efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493286018070 OMB No. 1545-0047 **Return of Organization Exempt From Income Tax**

Department of the

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.

► Go to <u>www.irs.gov/Form990</u> for instructions and the latest information.

2019

Open to Public

Interna		nue Service			Inspection						
A F	or the	e 2019 c	alendar year, or tax year beginning 01-01-2019 , and ending 12-31-201	9							
		pplicable:	C Name of organization VENANGO ARE CHAMBER OF COMMERCE	D Employer i	dentification number						
		change	TELLINOS THE GIVENDEN OF COPPERCE	20-283545	66						
	ime cha itial ret	_	Doing business as								
		n/terminated		E Telephone n	umher						
		return	Number and street (or P.O. box if mail is not delivered to street address) Room/suite PO BOX 376 24 SENECA STREET	·							
⊔ Ар	plicatio	on pending	City or town, state or province, country, and ZIP or foreign postal code	(814) 676-	-8521						
			OIL CITY, PA 16301	G Gross receip	atc ¢ 211 002						
			F Name and address of principal officer:) Is this a group return							
			SUSAN WILLIAMS	subordinates?	∏Yes ☑ No						
			24 SENECA ST OIL CITY, PA 16301 H(b	Are all subordinates	Yes No						
I Ta	x-exen	npt status:	☐ 501(c)(3) ☑ 501(c) (6) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527	included? If "No," attach a list.							
1 \A/	obcit	orb VEN		Group exemption nu	•						
, W	CDSIL	.e.P VLIV	IANGOCHAPIDER.ONG	oroup oxomption na							
K Fori	n of or	ganization:	☑ Corporation ☐ Trust ☐ Association ☐ Other ► L Year	r of formation: 2005 M	State of legal domicile:						
			·								
Pa	art I	Sumi	•								
			cribe the organization's mission or most significant activities: NGO AREA CHAMBER OF COMMERCE BUILDS, SERVES AND PROMOTES REGIONA	AL BUSINESS, THE CHA	MBER STRIVES TO KEEP						
	F	PROGRAM:	S CURRENT AND RESPONSIVE TO THE DEMANDS OF VENANGO'S CURRENT BUSI	NESS CLIMATE, ACTIN	IG AS A BRIDGE THAT						
as			SINESSES, ORGANIZATIONS AND RESIDENTS TOGETHER WITH INNOVATIVE PRO LONG-TERM ECONOMIC VITALITY, BUSINESS SUCCESS, JOB CREATION AND QU								
č	F	OR OUR I	MEMBERS TO ENHANCE THEIR CREDIBILITY, GAIN RECOGNITION, HAVE A VOICE	E IN ISSUES AFFECTIN	G BUSINESS, IMPROVE						
Ē	1	THEIR BOT	TOM LINES, GET INVOLVED THROUGH NETWORKING EVENTS AND VOLUNTEER	ING, AND SO MUCH MO	DRE						
Governance	-										
	-		П								
Activities &			s box $ ightharpoonup \square$ if the organization discontinued its operations or disposed of more the section markers of the governing body. (Bot $V(\cdot)$ line 1.2)								
Æ	1		r of voting members of the governing body (Part VI, line 1a)								
Ę	1		nber of individuals employed in calendar year 2019 (Part V, line 2a)		4 15 5 5						
⋖	1		nber of volunteers (estimate if necessary)		6 150						
	1		elated business revenue from Part VIII, column (C), line 12		7a 0						
	1		ated business taxable income from Form 990-T, line 39		7b						
	 -			Prior Year	Current Year						
_	8	Contribut	ions and grants (Part VIII, line 1h)	174,814							
ēnuē	9	Program :	service revenue (Part VIII, line 2g)	141,649							
Rave	10	Investme	nt income (Part VIII, column (A), lines 3, 4, and 7d)	366	225						
<u> </u>	11	Other rev	enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	5,371	3,477						
	12	Total reve	enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	322,200	311,983						
	13	Grants ar	d similar amounts paid (Part IX, column (A), lines 1–3)		C						
	14	Benefits p	paid to or for members (Part IX, column (A), line 4)		C						
83	15	Salaries,	other compensation, employee benefits (Part IX, column (A), lines 5–10)	115,526	125,392						
Expenses	16a	Professio	nal fundraising fees (Part IX, column (A), line 11e)		(
άx	b	Total fundr	aising expenses (Part IX, column (D), line 25) ▶0								
ш	17	Other exp	penses (Part IX, column (A), lines 11a-11d, 11f-24e)	135,281	157,120						
	18	Total exp	enses. Add lines 13–17 (must equal Part IX, column (A), line 25)	250,807	282,512						
	19	Revenue	less expenses. Subtract line 18 from line 12	71,393	· · · · · · · · · · · · · · · · · · ·						
Net Assets or Fund Balances			Be	ginning of Current Year	End of Year						
sets	20	Total asse	ets (Part X, line 16)	180,231	211,700						
AB B	1		ilities (Part X, line 26)	3,454							
ž.	1		s or fund balances. Subtract line 21 from line 20	176,777	· ·						
	art II		ature Block	,,							
			erjury, I declare that I have examined this return, including accompanying sched	ules and statements, a	nd to the best of my						
know	ledge	and belie	f, it is true, correct, and complete. Declaration of preparer (other than officer) is								
any K	nowle	eage.									
		*****		2020-09-18							
Sign		Signati	ure of officer	Date							
Here	•		WILLIAMS PRESIDENT / CEO								
		17	print name and title								
		Pi	rint/Type preparer's name Preparer's signature Date 2020-09		\ 366333						
Paid			rm's name ► RICHAR SHIELDS & CO PC	self-employed Firm's EIN ► 81-383							
	pare	#	THE PROPERTY OF THE PROPERTY O	THIT 5 EIN ► 01-383							
use	On	ıy Fi	rm's address ▶ PO BOX 435	Phone no. (814) 670	-0235						
			SENECA, PA 16346								
			this return with the preparer shown above? (see instructions)		Ves No						

