Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2017

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as It may be made public. Open to Public ► Go to www.irs.gov/Form990 for instructions and the latest information. Inspection 2017, and ending For the 2017 calendar year, or tax year beginning

										
_		pplicable:		Granby Chamber o	or Commerc	:e				D Employer Identification no.
	ddress c	thange	Doing business as							84-0755264
∐ N:	ame cha	nge	Number and street (or	P.O. box if mail is not delivered t	to street address)			Room/su	rte :	E Telephone number
∐ h	itiai retu	m	PO Box 35	<u> </u>						*···
∏ Fi	na! retur	n/terminated	City or town, state or p	province, country, and ZIP or fore	ign postal code					G Gross receipts
□ Ar	mended	return	Granby, CO	80446						\$ 256,037
☐ A	pplication	n pending	F Name and address of	principal officer Frank	Delay			H(a) H	this a group return	for autoordinates? Yes X No
			Same as Ca	•	-	_		1	re all subordinat	
1 Te	ax-exem	pt status:		(6) ◀ (insert no.)	4947(a)(1) or	527		⊣ ՝ ։		a list. (see instructions)
		▶ · N/A		(100011101)				H(c)	Group exemptio	•
			Corporation Trust	Association ☐ Other ▶		I Voor	of formation: 1		M State of leg	
Par	4 1			Masociation Other		L Tear	n tormacon. 1	340	m state or let	gardonnidie. CO
		Summar					6			
3	,	-	-	s mission or most significa						
				to advancing ec						
뚩	ł	<u>pride (l</u>	ocal events)	in the Greater G	ranby are	a while p	reservin	g its	unique	cultural
Ĕ	1	<u>heritage</u>	and sense of	community.						
Š	2	Check this be	ox ▶ 🔲 if the organi	ization discontinued its op	perations or dis	posed of more	e than 25% o	of its net	assets.	
9	3	Number of v	oting members of the	e governing body (Part VI	, (ine 1a) .				3	7
Activities & Governance	4	Number of in	ndependent voting m	embers of the governing t	oody (Part VI,	line 1b)			4	7
ŧ)		•	oyed in calendar year 201	• •				5	7
疲	l		r of volunteers (estim	•	•				6	7
ď	1			from Part VIII, column (C					· -	<u> </u>
				ncome from Form 990-T, I	·					
	B	iver unrelate	u business taxable ii	icome nom Form 550-1, i	iiie 34	· · · · · · ·	••••			
							}-	Pn	or Year	Current Year
_	l .		s and grants (Part VII	•			_		232,36	255,975
2	9	Program ser	vice revenue (Part V	'ill, line 2g)			• • • • •			0
Revenue	10	Investment in	ncome (Part VIII, colu	umn (A), lines 3, 4, and 7d	l)		_			10
ž	11	Other revenu	æ (Part Vill, column i	(A), lines 5, 6d, 8c, 9c, 10	c, and 11e)				41	.6 (255)
	12	Total revenue	e - add lines 8 throug	h 11 (must equal Part VIII	l, column (A), l	ine 12)			232,77	7 255,730
	13	Grants and s	imilar amounts paid	(Part IX, column (A), lines	: 1-3)					0
	14	Benefits paid	d to or for members (Part IX, column (A), line 4)					0
	1	-		ployee benefits (Part IX, o	=		[93,48	2 87,336
8	l .		•	irt IX, column (A), line 11e			-			0
Expenses			-	IX, column (D), line 25)			0			<u></u>
봈	1			(A), lines 11a-11d, 11f-24					128,66	155,063
	ſ	•	•	• •	•		_			
				(must equal Part IX, colur					222,14	
	19	Revenue les	s expenses. Subtrac	t line 18 from line 12	· ·	:UEIV E			10,63	
58					w l	·	ı∪⊩	Seginning	of Current Year	
Net Assets (Fund Belenc	20	Total assets	(Part X, line 16)		1891 1892 Al	16 6 6 66	88: 818-08		86,62	
₹2	21	Total liabilitie	es (Part X, line 26)			JG 2.0 20°	10		1,77	1 2,972
25	22	Net assets o	r fund balances. Su	btract line 21 from line 20	Ψ.	· · · · · · · · · · · · · · · · · · ·			84,85	2 9 7,393
Pari	H	Signatu	re Block			MEN!	1.4.			
Under	penaltie	s of perjury, I dec	clare that I have examined t	this return, including accompanying	ng schedules and	tatements, end to	the best of my kr	nowledge a	nd belief, it is	
true, co	orrect, 8	nd complete. Dec	claration of preparer (other)	than officer) is based on all inform	nation of which pre	parer has any know	wledge.			
	l		M /							8/15/18
Sign		Signatur	re of officer						Da	to
Here		Emani	k Doloss Proc	idont						
Here	1		k Delay, Pres: print name and title	1060.0						
		<u> </u>	·			Date		10		 /
		Print/Type pre		Preparer's signature	// ./	\sim		- 1	heck 📙 if	PTIN "
Paid -			iterling	- Cum	WHIL		5-2018		elf-employed	P00419588
•	arer		▶ Cind	y Sterling CPA I	nc			Firm's EIN	I ▶	
Use (Only	Firm's eddres:	s PO B	ox 469 (\		_ \		Phone no.		
			Grani	by CO 80446	<u>\</u>	7			970-1	87-2380
May th	ne IRS	discuss this		rer shown above? (see in	istructions)					⊠ Yes 🗌 No
				ho conserve incharations						E 000 (2017)

