Yes ▼ No
			SALT LAKE CITY,UT 8411			H(b) Δ re	all subordı	nates	┌ Yes ┌ No
						ınc	luded?		
I Ta	x-exer	npt status	「 501(c)(3)	insert no) 4947(a)(1) or 5	527	If"	No," attach	a lıst	(see instructions)
J W	ebsit	e:► WV	VW SALTLAKECHAMBER ORG			H(c) Gr	oup exempt	on nur	mber ►
K For	m of or	rganızatıon	Corporation Trust Association	n		L Year of	formation 19	02 M	State of legal domicile UT
Pa	rt I	Sum	ımary						
			escribe the organization's mission P UTAH BUSINESSES GROWAI						
e e		TO HEL	P OTATI BOSINESSES GROWAT	ID PROSPER					
alle									
E E	2	Check th	his box 🛏 if the organization dis	scontinued its operations or dis	sposed of	more than	25% of its	net as	sets
Governance			,						
			of voting members of the govern					3	22
Œ			of independent voting members of					4 5	21
Activities &	1		mber of individuals employed in omber of volunteers (estimate if n					6	73
đ,	1		related business revenue from Pa		7a	8,073			
	1		elated business taxable income fr					7b	-1,153
						Pı	ior Year		Current Year
a,	8		ibutions and grants (Part VIII, li		2,689,1	350	0		
Rayenue	9		Program service revenue (Part VIII, line 2g)						2,852,665
Ж	10 11		tment income (Part VIII, column revenue (Part VIII, column (A),	1,062,3	87	988,640			
	12		revenue—add lines 8 through 11				1,002,5	,32	300,040
	<u> </u>						3,754,9	_	3,841,750
	13 14		s and similar amounts paid (Part its paid to or for members (Part I	, , , , , ,				0	0
	15		es, other compensation, employe						
Expenses		5-10)				2,362,1	_	2,253,359
<u>\$</u>	16a		ssional fundraising fees (Part IX,					0	0
五	17		undraising expenses (Part IX, column (D) expenses (Part IX, column (A), l	. ,			1,361,4	72	1,332,544
	18		expenses Add lines 13-17 (mus				3,723,6		3,585,903
	19		nue less expenses Subtract line				31,2		255,847
<u>광</u> 8						Beginni	ng of Curre	nt	End of Year
Sets Han	20	Tatal	accote (Part V. line 16)				1 10/13	24 5	
Not Assets or Fund Balances	20 21		assets (Part X, line 16) liabilities (Part X, line 26)				1,194,3	-	1,428,987 1,078,869
<u> </u>	22		ssets or fund balances Subtract				94,2		350,118
Pa	rt II		nature Block						
			perjury, I declare that I have exa						
			belief, it is true, correct, and com nowledge	iplete Declaration of preparer	(other tha	n officer) i	s based on	all info	rmation of which
		1.							
		****	*** ature of officer				2015-05-04		
Sigr Her							Date		
	-		IEL H BRIMHALL CFO e or print name and title						
		T,	Print/Type preparer's name ROSS L YOUNGBERG CPA	Preparer's signature	Dat	1 -	heck I if	PTIN P00237	7161
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Hec	Ωn	ilv I i	Firm's address 🟲 5 TRIAD CENTER STE 6	UU		۱۲	hone no (801)	1 332-24	۷00

SALT LAKE CITY, UT 841801128

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

✓ Yes ☐ No

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section $501(c)(3)$ or $4947(a)(1)$ (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		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? <i>If "Yes," complete Schedule C, Part III</i>	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? If "Yes," complete Schedule D, Part I^{\square}	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,"</i> complete Schedule D, Part III	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		No
LO	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^{\square}	10		No
1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, 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	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X^{\bullet}	11e	Yes	1
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	
l2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
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	Yes	
.3	Is the organization a school described in section 170 (b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
.4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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
L 5	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
l 6	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? If "Yes," complete Schedule F, Parts III and IV	16		No
.7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
.8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
L 9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
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	Yes	
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		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
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			
		28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
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? <i>If "Yes," complete Schedule M</i>	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? If "Yes," complete Schedule R, Part 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	Yes	
35a	Did the organization have a controlled entity within the meaning of section $512(b)(13)$?	35a	Yes	
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	Yes	
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?	30	Yes	

Ċ.	Statements Regarding Other 1R5 Fillings 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 82			. 40
	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
-	gaming (gambling) winnings to prize winners?	1c	Yes	
a.	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			
	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	
3	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
)	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
a	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)?	4 a		N
)	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
a	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?			
		5c		
	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	Yes	
)	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes	
	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		
t	If "Yes," indicate the number of Forms 8282 filed during the year			
•	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
F	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
J	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	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		
	Sponsoring organizations maintaining donor advised funds.			
1	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			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	•		
	Section 501(c)(12) organizations. Enter			
3	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	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			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	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		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
2	Enter the amount of reserves on hand]		
a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
h	If "Yes " has it filed a Form 7.20 to report these payments? If "No " provide an explanation in Schedule O	14h		

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.