Cat. No. 11282Y

Form **990** (2019)

For Paperwork Reduction Act Notice, see the separate instructions.

Form	990 (2019)				Page 2					
Pa	rt III Statement	of Program Service Ac	complishments							
			r note to any line in this Part III		🗹					
1	Briefly describe the o	rganization's mission:								
PROG BUSI ECOI THEI	GRAMS CURRENT AND I INESSES, ORGANIZATIO NOMIC VITALITY, BUSII R CREDIBILITY, GAIN F	RESPONSIVE TO THE DEMAN ONS AND RESIDENTS TOGET NESS SUCCESS, JOB CREATI	SERVES AND PROMOTES REGIONAL E IDS OF VENANGO'S CURRENT BUSINE THER WITH INNOVATIVE PROGRAMS T ON AND QUALITY OF LIFE. WE PROVI E IN ISSUES AFFECTING BUSINESS, I AND SO MUCH MORE	SS CLIMATE, ACTING AS A BR THAT STRENGTHEN VENANGO DE SEVERAL WAYS FOR OUR I	IDGE THAT LINKS COUNTY'S LONG-TERM MEMBERS TO ENHANCE					
2			gram services during the year which w	were not listed on						
	the prior Form 990 or 990-EZ?									
	If "Yes," describe the	se new services on Schedule	0.							
3	Did the organization of	cease conducting, or make s	gnificant changes in how it conducts,	any program						
	services? If "Yes," describe the	se changes on Schedule O.			☐ Yes 🗹 No					
4	Section 501(c)(3) and		nplishments for each of its three large e required to report the amount of gra service reported.							
4a	(Code: See Additional Data) (Expenses \$	including grants of \$) (Revenue \$)					
4b	(Code: See Additional Data) (Expenses \$	including grants of \$) (Revenue \$)					
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)					
	See Additional Data									
	(Code:) (Expenses \$	including grants of \$) (Revenue \$)					
	FLOW OF INFORMATION YOUNG PROFESSIONAL I THEIR CAREERS IN ORD INDIVIDUALS WHO DESI VENANGO COUNTY TO F	AND SPOTLIGHT LOCAL BUSINE: PROGRAM SPOTLIGHTS FUTURE I ER TO HELP SHAPE THE FUTURE IRE TO BECOME MORE EFFECTIVI	MEMBERSHIP PROGRAMS AND SUPPORT SEI SSES. PROGRAMS AND EVENTS INCLUDE SC LEADERS AND ENTREPRENEURS' OF THE ARI OF THE VENANGO AREA. LEADERSHIP VENA E LEADERS. THE PROGRAM SEEKS TO BETTE JUSTAIN. ALL PROGRAMS WERE SUCESSFUL TY.	OCIAL GATHERINGS, GOLF OUTING: EA, ALLOWING THEM TO MAKE CON NGO IS A NINE-MONTH PROGRAM ER UNDERSTAND THE PROBLEMS AI	S, DINNERS, ETC. THE INECTIONS AND DEVELOPE DESIGNED TO MOTIVATE ND THE OPPORTUNITIES IN					
4d	Other program service	ces (Describe in Schedule 0.)								
	(Expenses \$	including	grants of \$	(Revenue \$)					
4e	Total program serv	rice expenses ▶								