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Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," 1 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 4 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, 5 Χ 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 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, 7 the environment, historic land areas, or historic structures? If "Yes." complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 complete Schedule D. Part III Х 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 9 debt negotiation services? If "Yes," complete Schedule D, Part IV 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted 10 endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 11a **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 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 d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets 11d e Did the organization report an amount for other liabilities in Part X, line 25° If "Yes," complete Schedule D, Part X 11e Х f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses 11f the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a 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 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 14a 14a Did the organization maintain an office, employees, or agents outside of the United States? 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 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 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other 16 assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19

Part IV

No Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a Χ 20a 20b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21 domestic government on Part IX, column (A), line 12 If "Yes," complete Schedule I, Parts I and II Χ 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 Χ Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 23 Χ 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 b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 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 24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a 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 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? 25b Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any 26 current or former officers, directors, trustees, key employees, highest compensated employees, or 26 Χ disqualified persons? If "Yes," complete Schedule L, Part II 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 Χ Was the organization a party to a business transaction with one of the following parties (see Schedule L, 28 Part IV instructions for applicable filing thresholds, conditions, and exceptions) 28a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete b 28b Х 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 X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 Х conservation contributions? If "Yes," complete Schedule M 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 Х Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes." 32 complete Schedule N, Part II 32 Χ Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 Χ 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, 34 Did the organization have a controlled entity within the meaning of section 512(b)(13)? Χ 35a 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 Χ 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable 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, Х 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O

	990 (2017) Granby Chamber of Commerce 84-07552	264		Page 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 10	2	}	'
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	<u> </u>		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			1 .
	reportable gaming (gambling) winnings to prize winners?	1c	X	}
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a	4		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	↓
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		<u>X</u>
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	L	↓
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	J	j)
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			}
	account)?	4a		X_
þ	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts	ł	l	1
	(FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c]	<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	Ì		Ì
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	i	İ	ľ
	gifts were not tax deductible?	6b	<u> </u>	ļ
7	Organizations that may receive deductible contributions under section 170(c).	j		}
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			. '
	and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	{	1	{
	required to file Form 8282?	7c		X
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		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	ļ	X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	<u> </u>	X
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	└ ─	X
9	Sponsoring organizations maintaining donor advised funds.	-	l	
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	 	X
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	<u> </u>	↓
10	Section 501(c)(7) organizations. Enter	1		
а	Initiation fees and capital contributions included on Part VIII, line 12	1	1	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	4		
11	Section 501(c)(12) organizations. Enter	-		
а	Gross income from members or shareholders	4		
b	Gross income from other sources (Do not net amounts due or paid to other sources	1		
	against amounts due or received from them)	1	1	1
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	<u> </u>	<u> </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	1		1
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u></u>	↓	↓
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	 	↓ _
	Note. See the instructions for additional information the organization must report on Schedule O		1	
b	Enter the amount of reserves the organization is required to maintain by the states in which		ĺ	
	the organization is licensed to issue qualified health plans]	1	1

14a

14b

c Enter the amount of reserves on hand

14a Did the organization receive any payments for indoor tanning services during the tax year?