Check if Schedule O contains a response or note to any line in this Part VI							▽

<u> </u>	ection A. Governing Body and Management						
						Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year	1a		22			
	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	1b		21			
2	Did any officer, director, trustee, or key employee have a family relationship or a busy other officer, director, trustee, or key employee?		relationship with	any •	2	Yes	
3	Did the organization delegate control over management duties customarily performed supervision of officers, directors or trustees, or key employees to a management com-				3		Νo
4	Did the organization make any significant changes to its governing documents since filed?	the p	rıor Form 990 was	,	4		No
5	Did the organization become aware during the year of a significant diversion of the organization	ganız	ation's assets? .	. [5		No
6	Did the organization have members or stockholders?			. [6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power more members of the governing body?		elect or appoint on	ie or	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval or persons other than the governing body?		members, stockho	lders,	7b		No
8	Did the organization contemporaneously document the meetings held or written actio year by the following	ons ur	ndertaken during ti	he			
а	The governing body?			.	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?			[8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, vorganization's mailing address? If "Yes," provide the names and addresses in Schedule				9		No
Se	ection B. Policies (This Section B requests information about policies not r	requi	red by the Inter	rnal Re	venu	ie Cod	e.)
			,			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			Г	10a	Yes	No No
	Did the organization have local chapters, branches, or affiliates?		• • • • • • • • • • • • • • • • • • •	, F	10a 10b	Yes	
b	If "Yes," did the organization have written policies and procedures governing the acti	n's e	of such chapters xempt purposes?	, e filing		Yes	
b 11a	If "Yes," did the organization have written policies and procedures governing the acti affiliates, and branches to ensure their operations are consistent with the organizatio Has the organization provided a complete copy of this Form 990 to all members of its	on's e s gov	s of such chapters xempt purposes? erning body before	, e filing	10b		
b 11a b	If "Yes," did the organization have written policies and procedures governing the acti affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of its the form?	on's e s gov · • orm 9	of such chapters xempt purposes? erning body before	, filing	10b		
b 11a b 12a	If "Yes," did the organization have written policies and procedures governing the activation affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 to all members of its the form?	on's e s gov orm 9 • y inte	s of such chapters xempt purposes? erning body before	, filing .	10b 11a	Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the acti affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of its the form?	on's e s gov orm 9 , y inte	s of such chapters xempt purposes? erning body before	filing	10b 11a 12a	Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activation and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form?	on's e s gov orm 9 y inte the p	s of such chapters xempt purposes? erning body before	, e filing	10b 11a 12a 12b	Yes Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activation affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this Form 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 rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with an Schedule O how this was done.	on's e s gov orm 9 y inte	s of such chapters xempt purposes? erning body before	, e filing	10b 11a 12a 12b	Yes Yes Yes	
b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the activation and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this Form 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 rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the schedule O how this was done. Did the organization have a written whistleblower policy?	on's e s gov orm 9 y inte the p	s of such chapters xempt purposes? erning body before	, e filing	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14	If "Yes," did the organization have written policies and procedures governing the activation and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form?	on's e s gov orm 9 y inte the p the p ewan	s of such chapters xempt purposes? erning body before	e filing ive corribe corribe	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a	If "Yes," did the organization have written policies and procedures governing the activa filliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this Form 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 rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with an 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 independent persons, comparability data, and contemporaneous substantiation of the	on's e s gov orm 9 y inte the p the p ewan	s of such chapters xempt purposes? erning body before	r filing v ve v scribe v v v v v v v v v v v v v v v v v v v	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a	If "Yes," did the organization have written policies and procedures governing the activa ffiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this Form 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 rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in 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 independent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official	on's e s gov orm 9 y inte the p the p ewan	s of such chapters xempt purposes? erning body before	r filing v ve v scribe v v v v v v v v v v v v v v v v v v v	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activa filliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this Form 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 rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in 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 independent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official.	on's es gov orm 9 y inte the p ew an e deli	s of such chapters xempt purposes? erning body before	ofiling ofilin	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activation and branches to ensure their operations are consistent with the organization of the following persons include a review during the organization have a written document retention and destruction policy? Did the organization have a written whistleblower policy? Did the organization regularly and consistently monitor and enforce compliance with an Schedule O how this was done Did 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 independent persons, comparability data, and contemporaneous substantiation of the 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 of taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization of the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year?	on's e s gov orm 9 y inte the p ew an e deli or sim	s of such chapters xempt purposes? erning body before	r filing vive vith a	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activation and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this Form 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 rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in 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 independent persons, comparability data, and contemporaneous substantiation of the 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 of taxable entity during the year?	on's es govorm 9 y inte the p ewan edeli r sim	s of such chapters xempt purposes? erning body before	ofiling ive corribe corribe corribe corribe corribe corribe corribe	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes	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 activation and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this Form 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 rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in 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 independent persons, comparability data, and contemporaneous substantiation of the 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 of taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take	on's es govorm 9 y inte the p ewan edeli r sim	s of such chapters xempt purposes? erning body before	ofiling ive corribe corribe corribe corribe corribe corribe corribe	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes	No

- 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
 ▶DANIEL H BRIMHALL 175 E 400 S STE 600
 SALT LAKE CITY, UT 84111 (801) 328-5059