16

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12b

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14b

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20a

20b

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No

No

Nο

Nο

Nο

Nο

Nο

Nο

Nο

Nο

Nο

No

Form **990** (2019)

Pa	t 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)? <i>If "Yes," complete Schedule A</i>	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? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D,Part I	6		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? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D,</i> 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	9		No
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, 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		No
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
С	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? <i>If "Yes," complete Schedule D, Part VIII</i>	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		No

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

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional

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

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII

Was the organization included in consolidated, independent audited financial statements for the tax year?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)

lines 1c and 8a? If "Yes," complete Schedule G, Part II

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

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

orm	990 (2019)			Page 4
Par	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
	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
	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		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
	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? <i>If "Yes," complete Schedule L,</i> Part I	25b		
	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L,</i> Part III	27		No
	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, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		No
9	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
2	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
3	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
4	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
5a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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		
6	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
7	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
88	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	

Par	tV Statements Regarding Other IRS Filings and Tax Compliance (continued)			rage 3
	Enter the number of employees reported on Form W-3, Transmittal of Wage and			
Za	Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	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	
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	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)? If "Yes," enter the name of the foreign country:	4a		No
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
	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		No ——
	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?			
	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		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	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		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		No
16	If "Yes," see instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income? . If "Yes," complete Form 4720, Schedule O.	16		No

Da	Comment of Birtham Franch West and Birtham St. In a 2 through 7th Indian			· · · · ·
Pai	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a 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	i "No" respo	onse to	iines
Se	ection A. Governing Body and Management			
			Yes	No
1a	a Enter the number of voting members of the governing body at the end of the tax year 1a	15		
	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	15		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any oth officer, director, trustee, or key employee?	er 2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct superv of officers, directors or trustees, or key employees to a management company or other person?	ision 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	
7a	a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or m	ore		
	members of the governing body?	7a	Yes	No
_	persons other than the governing body?			110
8	the following:	БУ		
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, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Rev	enue Code	e.)	
			Yes	No
10a	a Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliate and branches to ensure their operations are consistent with the organization's exempt purposes?	es,		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing to form?	he 11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done		Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
	. ,		162	
15	Did the process for determining compensation of the following persons include a review and approval by independer persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	. 16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participal in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exemple status with respect to such arrangements?	npt		
	<u> </u>	16b		
	ection C. Disclosure List the states with which a copy of this Form 990 is required to be filed▶			
17 18	Section 6104 requires an organization to make its Form 1023 (or 1024-A 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.			
19	Own website Another's website Upon request Other (explain in Schedule O) 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, address, and telephone number of the person who possesses the organization's books and records >SUSAN WILLIAMS 24 SENECA ST OIL CITY, PA 16301 (814) 676-8521			