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

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Pa	rt VIII Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "I	Vo"		
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions			C 3
	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>	· · ·	· 🛚
Sec	tion A. Governing Body and Management			,
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 7			
	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			1
	committee, explain in Schedule O			1
b	Enter the number of voting members included in line 1a, above, who are independent 1b 7			1
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2	Χ	<u> </u>
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		<u>X</u>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a	Х	ľ
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		X
	Did the organization contemporaneously document the meetings held or written actions undertaken during			 ^`
8				
_	the year by the following	8a	\bar{x}	
a	The governing body?	8b		├─
þ	2201 Committee than dedicting to dot on Solicia of the governing 2027	- 00	X	├
9	is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			Į .,
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			т—
		100	Yes	No 37
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			}
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		⊢ —
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		ļ
þ	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		X_
þ	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		<u> </u>
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	1		
	describe in Schedule O how this was done	12c		<u> </u>
13	Did the organization have a written whistleblower policy?	13		<u>X</u>
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			1
a	The organization's CEO, Executive Director, or top management official	15a	Х]
b	Other officers or key employees of the organization	15b	Х	
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a		,	,	1
	with a taxable entity during the year?	16a	ĺ	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	1		 ^
b	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	ł	1	
		16h	ł	ł
576		100	L	ــــــــــــــــــــــــــــــــــــــ
	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed Colorado			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 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, address, and telephone number of the person who possesses the organization's books and records			
	Frank Delay (978)887-2311, PO Box 35, Granby, CO 80446			
		Form	990	(2017)

Form 990 (of Comm					55264	Page
Part VII	Compensat	tion of	Officers,	Directors,	Trustees,	Key Employees	s, Highest	Compensated	Employe	æs, and
	Independer	nt Cont	ractors							

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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees; officers; key employees; highest compensated employees, and former such persons

EEA

KI Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

Check this box in flettiles the diganization flor any related		, , , , , , , , , , , , , , , , , , ,			C)			,		
(A) Name and Title	(B) Average hours per week (list any hours for	box, offic	unles er and	Pos eck m ss per d a dii	sition iore the son is rector.	nan one s both ar /trustee)		(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) Kristie Delay Director	4.00	Χ_						0	0	0
(2) Joe Kelley	4.00	Х						0	0	o_
(3) TeNeil Hartley	4.00	Х						0	0	O
(4) Mike Perolet Director	4.00	Х						0	0	0
(5) Jennifer Lespesa Director	3.00	Х						0	00	0
(6) Stacy Dellamano Director	2.00	Х						0	0	00
(7) Frank Delay President	1			X				0	00	0
(8)										·
(9)										
(10)						·				
(11)										
(12)										
(13)										
(14)										

Form 990 (2O17)

Part	VII Section A. Officers, Directors, Trustees,	Key Employ	00s, a	nd H	ligh	est (Comp	ensa	ted Employees (d	continued)			
					(C	C) Ition							
	(A)	(B)	(do n	ot che			an one		(D)	(E)	-	(F)	
	Name and title	Average hours per					both an trustee)		Reportable compensation	Reportable compensation from	1	stimated nount of	
		week (list any		т –	Γ.	Γ_	<u>_</u>	٦	from the	related organizations	COM	other pensatio	ND.
		hours for related	divid	stitui	Officer	Key employee	ng ng ng	Former	organization	(W-2/1099-MISC)		rom the	л
		organizations below dotted	ctat	onal		l g	e 8	,	(W-2/1099-MISC)		1 -	janizatio id related	
		line)	Individual trustee or director	Institutional trustee		8	npen				1	anızatıor	
				8	!		Highest compensated employee						
			l				-						
		ļ	-								 		
(15)	_ ~		l			l							
(46)		<u> </u>	-										
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(17)		 		-		 					 		
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(18)													
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(19)				,	ļ					1			
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			<u> </u>				<u> </u>			ļ			
1b	Sub-total				• •	• •		•					
C	Total from continuation sheets to Part VII, Section				• •	• •		•					
<u>d</u>	Total (add lines 1b and 1c)							2050	than \$100,000 of	0			0
2	Total number of individuals (including but not limited reportable compensation from the organization	to those liste	o abo	ve) v	WITO	iece	iveu ii	IUIE	(iiaii \$ 100,000 0i	0			
	reportable compensation from the organization							_				Yes	No
3	Did the organization list any former officer, director,	or trustee, ke	ev em	ploye	e, o	r hig	hest o	omp	ensated				
	employee on line 1a? If "Yes," complete Schedule J										3		X
4	For any individual listed on line 1a, is the sum of rep	ortable comp	ensat	ion a	and o	other	comp	ensa	ation from the				
	organization and related organizations greater than												
	ındıvıdual										4		X
5	Did any person listed on line 1a receive or accrue c						_		on or individual				١,,
Coati	for services rendered to the organization? If "Yes," o	complete Sch	edule	J for	suc	h pe	rson		 		5	L	X
1	on B. Independent Contractors Complete this table for your five highest compensat	ad indopondo			tors	that	recen	ed n	ore than \$100 000	0 of			
'	compensation from the organization Report compe												
	year	ilisation for th	c care	Hour	you		ung w		William the digama	ALION O LEX			
	(A)					-			(B)		· · · · · ·	(C)	
	Name and business address								Description of	i		pensatio	n
						_							
													