<u>Part VII</u> Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- ◆ 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	more pers	than on is	one bot	not box h an or/tr	offic	ess er e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) BRUCE BINGHAM	2 00	х						0	0	0
BOARD MEMBER		_ ^						Ü	0	0
(2) JAKE BOYER	2 00	х						0	0	0
BOARD MEMBER										
(3) TERRY BUCKNER BOARD MEMBER	2 00	х						0	0	0
(4) SPENCER P ECCLES	2 00									
BOARD MEMBER	2 00	×						0	0	0
(5) DAVID R GOLDEN	2 00									
BOARD MEMBER		X						0	0	0
(6) CLARK D IVORY	2 00	,,								
BOARD MEMBER		Х						0	0	0
(7) KEITH MCMULLIN	2 00	Х						0	0	0
BOARD MEMBER										
(8) SCOTT W PARSON	2 00	х						0	0	0
BOARD MEMBER (9) GORDY HAYCOCK	3 00				_					
	3 00	х						0	0	0
BOARD MEMBER (10) VASILIOS PRISKOS	2 00									
	2 00	х						0	0	0
BOARD MEMBER (11) BERT R ZIMMERLI	3.00									
	2 00	x						0	0	0
BOARD MEMBER (12) ANDREA MOSS	3.00				_					
	2 00	x						0	0	0
BOARD MEMBER (13) KENT GIBSON	2 00									
	2 00	×						0	0	0
BOARD MEMBER (14) PEGGY LANDER	2 00				_					
	2 00	×						0	0	0
BOARD MEMBER (15) CAROL HUNTER	2 00									
	2 00	x						0	0	0
BOARD MEMBER (16) BRENT LOW	2 00									
	2 00	x						0	0	0
BOARD MEMBER (17) KELLY SANDERS	2 00									
	2 00	х						0	0	0
BOARD MEMBER	1	I		l	l	l	I I			

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 pers	than on is	one bot	not box h ar	chec x, unlo n offic rustee	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F Estim amount comper from	nated of other nsation the
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organi and re organiz	lated
(18) [MOLLY MAZZOLINI	2 00	х									0
	D MEMBER RAY PICKUP	5 00										
` '		3 00	Х		×				C)	0
(20) I	LORI CHILLINGWORTH	2 00										
BOAR	D MEMBER		Х						()	0
(21) I	RON JIBSON	5 00	,,		l ,				,			0
VICE	CHAIR		Х		Х				('	0
(22) I	ANE BEATTIE	55 00	x		×				424,269			35,478
	DENT & CEO								,			
` ,	NATALIE GOCHNOUR	52 00			×				43,504			3,749
	JTIVE VP WESLEY SMITH	50 00										
` ,	JTIVE VP				×				142,201)	14,003
	HEIDI WALKER	55 00										
C00					×				135,287			5,733
(26) I	ROBIN RIGGS	45 00			х				18,863	3 (2,991
EXEC	JTIVE VP				L				10,000		1	2,991
(27) 1	MARTIN CARPENTER	50 00			×				93,119)		12,282
	JTIVE VP DANIEL BRIMHALL	F0.00										
` ,	DANIEL DRIMITALE	50 00			×				95,671			8,634
(29) I	BRIAN LEMKE	50 00										
` ,	MPLOYEE					×			111,388	3		10,218
	FRED S BALL	0 00						l				
FORM	ER CEO							X	45,180)	0
1b	Sub-Total						•					
C	Total from continuation sheets to Pa	rt VII, Section A		•	•							
d					•				1,109,482	0		93,088
2	Total number of individuals (including \$100,000 of reportable compensation)				ed al	bove	e) who	rec	eived more than			
											Yes	No
3	Did the organization list any former of on line 1a? <i>If "Yes," complete Schedule</i>								ghest compensate	ed employee	Yes	
4	For any individual listed on line 1a, is organization and related organization individual									rom the	Yes	
5	Did any person listed on line 1a receivers rendered to the organization									individual for		No
	ection B. Indopondent Control	tors										
1	ction B. Independent Contrac Complete this table for your five high		ındene	nder	ıt co	ntra	ctors	tha	t received more t	han \$100,000 of		
_	compensation from the organization	•										_

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

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►0

Part V	/##1	Statement of Check of Sched		ponse or note to any lu	ne in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
sΩ	1a	Federated cam	paigns	1a				
ant	b	Membership du	ies	1b				
P E	c	Fundraising ev	ents	1c				
ffs, FA	d	Related organiz	zations					
n 	e	Government grant		 1e				
Sin					-			
uţi ie r	f	similar amounts no	ons, gifts, grants, and ot included above	1f				
멸형	g	Noncash contributi 1a-1f \$	ons included in lines					
ng p	h	Total. Add line:	s 1 a - 1 f					
	-			Business Code				
Ξe	2a	MEMBERSHIP DUE	S AND AS	900099	2,092,184	2,092,184		
e Ke	ь	BUSINESS PROMO		900099	632,206	624,133	8,073	
Other Revenue Contributions, Gifts, Grants 5 and Other Similar Amounts 2	c	MANAGEMENT REV	/ENUE	900099	87,600	87,600	,,,,,	
¥.	d	COMMITTEE DUES	& FEES	900099	32,180	32,180		
ૐ =	e	VARIOUS OTHER A	CTIVITI	900099	8,495	8,495		
Ta I	f	All other progra	am service revenue		· · · · · · · · · · · · · · · · · · ·	·		
ξ	_	Total. Add lines	- 2- 2f		2 952 665			
	g 3		ome (including divid		2,852,665			
		and other sımıl	aramounts)	🟲	620			620
	4		stment of tax-exempt bo					
	5	Royalties .	(ı) Real	(II) Personal				
	6a	Gross rents	(I) Keal	(II) Personal				
	ь	Less rental						
	c	expenses Rental income						
	d	or (loss) Net rental inco	me or (loss)					
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other		1,014				
	Ь	than inventory Less cost or						
		other basis and sales expenses		1,189				
	c	Gain or (loss)		-175				
	d	Net gain or (los	ss)	· · · · · •	-175			-175
ıne	8a	Gross income fevents (not inc						
Reve			s reported on line 1c ne 18					
ē	Ь	less directer	penses	a b				
₹	c		(loss) from fundraisii					
	9a		rom gaming activitiene 19					
	_	المحمد	nancas	a b				
	b c		penses (loss) from gaming a					
		Gross sales of returns and allo	inventory, less owances					
	Ь	less soctof-	oods sold l					
			oods sold (loss) from sales of i					
		Mıscellaneou		Business Code				
	11a	SPONSORSHI	PS	900099	988,640			988,640
	ь							
	С							
	d	All other reven						
	e	Total. Add lines	s 11a-11d		988,640			
	12	Total revenue.	See Instructions .		3,841,750	2,844,592	8,073	989,085