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. See instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.										
(A) Name and title	(B) Average hours per week (list any hours for related		ne bo	ox, ι n of or/t	t che unles ficer rust	ss pers and a ee)	son	r compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	MISC)	related organizations
(1) REBECCA BEACH DIRECTOR		Х						0	0	0
(2) RYAN BELL DIRECTOR		X						0	0	0
(3) MATTHEW DEAL DIRECTOR		Х						0	0	0
(4) DOUG EBERLE DIRECTOR		Х						0	0	0
(5) JEANNIE HENRY TREASURER		Х						0	0	0
(6) JAKE HICKMAN DIRECTOR	••••••	х						0	0	0
(7) KATHY KENTZEL DIRECTOR		X						0	0	0
(8) HOPE LINEMAN SECRETARY		х						0	0	0
(9) JOYCE LUTON DIRECTOR		х						0	0	0
(10) JIM MARSHALL DIRECTOR		X						0	0	0
(11) TRENTON MOULIN VICE CHAIRMA		X						0	0	0
(12) GREG PLOWMAN DIRECTOR		Х						0	0	0
(13) DAVID SNEDDEN DIRECTOR		X						0	0	0
(14) FRED TERWILLIGER DIRECTOR		Х						0	0	0
(15) MATT CALDWELL CHAIRMAN				×				0	0	0
							<u> </u>			Form 990 (2019)

Part VII

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

(A) (B) (C) (D) (E) (F)

Page 8

	(A) Name and title	Name and title Average hours per week (list any hours for related				n a d s	Estimated amount of o compensat from the organization							
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		isc)	MISC)		relate organiza	ed
												+		
												\perp		
c	Total from continuation sheets to F	· · · · · · · · · · · · · · · · · · ·		 	•		>							
2	Total number of individuals (includin of reportable compensation from the	g but not limited				bov-	e) who	rece	eived mo	ore than \$1	00,000			
													Yes	No
3	Did the organization list any former line 1a? <i>If "Yes," complete Schedule</i>			ee, k	еу е •	mpl •	oyee,	or hi	ghest co	mpensated	l employee on	3		No
4	For any individual listed on line 1a, i organization and related organization individual										n the			
5	Did any person listed on line 1a rece services rendered to the organization											5		No No
S	ection B. Independent Contrac	tors												110
1	Complete this table for your five high from the organization. Report compe	nest compensate										mpens	ation	
	Name	(A) and business addre	ess							Desc	(B) cription of services		(C) Compen	
												\dashv		

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 ▶

		(2019)	- f F	20						Page 9
Part	VIII				resno	onse or note to any	line in this Part VIII			П
		CHECK II SCHE	uuie	O contains a	атезро	onse of flote to any	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
	1	a Federated campa	aigns	· .	1a			revenue		312 - 314
ants		b Membership due	s.	· į	1b	101,823				
6r.		c Fundraising ever	nts .	[1c					
ifts, ar A		d Related organiza	tions	s	1d					
m :: G		e Government grants	(con	tributions)	1e					
Sign		f All other contribution and similar amount	ons, g s not	ifts, grants, included	1f	65,000				
Contributions, Gifts, Grants and Other Similar Amounts		above g Noncash contribution	ons in	ا cluded in						
		lines 1a - 1f:\$		Į	1g					
<u>ਨੂੰ</u>		h Total. Add lines	1a-1	f	•	•	166,823			
						Business Code	47,842	47,842		
e	2a	oIL HERITAGE FESTI	VAL			900099	47,842	47,642		
/enu	b	CRANBERRY FESTIVA	AL.			900099	28,814	28,814		
æ		CHAMBER OTHER PR	OGRA	\MS			21,987	21,987		
Program Service Revenue						900099	47.570	17.570		
Set	d	NEWSLETTER PROGR	RAM			900099	17,570	17,570		
gran	e	FLEX EVENT				900099	13,109	13,109		
Prog						-	12,136	12,136		
	f	All other program	serv	ice revenue	•		12,130	12,130		
		Total. Add lines				141,458	1	T	T	
		Investment income similar amounts) .		iuaing aivia		nterest, and other	225	5		225
		Income from invest	tmen	nt of tax-exe	mpt be	•				
	5	Royalties		(i) Rea		(ii) Personal	* <u> </u>			
		_		(1) 100		(ii) i ci sonai				
		a Gross rents Less: rental	6a				4			
		expenses	6b							
	С	Rental income or (loss)	6c							
	(d Net rental income	e or ((loss)			1			
				(i) Secur	ities	(ii) Other				
	7 <i>a</i>	Gross amount from sales of	7a							
		assets other than inventory								
	b	Less: cost or other basis and	7b							
		sales expenses					4			
		Gain or (loss)	7c							
		d Net gain or (loss) a Gross income from fo				· · · >				
ne	Uč	(not including \$		of						
Ven		contributions reporte See Part IV, line 18			8a					
Other Revenue	ŀ	b Less: direct exper	ises		8b					
thei	(c Net income or (los	ss) fr	om fundrais	ing ev	ents 🕨	_			
	9a	Gross income from								
	_	See Part IV, line 19			9a					
		b Less: direct exper c Net income or (los			9b	ies .				
	•	a iver income or (io.	33, 11	om gaming	CCIVIC	les >				
	10	aGross sales of invertering	entor	ry, less	10a					
	ŀ	b Less: cost of good			10a		-			
	·	C Net income or (los	ss) fr	om sales of	invent	cory ►	_			
		Miscellaneo		evenue		Business Code	2 477	2.47		
	13	la MISCELLANEOUS				90009	9 3,477	3,477		
	ı	b				•				
	•	d All other revenue	•							
	•	e Total. Add lines 1	1a-1	11d		•	3,477	,		
_	12	2 Total revenue. S	ee ir	nstructions		• • • •	311,983	144,935		225
	_									Form 000 (2010)