2	Total number of independent contractors (including			_	uste	a ab	ove) v	vno		1			
EEA	received more than \$100,000 of compensation from	i the organiza	10011	_							Form	990 /2	0171
												/-	/

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (D) Unrelated Total revenue Related or Revenue excluded from tax exempt function revenue under sections 512-514 Federated campaigns 1a Contributions, Gifts, Grants and Other Similar Amounts 1b Membership dues 12,629 Fundraising events 1c 65,150 d Related organizations 1d Government grants (contributions) . . 1e 178,196 All other contributions, gifts, grants, and similar amounts not included above 1f g Noncash contributions included in lines 1a-1f \$ 255,975 **Business Code** Program Service Revenue f All other program service revenue g Total. Add lines 2a-2f investment income (including dividends, interest, 10 Income from investment of tax-exempt bond proceeds 5 (ı) Real (ii) Personal **b** Less rental expenses · · · · c Rental income or (loss) · · · d Net rental income or (loss) · · · · · · · · · · · · · · · ▶ (i) Secunties (II) Other 7a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) Other Revenue 8a Gross income from fundraising events (not including \$ 65,150 of contributions reported on line 1c) See Part IV, line 18 a **b** Less direct expenses b c Net income or (loss) from fundraising events · · · · · · ▶ 9a Gross income from gaming activities See Part IV, line 19 a **b** Less direct expenses b c Net income or (loss) from gaming activities · · · · · · · ▶ 10a Gross sales of inventory, less returns and allowances · · · · 40 **b** Less cost of goods sold **b** 307 c Net income or (loss) from sales of inventory (267 (267 Miscellaneous Revenue **Business Code** 11a Refund 900099 b Vendor Income 10 900099 10 e Total. Add lines 11a-11d 12 12 Total revenue. See instructions 255,730 (245)

84-0755264

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (A) Total expenses (D) Do not include amounts reported on lines 6b, 7b, (B) (C) Program service Management and Fundraising 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 5 trustees, and key employees 54,252 35,264 18,988 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 salanes and wages 25,370 25,370 Pension plan accruals and contributions (include 8 section 401(k) and 403(b) employer contributions) 9 10 7,714 6,262 1,452 11 Fees for services (non-employees) b C 3,110 3,110 d Professional fundraising services See Part IV, line 17 f Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 12 Advertising and promotion 51,719 51,719 Office expenses 13 7,419 7,419 14 Information technology 15 16 14,030 10,595 3,435 17 965 965 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 29 20 62 33 Payments to affiliates 21 22 Depreciation, depletion, and amortization 23 6,148 2,651 3,497 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) 1,151 45 1,106 Repairs 682 682 Bank and Credit Card Fees 591 591 Licenses and Permits 69,186 All other expenses 62,796 6,390 Total functional expenses. Add lines 1 through 24e 242,399 207,498 34,901 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

L if following SOP 98-2 (ASC 958-720) . . . *.* . .