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	1,157,391								
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	724,827								
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	112,585								
9	Other employee benefits	133,231								
10	Payroll taxes	125,325								
11	Fees for services (non-employees)									
а	Management									
b	Legal									
c	Accounting	14,190								
d	Lobbying	30,000								
е	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)	3,024								
12	Advertising and promotion	360,434								
13	Office expenses	31,259								
14	Information technology	31,233								
15	Royalties									
16	Occupancy	312,281								
17	Travel	52,826								
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	32,020								
19	Conferences, conventions, and meetings	117,819								
20	Interest	2,942								
20 21	Payments to affiliates	2,342								
22	Depreciation, depletion, and amortization	101,562								
23	Insurance	9,847								
24 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)	5,047								
а	CONTRACT LABOR	84,385								
b	PRINTING AND PUBLICATIO	59,304								
С	REPAIRS AND MAINTENANCE	48,731								
d	SUPPLIES	35,120								
е	All other expenses	68,820								
25	Total functional expenses. Add lines 1 through 24e	3,585,903								
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)									

Part X Balance Sheet

2 Savings and temporary cash investments	(B) End of year 1 552,11: 2 313,76 3 4 84,41
2 Savings and temporary cash investments	2 313,76 3 4 84,41
3 Pledges and grants receivable, net	3 4 84,41
4 Accounts receivable, net	4 84,41
4 Accounts receivable, net	
Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	5
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 7 Notes and loans receivable, net	3
Prepaid expenses and deferred charges	
Prepaid expenses and deferred charges	6
Prepaid expenses and deferred charges	7
10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D b Less accumulated depreciation	8
Part VI of Schedule D	9 65,75
11 Investments—publicly traded securities	
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 11 112,337 16 Total assets. Add lines 1 through 15 (must equal line 34) 1,194,345 17 Accounts payable and accrued expenses 543,404 18 Grants payable 16 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 31 Escrewer systematical account liability. Complete Part IV of Schodule D 20	. 0c 218,90
13 Investments—program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 112,337 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 1,194,345 16 17 Accounts payable and accrued expenses 543,404 17 18 Grants payable 14 19 19 Deferred revenue 16 20 Tax-exempt bond liabilities 20 31 Escrewer system labilities 20	11
14 Intangible assets 12 15 Other assets See Part IV, line 11 112,337 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 1,194,345 16 17 Accounts payable and accrued expenses 543,404 17 18 Grants payable 18 19 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 31 Escrewer system lability of Schodule Data (assemble lability) Complete Bart IV of Schodule Data (assemble lability)	12
15 Other assets See Part IV, line 11	13
16 Total assets. Add lines 1 through 15 (must equal line 34) 1,194,345 16 17 Accounts payable and accrued expenses 543,404 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 31 Escrewer system of system of a secount liability. Complete Part IV of Schodule D	14
17 Accounts payable and accrued expenses	15 194,03
17 Accounts payable and accrued expenses	1,428,98
19 Deferred revenue	17 507,41
20 Tax-exempt bond liabilities	18
31 Feerow or susted all account liability. Complete Part IV of Schodule D	19
31 Feerow or susted all account liability. Complete Part IV of Schodule D	20
	21
Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L	
persons Complete Part II of Schedule L	22
23 Secured mortgages and notes payable to unrelated third parties 23	23
24 Unsecured notes and loans payable to unrelated third parties	24
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	
	25 571,45
	26 1,078,86
Organizations that follow SFAS 117 (ASC 958), check here ► 🔽 and complete lines 27 through 29, and lines 33 and 34.	
27 Unrestricted net assets	27 350,11
28 Temporarily restricted net assets	28
29 Permanently restricted net assets	29
Organizations that do not follow SFAS 117 (ASC 958), check here ► and	
lines 27 through 29, and lines 33 and 34. 94,268 27 27	
	30
30 Capital stock or trust principal, or current funds	31
32 Retained earnings, endowment, accumulated income, or other funds	32
33 Total net assets or fund balances	
34 Total liabilities and net assets/fund balances	33 350,11

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				F
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3,8	341,750
2	Total expenses (must equal Part IX, column (A), line 25)	2		3,5	585,903
3	Revenue less expenses Subtract line 2 from line 1	3		2	255,847
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			94,268
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			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			3
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		3	350,118
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie 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 sepa basis, consolidated basis, or both	ırate			
	☐ Separate basis ☐ Both consolidated and separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of th	e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain it 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 the Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b		

DLN: 93493131020685

OMB No 1545-0047

Open to Public Inspection

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.