	1 990 (2019)				Page 10
P	art IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must of	complete all columns	All other organization	ns must complete col	umn (Δ)
	Check if Schedule O contains a response or note to ar		=	ins must complete cor	.
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21		·	,	·
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	111,623			
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9	Other employee benefits	4,288			
10	Payroll taxes	9,481			
11	Fees for services (non-employees):				
a	Management				
Ŀ	Legal	2,370			
c	Accounting				
	I Lobbying				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,326			
12	Advertising and promotion	6,201			
	Office expenses	17,383			
	Information technology				
	Royalties				
	Occupancy	13,266			
	Travel	566			
	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	150			
20	Interest				
21	Payments to affiliates				
	Depreciation, depletion, and amortization				
	Insurance	4,824			
	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.)				
	a FESTIVAL EXPENSES - OHF	40,800			
	b BE HERE YP PROJECT COSTS	19,883			
	c MEMBER EVENTS	11,652			
	d COPIER LEASE	10,214			
	e All other expenses	28,485			
25	Total functional expenses. Add lines 1 through 24e	282,512	0	0	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
	Check here ► if following SOP 98-2 (ASC 958-720).				
					Form 990 (2019)

Inventories for sale or use . . Prepaid expenses and deferred charges .

10a Land, buildings, and equipment: cost or other

Investments—publicly traded securities .

Other assets. See Part IV, line 11 . . .

Accounts payable and accrued expenses

Investments—other securities. See Part IV, line 11 .

Total assets. Add lines 1 through 15 (must equal line 34)

Escrow or custodial account liability. Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Organizations that follow FASB ASC 958, check here ▶

Organizations that do not follow FASB ASC 958, check here ▶

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

and other liabilities not included on lines 17 - 24).

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity

Other liabilities (including federal income tax, payables to related third parties,

Investments—program-related. See Part IV, line 11

basis. Complete Part VI of Schedule D

b Less: accumulated depreciation

Intangible assets .

Grants payable .

Deferred revenue . .

Tax-exempt bond liabilities .

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions

complete lines 29 through 33.

Total net assets or fund balances

Form 990 (2019)

1 2

11

12

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16

17

18

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21

23

24

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27

28

31

32

33

Liabilities 22

Fund Balances

٥ 29

Assets 30 5

6 7

9

10c

11

12 13

14

15

16

17

18

19

20

21

22

23

24

25

26

27

28

29

30

31

32

33

3.454

176,777

176,777

180,231

11.497

1,326

180,231

3,454

Page **11**

185,961

14,961

10.778

211,700

5,452

5.452

206,248

206,248

211,700

Form 990 (2019)

	(A) Beginning of year		End of year
Cash-non-interest-bearing	137,329	1	
Savings and temporary cash investments		2	
Pledges and grants receivable, net		3	
Accounts receivable, net	30,079	4	

3 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B). Notes and loans receivable, net . . . Assets

10a

10b

Check if Schedule O contains a response or note to any line in this Part IX .