84-0755264 Form 990 (2017) Granby Chamber of Commerce **Balance Sheet** Part X Check if Schedule O contains a response or note to any line in this Part X (B) End of year Beginning of year 1 Cash - non-interest-bearing 73,173 1 90,765 2 2 3 Pledges and grants receivable, net 3 4 4 3,850 Loans and other receivables from current and former officers, directors, 5 trustees, key employees, and highest compensated employees 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 6 organizations (see instructions) Complete Part II of Schedule L 7 Notes and loans receivable, net 7 8 2,766 2,766 9 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or 10a other basis Complete Part VI of Schedule D 10c 6,034 b 6,034 11 11 12 12 Investments - other securities See Part IV, line 11 13 13 14 14 15 15 800 800 Total assets. Add lines 1 through 15 (must equal line 34) 16 100,365 16 86,623 17 17 18 18 19 19 20 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24) Complete Part X 25 1,771 2,972 Total liabilities. Add lines 17 through 25 26 1,771 2,972 Organizations that follow SFAS 117 (ASC 958), check here > X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 27 27 84,852 97,393 28 28 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34.

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

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

Retained earnings, endowment, accumulated income, or other funds

97,393

30

31

32

33

34

84,852

86,623

30

31

32

33

34

Form	990 (2017) Granby Chamber of Commerce	84-075526	.	Page	12
Pa	rtXI' Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI			[L
1	Total revenue (must equal Part VIII, column (A), line 12)	. 1	25	55 <u>,730</u>	
2	Total expenses (must equal Part IX, column (A), line 25)	. 2	24	12,399	<u>. </u>
3	Revenue less expenses Subtract line 2 from line 1	. 3	1	3,331	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	. 4	8	84,852	<u> </u>
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		0	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	. 10	9	8,183	
Pa	rt※III Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	· · · · · · · ·		· · · [
				Yes No	•
1	Accounting method used to prepare the Form 990 🔯 Cash 🔲 Accrual 🔲 Other		* *,	44	-
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			م الأسمة	. ,
	Schedule O				į. إ
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X	_
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or		3. 6. 6		_1
	reviewed on a separate basis, consolidated basis, or both				i
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a		-	7,1-	7
	separate basis, consolidated basis, or both			21	
	Separate basis Consolidated basis Both consolidated and separate basis		15	1 777	:
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in		3.5 %	,u_ ,	_
	Schedule O				
3a	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?		3a	X	_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				_
			3ь		
EΕΔ			Form 9	90 (2017	7 \

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

EFA

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Employer identification number

84-0755264 Granby Chamber of Commerce Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (b) Funds and other accounts 1 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised Yes No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation Held at the End of the Tax Year easement on the last day of the tax year Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8 If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2017

	ule D (Form 990) 2017 Granby Chamber	of Commerce				_	84- 075			age 2
Pa	rt III Organizations Maintaining (Collections of	Art, Histo	orical Tr	easures,	or Oth	er Similar As	sets (co	ntinu	ed)
3	Using the organization's acquisition, accession,	and other records,	check any o	f the follow	ing that are a	significa	ant use of its			
	collection items (check all that apply)				_					
а	Public exhibition	d 🗌 Lo	an or excha	nge progra	ams					
b	Scholarly research		her							
С	Preservation for future generations	_								
4	Provide a description of the organization's collection	ctions and explain h	ow they furth	ner the org	anızatıon's ex	cempt pu	rpose in Part			
	XIII	•	•				•			
5	During the year, did the organization solicit or re	ceive donations of a	ırt. histoncal	treasures.	or other sim	ılar				
_	assets to be sold to raise funds rather than to be							П	Yes	∏ No
Pa	THE Escrow and Custodial Arrange									
	Complete if the organization ai	_	on Form 9	90, Parl	t IV, line 9,	or rep	orted an amo	unt on F	orm	
	990, Part X, line 21.			·		•				
1a	Is the organization an agent, trustee, custodian	or other intermediar	v for contrib	utions or o	ther assets n	ot				
			-					П	Yes	∏No
b	If "Yes," explain the arrangement in Part XIII and	d complete the follow	vina table							_ ···
		P				Γ	Ar	nount		
С	Beginning balance					10				
d	•									
8	· ··································									
f	Ending balance									
2a	Did the organization include an amount on Form								Yes	No
	If "Yes," explain the arrangement in Part XIII Ch							_		п
	rt V Endowment Funds.	TOTAL TITLE CAPIT	211011011110							ш
-5	Complete if the organization ai	nswered "Yes" o	on Form 9	990. Parl	t IV. line 10	٥.				
		(a) Current year		or year	(c) Two years		(d) Three years back	(a) For	ır years b	
1a	Beginning of year balance	(u) Current year	(5) 111	or year	(c) The year.	3 Buok	(d) Thice years back	(0) 100	i years L	
b.	Contributions		-			-		<u> </u>		
c	Net investment earnings, gains, and		+	 -						
v	losses · · · · · · · · · · · · · · · · · ·							1		
d	Grants or scholarships		+		 					
	Other expenditures for facilities and		+	-				_		
•	programs							İ		
f	Administrative expenses		_							—
	End of year balance									
2	Provide the estimated percentage of the current		line 1a colu	mn (a)) he	ld as					
	Board designated or quasi-endowment	•	iiiic 19, 0010	(4),	10 00					
b	Permanent endowment > %									
C	Temporanly restricted endowment	%								
Ŭ	The percentages on lines 2a, 2b, and 2c should									
3a	Are there endowment funds not in the possession		n that are h	eld and ad	ministered fo	r the				
- Ou	organization by	on or the organization	in that are in	old dille de	minotored to				Yes	No
	(i) unrelated organizations · · · · · · ·							. 3a(i)	+	
	(ii) related organizations · · · · · · · ·							3a(ii)	+	├
ь	If "Yes" on 3a(ii), are the related organizations lis	eted as required on	Schadula R	2				3b	+	\vdash
4	Describe in Part XIII the intended uses of the on	•								<u> — </u>
Pa	Land, Buildings, and Equipm		nent lanas							
- Ne	Complete if the organization at		on Form 9	90 Par	t IV line 1°	1a Sea	Form 990 P	art X lin	e 10	
										