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

	me of the organization T LAKE AREA CHAMBER OF COMMERCI			Employer iden	tification number
O, 12	T BINCE TINCETT OF THE TENE	-		87-0121901	
ar	t I-A Complete if the or	ganization is exempt unde	er section 501(c) or is a section 527	organization.
1	Provide a description of the or	ganızatıon's dırect and ındırect po	litical campaign act	tivities in Part IV	
2	Political expenditures			▶	\$
3	Volunteer hours				
ar'	t I-B Complete if the or	ganization is exempt unde	er section 501(c)(3).	
1	•	e tax incurred by the organization	-		\$
2	Enter the amount of any excis	e tax incurred by organization mar	nagers under sectio	n 4955 🕨	\$
3	If the organization incurred a	section 4955 tax, did it file Form 4	720 for this year?		┌ 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 unde	er section 501(c), except section 50	1(c)(3).
1	Enter the amount directly exp	ended by the filing organization for	section 527 exem	pt function activities 🕨	\$
2	Enter the amount of the filing exempt function activities	organization's funds contributed to	other organization	s for section 527 ▶	\$
3	Total exempt function expend	tures Add lines 1 and 2 Enter he	re and on Form 112	20-POL, line 17b ►	\$
4	Did the filing organization file	Form 1120-POL for this year?			⊤ Yes
5	organization made payments amount of political contributio	nd employer identification number For each organization listed, enter ns received that were promptly an political action committee (PAC)	the amount paid front of the directly delivered	om the filing organization's I to a separate political orga	funds Also enter the anization, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of politica contributions received and promptly and directly delivered to a separate political organization If none, enter - 0-

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	(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)				
f	Lobbying nontaxable amount Enter the amount is columns	rom the following table	ın both			
	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

	filed Form 5768 (election under section 501(h)).	1.	a)	(b)
For e activ	ach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying vity.	Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
а	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			1
С	Media advertisements?			1
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
j	Total Add lines 1c through 1i		1	
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			1
b	If "Yes," enter the amount of any tax incurred under section 4912			
c c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		1	
_	t III-A Complete if the organization is exempt under section 501(c)(4), section !	501/6	\/E\ /	r costion
Раг	501(c)(6).	טו(כ)(5), (or section
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		_	Yes No
1	Were substantially all (90% or more) dues received nondeductible by members?			1 No
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2 No
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3 Yes
Par	tIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered			
1	line 3, is answered "Yes." Dues, assessments and similar amounts from members	1		2,092,18
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).			2,092,18
а	Current year	2a		68,53
ь	Carryover from last year	2b		
c	Total	2c		68,53
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3		208,93
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4		
5	Taxable amount of lobbying and political expenditures (see instructions)	5		-140,39
Pa	art IV Supplemental Information			
	ovide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grount III-B, line 1 Also, complete this part for any additional information	ıp lıst),	Part II	-A, line 2, and
	Return Reference Explanation			

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

Schedule D (Form 990) 2013

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DLN: 93493131020685

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

Ciriai	Treveniue del vide			Inspection
	ne of the organization LAKE AREA CHAMBER OF COMMERCE			ployer identification number
Pa	rt I Organizations Maintaining Donor Advorganization answered "Yes" to Form 990			
		(a) Donor advised funds		(b) Funds and other accounts
	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 advisor funds are the organization's property, subject to the or		nor adv	rised Yes N
	Did the organization inform all grantees, donors, and do used only for charitable purposes and not for the beneft conferring impermissible private benefit?			
a	t III Conservation Easements. Complete if	the organization answered "Yes"	to Forn	m 990, Part IV, line 7.
	Purpose(s) of conservation easements held by the org 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) Preservation of a Preservation of a	certifie	ed historic structure
	easement on the last day of the tax year			1
				Held at the End of the Year
	Total number of conservation easements		2a	
	Total acreage restricted by conservation easements	on a show shows on all dad on 75 N	2b	
	Number of conservation easements on a certified history	• •	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	ed by tr	ne organization during
	Number of states where property subject to conservati	ion easement is located 🕨		
	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?		ndling of	f violations, and
	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation ease	ments	during the year
	Amount of expenses incurred in monitoring, inspecting	, and enforcing conservation easemen	ts durın	g the year
	Does each conservation easement reported on line 2(or and section 170(h)(4)(B)(ii)?	d) above satisfy the requirements of se	ction 1	70(h)(4)(B)(ı) Yes N
	In Part XIII, describe how the organization reports corbalance sheet, and include, if applicable, the text of the organization's accounting for conservation easeme	e footnote to the organization's financia		
ar	Organizations Maintaining Collection Complete if the organization answered "Y		or Ot	her Similar Assets.
1	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide, in Part XIII, the text of the footnote t	ts held for public exhibition, education	, or rese	earch in furtherance of public
)	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide the following amounts relating to thes	16 (ASC 958), to report in its revenue ts held for public exhibition, education	statem	nent and balance sheet
	(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, histor following amounts required to be reported under SFAS			· -
	Revenues included in Form 990, Part VIII, line 1			▶ \$
)	Assets included in Form 990, Part X			<u>-</u>
	A 33003 MCIAGEA III I OIM 330, FAILA			F Y