Form	990 (2019)				Page 12	
Pa	Reconcilliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>		<u> </u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1			311,983	
2	Total expenses (must equal Part IX, column (A), line 25)	2			282,512	
3	Revenue less expenses. Subtract line 2 from line 1	3			29,471	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			176,777	
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				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10			206,248	
Pa	TXII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
	Accounting method used to prepare the Form 990:	on a	2a	Yes	No No	
	Separate basis Consolidated basis Both consolidated and separate basis		24		N	
b	Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis	basis,	2b		No	
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O.	2c			
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir Audit Act and OMB Circular A-133?	ngle	За			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requiaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	red	3b			

Additional Data

Software ID:

Software Version:

EIN: 20-2835456

Name: VENANGO ARE CHAMBER OF COMMERCE

Form 990 (2019)

Form 990, Part III, Line 4a:

THE MEMBERS OF THE VENANGO AREA CHAMBER OF COMMERCE ANNUALLY PRODUCE JOINTLY THROUGH VOLUNTEER EFFORTS AN "OIL HERITAGE FESTIVAL" IN AN EFFORT TO ADVANCE THE PUBLIC PERCEPTION OF THE CITY OF OIL CITY, AS WELL AS VENANGO COUNTY AND TO INVITE PEOPLE FROM OUTSTIDE THE COMMUNITY, AS WELL AS LOCAL RESIDENTS, TO COME TO THE CITY AND PARTICIPATE IN THE CITY'S PAST AND CURRENT HERITAGE. THE EVENT IS MEANT TO CREATE BUSINESS, INFORAMTION, AND LEADERSHIP CONNECTIONS.

Form 990, Part III, Line 4b: LEADERSHIP PROGRAMS: THE CHAMBER HOSTS SEVERAL PROGRAMS TO ADVANCE LEADERSHIP IN VENANGO COUNTY, WORKING WITH LOCAL SCHOOLS, YOUNG

PROFESSIONALS AND CIVIC LEADERSHIP. - VENANGOREADY - K-12 WORK READINESS PROGRAM - FLEX - FUTURE LEADERS ENTEPRENEURS EXCHANGE (YOUNG

PROFESSIONALS) - LEADERSHIP VENANGO - 9 MONTH LEADERSHIP PROGRAM

Form 990, Part III, Line 4c: THE CHAMBER ADVOCATES FOR A HEALTHY BUSINESS CLIMATE, THROUGH THE BE HERE VENANGO QUALITY OF LIFE INITIATIVE, LEGISLATIVE ADVOCACY AND

CONVENING BUSINESS FORUMS AND EDUCATIONAL OPPORTUNITIES FOR MEMBER BUSINESSES AND ORGANIZATIONS.

efile GRAPHIC p	rint - DO NOT PROCESS As Filed Data -		DLN: 93493286018070
SCHEDULE O (Form 990 or 990- EZ) Department of the Treasury	Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. Go to www.irs.gov/Form990 for the latest information.		OMB No. 1545-0047 2019 Open to Public Inspection
VENANGO ARE CHAMBER OF COMMERCE		20-283545	identification number
Return Reference	Explanation		
FORM 990 - ORGANIZATION'S MISSION	THE VENANGO AREA CHAMBER OF COMMERCE BUILDS, SERVES AND PRO AMBER STRIVES TO KEEP PROGRAMS CURRENT AND RESPONSIVE TO THE BUSINESS CLIMATE, ACTING AS A BRIDGE THAT LINKS BUSINESSES, ORGA GETHER WITH INNOVATIVE PROGRAMS THAT STRENGTHEN VENANGO COLVITALI TY, BUSINESS SUCCESS, JOB CREATION AND QUALITY OF LIFE. WE PROVID MBERS TO ENHANCE THEIR CREDIBILITY, GAIN RECOGNITION, HAVE A VOICINESS, IMPROVE THEIR BOTTOM LINES, GET INVOLVED THROUGH NETWORD, AND SO MUCH MORE	E DEMANDS A NIZATIONS A JNTY'S LONG DE SEVERAL CE IN ISSUES	OF VENANGO'S CURRENT AND RESIDENTS TO G-TERM ECONOMIC WAYS FOR OUR ME S AFFECTING BUS