	Description of property	(a) Cost or o		1 ' '	or other basis other)		Accumulated epreciation	(a) Bo	ok value	
40	Land	(IIIVOSI		 '		 				
1a	Land			 -		<u> </u>				
b	Buildings	• • •		 		 				
C	Leasehold improvements			 		 				
d	Equipment			-		 				
# T=40	Other	not Form 200 De 11	6,034	1 100 400	1	<u> </u>				034
	il. Add lines 1a through 1e (Column (d) must equ	iai Form 990, Part)	k, column (B), line 10C	,	· · · ·	· · · · · • [034
EEA								Schedule D (rom 99	U) 2017

Part VII	Investments - Other Securities.	er of Commerce	84-075	55264 Page
	Complete if the organization answ	rered "Yes" on Form 990, Pa	art 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 valuation Cost or end-of-year market	
(1) Financial o	derivatives			
(2) Closely-he	eld equity interests	• •		
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)	·····			
(F)				·
(G) (H)				
	must equal Form 990, Part X, col (B) line 12)	•	 	
Part VIII	Investments - Program Related.			
	Complete if the organization answ		art IV, line 11c. See Form 990,	Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	must acced Form 000. Rad V and (B) Inc. 42.)			
Part IX	Other Assets. Complete if the organization answ	<u></u>	art IV. line 11d See Form 990.	
		(a) Description		(b) Book value
(1) Secur	ity Deposit			80
(2)				
(3)				
(4)				<u> </u>
(5)				
(6)				
(8)			 	
(9)				
	n (b) must equal Form 990, Part X, col (B) line	15)		80
Part X	Other Liabilities.			
	Complete if the organization answ line 25.	rered "Yes" on Form 990, Pa	art IV, line 11e or 11f See For	m 990, Part X,
1.	(a) Description of liability	(b) Book value		
(1) Federal ı	ncome taxes			
	Liabilities	2,972	<u>-</u>	
(3)			-	
(4)				
(5) (6)				
(7)				
(8)			7	
1-1			 	

Total (Column (b) must equal Form 990, Part X, ∞i (B) line 25) 2,972 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII.

Sched		4-0755264	Page 4
Pa	Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	1 1	
а	Net unrealized gains (losses) on investments]	
b	Donated services and use of facilities]	
C	Recovenes of prior year grants]	
d	Other (Describe in Part XIII)		
е	Add lines 2a through 2d · · · · · · · · · · · · · · · · · ·	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a]	
b	Other (Describe in Part XIII)]_	
C	Add lines 4a and 4b · · · · · · · · · · · · · · · · · ·	4c	
_5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	
Ra	Reconciliation of Expenses per Audited Financial Statements With Expenses p	er Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a		
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities	<u></u> '	
b	Prior year adjustments	j	
С	Other losses]	
đ	Other (Describe in Part XIII)	1 1	
0	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	1	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a]]	
b	Other (Describe in Part XIII)		
C	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	
Pa	MXIII Supplemental Information.		
	ide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part	X, line	
2, Pa	art XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information		
		 	
			
	 		
			·
EEA		Schedule D	(Form 990) 2017

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for the latest instructions.