Part	TIT Organizations Maintaining Co	<u>llections of Art</u>	<u>, His</u>	tori	<u>cal Tr</u>	<u>'easui</u>	res, or Ot	the	' Similar Ass	ets (co	ontinued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other record	ds, ch	neck	any of t	he follo	wing that a	re a	significant use	of its	
а	Public exhibition		d	Γ	Loan	or exch	ange progra	ams			
b	Scholarly research		e	Γ	Other	-					
c	Preservation for future generations										
4	Provide a description of the organization's co Part XIII	ollections and explai	ın hov	w the	y furthe	er the o	rganızatıon'	s ex	empt purpose ır	l	
5	During the year, did the organization solicit of									_	_
Do.	assets to be sold to raise funds rather than t								· ·	Yes	l No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an						answered	1 1	es to Form 9:	7 0,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?						r other asse	ets r	ot [Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follov	ving	able						
									Am	ount	
С	Beginning balance							1c			
d	Additions during the year							1d			
e	Distributions during the year							1e			
f	Ending balance							1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?						Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	II Check here if the	expla	anatı	on has	been pi	rovided in P	art)	<iii< td=""><td></td><td>Γ</td></iii<>		Γ
Pa	rt V Endowment Funds. Complete										
	•	(a)Current year	(b)) Prior	year	b (c) Tw	o years back	(d) ¹	hree years back	(e) Four y	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 (lın	ie 1g	, colum	n (a)) h	eld as				
а	Board designated or quasi-endowment 🕨										
ь	Permanent endowment ▶										
С	Temporarily restricted endowment ►										
	The percentages in lines 2a, 2b, and 2c show	uld equal 100%									
За	Are there endowment funds not in the posses	ssion of the organiza	ation '	that	are held	d and a	dmınıstered	for	the		
	organization by								<u> </u>	Yes	No
	(i) unrelated organizations			•				٠	3a(i		
b	(ii) related organizations								3a(ii	<u>) </u>	<u> </u>
4	Describe in Part XIII the intended uses of the							•			<u> </u>
	t VI Land, Buildings, and Equipme					n answ	ered 'Yes'	to	Form 990. Pai	t IV. lı	ne
	11a. See Form 990, Part X, line			. 9							
	Description of property				a) Cost o sıs (ınve:		(b) Cost or o basis (othe		(c) Accumulated depreciation	(d) B	ook value
1a	Land		1	Ţ							
b	Buildings										
c	Leasehold improvements						281,	558	254,55	8	27,000
d	Equipment						730,	280	538,37	8	191,902
_e	Other	<u> </u>									
	I. Add lines 1a through 1e (Column (d) must e			ımn (B), line	10(c).)					218,902

Part VII Investments—Other Securities. Co	mplete if the organization	answered 'Yes' to For	m 990, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category (including name of security)	(b)Book value	(c) Method of v Cost or end-of-year	
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	P		
Part VIII Investments—Program Related. C	`nmplete if the organization		orm 990 Dart IV line 116
See Form 990, Part X, line 13.	complete if the organization	ir aliswered Tes to It	offit 990, Parciv, line iic
(a) Description of investment	(b) Book value	(c) Method of v	
		Cost or end-of-year	market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	F		
Part IX Other Assets. Complete if the organization	on answered 'Yes' to Form 990), Part IV, line 11d See	Form 990, Part X, line 15
(a) Desc			(b) Book value
(1) RELATED PARTY RECEIVABLE			194,034
Total. (Column (b) must equal Form 990, Part X, col.(B) line	15.)		194,034
Part X Other Liabilities. Complete if the org	janization answered 'Yes' t	o Form 990, Part IV,	line 11e or 11f. See
Form 990, Part X, line 25.			
1 (a) Description of liability	(b) Book value		
Federal income taxes			
ABATED RENT	177,560		
CAPITAL LEASES	8,014		
DEFERRED COMPENSATION	314,557		
LEASES PAYABLE	1,517		
RELATED PARTY PAYABLE	69,803		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	▶ 571,451		
2. Liability for uncertain tax positions In Part XIII, provid	le the text of the footnote to th	e organization's financia	I statements that

Par	t XI	Reconciliation of Revenue per Audited Financial Statements With Revenue the organization answered 'Yes' to Form 990, Part IV, line 12a.	per R	k eturn Complete if
1	Tota	revenue, gains, and other support per audited financial statements	1	
2	A mo	unts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net	nrealized gains on investments		
b	Dona	ted services and use of facilities	1	
c	Reco	veries of prior year grants	7	
d	Othe	r (Describe in Part XIII)..............2d	1	
e	Add	ines 2a through 2d	2e	
3	Subt	ract line 2e from line 1	3	
4	A mo	unts included on Form 990, Part VIII, line 12, but not on line 1		
а	Inve	stment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Othe	r (Describe in Part XIII)..................4b		
c	Add	ınes 4a and 4b	4c	
5	Tota	revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	
Part	XII	Reconciliation of Expenses per Audited Financial Statements With Expense	s per	Return. Complete
		if the organization answered 'Yes' to Form 990, Part IV, line 12a.		<u> </u>
1		expenses and losses per audited financial statements	1	
2		ints included on line 1 but not on Form 990, Part IX, line 25		
a		ted services and use of facilities	_	
b		year adjustments	_	
с		rlosses		
d		r (Describe in Part XIII)	┥.	
e		ines 2a through 2d	2e	
3		act line 2e from line 1	3	
4		ints included on Form 990, Part IX, line 25, but not on line 1:		
a		tment expenses not included on Form 990, Part VIII, line 7b 4a	_	
b		r (Describe in Part XIII)	┥.	
C -		ines 4a and 4b	4c	
5 Dors		expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	
Prov Part	ıde the	descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part t		de any additional
	R	turn Reference Explanation		
PART	X, LIN	THE SALT LAKE AREA CHAMBER OF COMMERCE IS ORGANIZED AS CORPORATION AND HAS BEEN RECOGNIZED BY THE INTERNAL R EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(A) (A) (A) (A) (A) (A) (A) (A) (A) (A)	EVENU DF THI 1(C)(6 IATE S MENT TERIA ULD R	JE SERVICE (IRS) AS E INTERNAL) THE SALT LAKE SUPPORT FOR ANY S, AND AS SUCH, L TO THE FINANCIAL ECOGNIZE FUTURE K BENEFITS AND