Return Reference	Explanation
FORM 990, PAGE 2, PART III, LINE 4D	ALL OTHER PROGRAMS INCLUDE, BUT NOT LIMITED TO, MEMBERSHIP PROGRAMS AND SUPPORT SERVICES I N ORDER TO PROMOTE BUSINESS CONNECTIONS, FLOW OF INFORMATION AND SPOTLIGHT LOCAL BUSINESSE S. PROGRAMS AND EVENTS INCLUDE SOCIAL GATHERINGS, GOLF OUTINGS, DINNERS, ETC. THE YOUNG PR OFESSIONAL PROGRAM SPOTLIGHTS FUTURE LEADERS AND ENTREPRENEURS' OF THE AREA, ALLOWING THEM TO MAKE CONNECTIONS AND DEVELOPE THEIR CAREERS IN ORDER TO HELP SHAPE THE FUTURE OF THE V ENANGO AREA. LEADERSHIP VENANGO IS A NINE-MONTH PROGRAM DESIGNED TO MOTIVATE INDIVIDUALS W HO DESIRE TO BECOME MORE EFFECTIVE LEADERS. THE PROGRAM SEEKS TO BETTER UNDERSTAND THE PROBLEMS AND THE OPPORTUNITIES IN VENANGO COUNTY TO FURTHER FUTURE GROWTH AND SUSTAIN. ALL PR OGRAMS WERE SUCESSFUL THIS YEAR AND CONTINUE TO GROW INTERST AMONG THE RESIDENTS AND BUSIN ESSOWNERS OF VENANGO COUNTY.

Return Explanation
Reference

LINE 6

FORM 990, PAGE 6, PART VI.

Return Explanation
Reference

FORM 990, PAGE 6, PART VI, LINE 7A

Return Explanation
Reference

FORM 990, A COPY OF THE COMPLETED FORM 990 IS RETAINED AND MADE AVAILABLE TO EACH MEMBER OF THE BOARD OF DIRECTORS FOR THEIR REVIEW.

PART VI,
LINE 11B

Return Explanation
Reference

FORM 990, AT THE BEGINNING OF EACH YEAR THIS REQUIRMENT IS REVIEWED WITH THE BOARD MEMBERS AND EACH IS PART VI, LINE 12C

Return Explanation
Reference

FORM 990,	EMPLOYEES ARE EVALUATED BY A PERSONNEL COMMITTEE AND THEIR RECOMMENDATIONS ARE FORWARDED TO
PAGE 6,	THE DIRECTORS FOR THEIR APPROVAL.
PART VI,	
LINE 15A	

Return Explanation
Reference

FORM 990,	EMPLOYEES ARE EVALUATED BY A PERSONNEL COMMITTEE AND THEIR RECOMMENDATIONS ARE FORWARDED TO
PAGE 6,	THE DIRECTORS FOR THEIR APPROVAL.
PART VI,	
LINE 15B	

Return Explanation

FORM 990, PAGE 6, PART VI, LINE 19

990 Schedule O, Supplemental Information

Return

Reference	
FORM 990,	FLEX PROGRAM EXPESNES 6,648 0 0 WEBSITE DEVELOPEMENT 1,308 5,230 0 LEADERSHIP VENANGO PROG
PART IX,	RA 5,410 0 0 POSTAGE 926 3,706 0 DUES AND SUBSCRIPTIONS 2,624 0 0 MISCELLANEOUS 1,595 0 0
LINE 24E	BANK FEES 0 913 0 REGISTRATIONS AND LICENSE 125 0 0 TOTAL 18.636 9.849 0

Explanation