2017

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

EEA

Open to Public Inspection

Name of the organization						Employer ide	nttfication number
Granby Chamber of Commerce						84-07	55264
Part Fundraising Activities	. Complete if	the organ	ization an	swered "Yes" on	Form 9		
Form 990-EZ filers are no	-	-					•
1 Indicate whether the organization rais				ties Check all that ap	ply		
a Mail solicitations	· ·			of non-government gra			
b Internet and email solicitations				of government grants			
c Phone solicitations				Iraising events			
d In-person solicitations		9 L	орозіа: тапа	g oronto			
2a Did the organization have a written or	oral agreement v	with any indivi	dual (includii	na officers directors t	rustaas		
or key employees listed in Form 990,						□ Ye	es 🗌 No
b If "Yes," list the 10 highest paid individ	_			_		_	
compensated at least \$5,000 by the c		unuraisers) p	ursuanii io aį	greenients ander wind	ii tile luilu	raiser is to be	
compensated at least \$5,000 by the t	nganization						
	Γ				(v) Am	ount paid to	T
(i) Name and address of individual			draiser have	(Iv) Gross receipts		tained by)	(vi) Amount paid to
or entity (fundraiser)	(ii) Activity		control of utions?	from activity		ser listed in	(or retained by) organization
						ol (i)	
A	ĺ	Yes	No				
1							
			 				
2							
							
3	}						
				 			
4							
5							
6							
7							
•					i		
8			 				
8]				
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	1					· · · · · · · · · · · · · · · · · · ·	
Total · · · · · · · · · · · · · · · · · · ·			▶				1
3 List all states in which the organization				ions or has been notif	ied it is exi	empt from	
registration or licensing	no registeres er i	0011004 10 00	ion common			pt O	
, og.aao,, or noononig							
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For Panerwork Reduction Act Notice, sec	e ine instruction	s for Form 9	9U OF 99U-EA	<u>r</u> .		Schedule G	(Form 990 or 990-F7) 2017

Schedule G (Form 990 or 990-EZ) 2017 Granby Chamber of Commerce 84-0755264 Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events (add col (a) through <u>co</u> Fishing Cont None col (c)) (event type) (event type) (total number) Gross receipts 65,150 65,150 2 Less Contributions Gross income (line 1 minus 65,150 65,150 Cash prizes Noncash prizes Rent/facility costs Direct Expenses Food and beverages Entertainment Other direct expenses 31,270 31,270 Direct expense summary Add lines 4 through 9 in column (d) 31,270 Net income summary Subtract line 10 from line 3, column (d) 33,880 Partill Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col (a) through col (c)) Gross revenue 2 Cash pnzes Direct Expenses Noncash prizes Rent/facility costs Other direct expenses Yes Yes Yes THE SOUTH STATE OF THE Volunteer labor No No No ense summary Add lines 2 through 5 in column (d)

_	8 Net gaming income summary Subtract line 7 from line 1, column (d)
9	Enter the state(s) in which the organization conducts gaming activities
	Is the organization licensed to conduct gaming activities in each of these states?
þ	If "No," explain
10a	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?
b	If "Yes," explain

SCHEDULE O (Form 990'or 990-EZ)

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.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

► Go to www.irs.gov/Form990 for the latest information.

Granby Chamber of Commerce 84-0755264 01. Officer, directors, etc. family relationship (Part VI, line 2) There is a Husband and Wife setting on the Board of Directors 02. Member election for additional members (Part VI, line 7a) If a Board Member leaves before the end of the elected term the Board has the right to appoint a person to finish the vacant position until the next election. 03. Form 990 governing body review (Part VI, line 11) The Board reviews the 990 and it is available for the members. 04. Form 990 availability to public (Part VI, line 18) The return is held at the Granby Chamber office and available to anyone that asks for 05. Governing documents, etc, available to public (Part VI, line 19) The governing documents for the Granby Chamber are at the office and available to anyone who asks.