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

Schedule D (Form 990) 2013

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DLN: 93493131020685

OMB No 1545-0047

Compensation Information

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

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Schedule J (Form 990)

Name of the organization SALT LAKE AREA CHAMBER OF COMMERCE **Employer identification number**

87-0121901

Pai	t I Questions Regarding Compensation	1				
					Yes	No
1a	Check the appropriate box(es) if the organization progenous 990, Part VII, Section A, line 1a Complete Part III					_
	First-class or charter travel	\vdash	Housing allowance or residence for personal use			
	▼ Travel for companions	\vdash	Payments for business use of personal residence			
	Tax idemnification and gross-up payments		Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the or reimbursement or provision of all of the expenses de			1b	Yes	
2	Did the organization require substantiation prior to reduce to restrict the case officers including the CEO/Exec			2	Yes	
	directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?					
3	Indicate which, if any, of the following the filing organ organization's CEO/Executive Director Check all th used by a related organization to establish compens	at apply	y Do not check any boxes for methods			
	▼ Compensation committee		Written employment contract			
	☐ Independent compensation consultant	<u>~</u>	Compensation survey or study			
	Form 990 of other organizations	<u> </u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, For a related organization	Part VII	, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	paymen	t?	4a		No
b	Participate in, or receive payment from, a supplement	ntal non	qualified retirement plan?	4b		Νo
c	c Participate in, or receive payment from, an equity-based compensation arrangement?					Νo
	If "Yes" to any of lines 4a-c, list the persons and pro	ovide th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only mu	st comp	plete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, compensation contingent on the revenues of					
a	The organization?			5a		
ь	Any related organization?			5b		
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section A, compensation contingent on the net earnings of	line 1a	, did the organization pay or accrue any			
а	The organization?			6a		
b	Any related organization?			6b		
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, payments not described in lines 5 and 6? If "Yes," d			7		
8	Were any amounts reported in Form 990, Part VII, p	aid or a	ccured pursuant to a contract that was			
	subject to the initial contract exception described in		•			
	ın Part III			8		
9	If "Yes" to line 8, did the organization also follow the section 53 $4958-6(c)$?	rebutta	able presumption procedure described in Regulations	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(i) Base compensation (ii) Base compensation (iii) Bonus & (iii) Other incentive reportable compensation		(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported as deferred in prior Form 990	
(1)LANE BEATTIE PRESIDENT & CEO	(i) (ii)	424,269 0	0	0	22,950 0	12,528	459,747 0	0
(2)WESLEY SMITH EXECUTIVE VP	(i) (ii)	142,201 0	0	0	4,461 0	9,542	156,204 0	0
(3)FRED S BALL FORMER CEO	(i) (ii)	45,180 0	0	0	0	0	45,180 0	0

Schedule J (Form 990) 2013

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Return Reference Explanation

Schedule J (Form 990) 2013

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DLN: 93493131020685

SCHEDULE 0 (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.

OMB No 1545-0047 Open to Public

Inspection

Name of the organization	Employer identification number
SALT LAKE AREA CHAMBER OF COMMERCE	
	87-0121901

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	JAKE BOYER, MEMBER OF THE BOARD, IS A 1ST COUSIN TO CLARK IVORY, MEMBER OF THE BOARD
FORM 990, PART VI, SECTION A, LINE 6	THE BY LAWS ALLOW FOR 21 MEMBERS OF THE EXECUTIVE BOARD AND APPOINT GOVERNING POWER TO THESE MEMBERS
FORM 990, PART VI, SECTION B, LINE 11	A DETAILED REVIEW IS PERFORMED BY THE CFO OF THE SALT LAKE AREA CHAMBER OF COMMERCE AND AN ELECTRONIC COPY IS ALSO REVIEWED BY SALT LAKE AREA CHAMBER OF COMMERCE'S FINANCE COMMITTE E
FORM 990, PART VI, SECTION B, LINE 12C	THE CONFLICT OF INTEREST/ETHICS POLICY IS DISTRIBUTED ANNUALLY AND A CONFLICT OF INTEREST FORM IS FILLED OUT BY EACH STAFF MEMBER AND BOARD OF GOVERNORS MEMBER
FORM 990, PART VI, SECTION B, LINE 15	THE FINANCE COMMITTEE REVIEWS COMPENSATION AMOUNTS AND DETERMINES REASONABLENESS BASED ON COMPARABLE POSITIONS OUTSIDE PUBLICATIONS AND COMPARABLE CHAMBER 990 FILINGS ARE USED AS SOURCES
FORM 990, PART VI, SECTION C, LINE 19	GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND AUDITED FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST
FORM 990, PART XI, LINE 9	ROUNDING 3

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SCHEDULE R (Form 990)

Department of the Treasury

Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
 ► Attach to Form 990.
 ► See separate instructions.

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

DLN: 93493131020685OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization SALT LAKE AREA CHAMBER OF COMMERCE Employer identification number									
				87-0121	901				
Part I Identification of Disregarded Entities Comp	plete if the organization a	nswered "Yes" on	Form 990, Par	rt IV, line 33.					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	1	(f) Direct controlling entity			
Part II Identification of Related Tax-Exempt Orga or more related tax-exempt organizations during		ne organization ans	swered "Yes" c	on Form 990, F	Part IV,	line 34 because it h	ad on	е	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sect	tion (e) Public charity (if section 50	y status	(f) Direct controlling entity	Sectio (b)(contr	(13)	
							Yes	N	
(1) DOWNTOWN ALLIANCE INC 175 EAST 400 SOUTH SUITE 600	PROMOTE ECONOMIC DEVELOPMENT DOWNTOWN SLC	UT	501(C)6			SALT LAKE AREA CHAMBER OF COMMERCE	Yes		
SALT LAKE CITY, UT 84111 87-0488670									
(2) DOWNTOWN SLC PRESENTS 175 EAST 400 SOUTH SUITE 600	INCREASE PUBLIC APPRECIATION FOR VISUAL AND PERFORMING ARTS	UT	501(C)3	LINE 7		DOWNTOWN ALLIANCE	Yes		
SALT LAKE CITY, UT 84111 84-1382787									
(3) UTAH JOB OPPORTUNITIES FOUNDATION 175 EAST 400 SOUTH SUITE 600	EDUCATION WORKFORCE & DEVELOPMENT	UT	501(C)3	LINE 7		SALT LAKE AREA CHAMBER OF COMMERCE	Yes		
SALT LAKE CITY, UT 84111 84-1415808									
(4) SALT LAKE CHAMBER WOMENS BUSINESS CENTER 175 EAST 400 SOUTH SUITE 600	TO PROVIDE SUPPORT TO STRENGHTEN ECONOMY	UT	Т	LINE 7		SALT LAKE AREA CHAMBER OF COMMERCE	Yes		
SALT LAKE CITY, UT 84111 27-2903780									
(5) SLC BIKE SHARE	ENVIRONMENTALLY RESPONSIBLE TRANSPORTATION	UT	501(C)3	LINE 7		SALT LAKE AREA CHAMBER OF COMMERCE	Yes	T	
175 EAST 400 SOUTH SUITE 600									
SALT LAKE CITY, UT 84111 45-3547978								igspace	
			1	ı		I	1 '	1	

(a) Name, address, and EIN of related organization	Name, address, and EIN of		(c) Legal domicile (state or foreign country)	entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets		prtionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	j) eral or aging :ner?	(k) Percentag ownersh
					314)			Yes	No]	Yes	No	
V Identification of Related Org								were	d "Yes	" on Form	990,	Part	IV,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	Legal domicile ate or foreign		(e) Type of entit (C corp, S corp, or trust)	Type of entity Share of (C corp, S incom corp,		(g) e of end- f-year assets		(h) Percentage ownership		i) on 512 (13) rolled tity?	!
					1	<u> </u>			_		Yes		No
					_	+			_				+

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule										
1 D	iring the tax year, did the orgranization engage in any of the following transactions with one or more re	elated organizations li	sted in Parts II-IV?							
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No			
b	Gift, grant, or capital contribution to related organization(s)				1b		No			
c	Gift, grant, or capital contribution from related organization(s)				1c		No			
d	Loans or loan guarantees to or for related organization(s)				1d		No			
е	e Loans or loan guarantees by related organization(s)									
f	Dividends from related organization(s)				1f		No			
g Sale of assets to related organization(s)										
h	Purchase of assets from related organization(s)				1h		No			
i	Exchange of assets with related organization(s)				1i		No			
j	j Lease of facilities, equipment, or other assets to related organization(s)									
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		No			
ı	Performance of services or membership or fundraising solicitations for related organization(s)									
m	m Performance of services or membership or fundraising solicitations by related organization(s)									
n	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)									
0	Sharing of paid employees with related organization(s)				10	Yes				
р	Reimbursement paid to related organization(s) for expenses				1р		No			
q	Reimbursement paid by related organization(s) for expenses				1q		No			
r	Other transfer of cash or property to related organization(s)				1r		No			
s	Other transfer of cash or property from related organization(s)				1s		No			
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete	· · · · · · · · · · · · · · · · · · ·								
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo	unt ir	ivolved				
ee A	ditional Data Table									
		+								

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

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships																				
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		section for 501(c)(3) in organizations?		(f) (g) Share of total end-of-year assets	Share of total income assets		(g) Share of end-of-year assets					(h) Disproprtionate allocations?		(i) Code V ² UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	_	(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No								
												1								
													_							
			<u> </u>				l					<u> </u>								

Schedule R (Form 990) 2013

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2013

Additional Data

Software ID: Software Version:

EIN: 87-0121901

Name: SALT LAKE AREA CHAMBER OF COMMERCE

Form 990, Schedule R, Part V - Transactions With Related Organizations

To thi 990, Schedule R, Part V - Italisactions with Related Organizations								
(a) Name of other organization	(b) Transaction type(a-s)	(c) A mount Involved	(d) Method of determining amount involved					
DOWNTOWN ALLIANCE INC	N	235,313	TIME ALLOCATION					
DOWNTOWN ALLIANCE INC	0	590,512	TIME ALLOCATION					
DOWNTOWN SLC PRESENTS	0	20,678	TIME ALLOCATION					
UTAH JOB OPPORTUNITIES FOUNDATION	N	36,713	TIME ALLOCATION					
UTAH JOB OPPORTUNITIES FOUNDATION	0	133,387	TIME ALLOCATION					
SALT LAKE CHAMBER WOMENS BUSINESS CENTER	N	47,884	TIME ALLOCATION					
SALT LAKE CHAMBER WOMENS BUSINESS CENTER	0	127,607	TIME ALLOCATION					
SLC BIKE SHARE	N	21,985	TIME ALLOCATION					
SLC BIKE SHARE	0	129,521	TIME ALLOCATION					