C&E 9Form 990 Department of the Treasury

For Paperwork Reduction Act Notice, see the separate instructions.

Return of Organization Exempt From Income Tax

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

Do not enter social security numbers on this form as it may be made public.

2017
Open to Public Inspection

OMB No 1545-0047

Internal Revenue Service ► Go to www irs gov/Form990 for instructions and the latest information. and ending For the 2017 calendar year, or tax year beginning D Employer identification number C Name of organization Check if applicable Lake Chelan Chamber of Commerce Address change 91-0588869 Doing business as Name change E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite PO Box 216 Initial return Final return/ City or town, state or province, country, and ZIP or foreign postal code terminated 1,263,431 Chelan WA 98816 G Gross receipts \$ Amended return Name and address of principal officer H(a) Is this a group return for subordinates? Application pending Michael Steele 216 E Woodin Ave H(b) Are all subordinates included? If "No," attach a list (see instructions 98816 Chelan **X** 501(c) 4947(a)(1) or 501(c)(3) Tax-exempt status www.lakechelan.com H(c) Group exemption number Website > M State of legal domicile Year of formation X Corporation Trust Form of organization Part I Summary Activities & Governance 1 Briefly describe the organization's mission or most significant activities See Schedule O 2 Check this box ▶ I if the organization discontinued its operations or disposed of more than 3 Number of voting members of the governing body (Part VI, line 1a) 8 4 Number of independent voting members of the governing body (Part VI, line 15) 8 5 5 Total number of individuals employed in calendar year 2017 (Part V, line 2a 360 6 Total number of volunteers (estimate if necessary) 7a Total unrelated business revenue from Part VIII, column (C), line 12 7b b Net unrelated business taxable income from Form 990-T, line 34 Prior Year **Current Year** 4,917 46<u>,094</u> 8 Contributions and grants (Part VIII, line 1h) Revenue 1,138,562 1,229,914 9 Program service revenue (Part VIII, line 2g) 6,067 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10,591 28,600 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,201,314 1,263,431 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 20,137 14,157 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 372,764 374,090 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 b Total fundraising expenses (Part IX, column (D), line 25) ▶ 973,513 834,466 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 227,367 1,361,760 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 26,053 -98,329 19 Revenue less expenses Subtract line 18 from line 12 End of Year Beginning of Current Year 9 420,160 432,283 20 Total assets (Part X, line 16) 107,364 21,158 21 Total liabilities (Part X, line 26) 312,796 22 Net assets or fund balances Subtract line 21 from line 20 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Signature of officer Date zorZ President Lester Cooper Here Type or print name and title Print/Type preparer's name Check Paid 18 self-employed P00004333 Jordana LaPorte, CPA Preparer LaPorte Financial Alliance 56-2406563 Firm's EIN ▶ Firm's name **Use Only** P.O. Box 489 Chelan, WA 98816-0489 509-682-2521 Firm's address Phone no May the IRS discuss this return with the preparer shown above? (see instructions) X Yes No

Form 990 (2017)

Pa	art IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	<u> </u>	X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
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	<u> </u>	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, 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			ļ
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
0	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable		1	
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	X	
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	ļ	X
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? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	-	X
2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	ļ	X
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		X
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other		İ	
_	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	-	X
7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			v
_	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	 	X
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	-	X
9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	4.		x
	If "Yes." complete Schedule G. Part III	19	l .	

Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	<u> </u>	
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
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		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			37
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			}
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	045		v
	through 24d and complete Schedule K. If "No," go to line 25a	24a	-	X
р	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	240		
	to defease any tax-exempt bonds?	24c	<u> </u>	
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	<u> </u>	.
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	25a		
		254		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	100		
20	current or former officers, directors, trustees, key employees, highest compensated employees, or			1
	disqualified persons? If "Yes," complete Schedule L, Part II	26		x
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			ŀ
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30	ļ. <u></u>	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			1
	Part I	31	ļ .	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32	ļ	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	 	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34	X	ļ
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	-	X
þ	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			İ
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	ļ	<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36	 	-
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
20	Part VI	37	├	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		.	1
	19? Note. All Form 990 filers are required to complete Schedule O	38	<u> </u>	<u></u>

Form	990 (2017) Lake Chelan Chamber of Commerce 91-0588869		F	age 5
Pa	rt 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			- [
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		Yes	No
1a				
b	Effect the Humber of Forms 44-20 included in time to Effect 6 in not approache			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		├
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 8			
	otationion, mod to the earliest year enemy war or		х	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	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		X
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_		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			.
	account)?	4a		X
b	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			
	(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		<u> </u>
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		-
6a	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		<u> </u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	l		
	gifts were not tax deductible?	6b		-
7	Organizations that may receive deductible contributions under section 170(c).	-		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		ļ	
	and services provided to the payor?	7a	ļ <u>.</u>	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	<u> </u>	
С	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	 		1
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
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	١.		
_	sponsoring organization have excess business holdings at any time during the year?	8		+
9	Sponsoring organizations maintaining donor advised funds.	000		
a	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		ĺ	1
a	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
b				
11	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders Cross income from other sources (Do not not amounts due or paid to other sources)			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
122	against amounts due or received from them) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10412	—		1

If "Yes," enter the amount of tax-exempt interest received or accrued during the year

Section 501(c)(29) qualified nonprofit health insurance issuers. 13

Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O

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

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 b

12b

13b

13c

13a

14a

14b

Part VI

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 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

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	8					
	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	8					
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		X		
3								
	supervision of officers, directors, or trustees, or key employees to a management company or other person?			3		X		
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed	7		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	X			
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	X			
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			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the ye	ar by t	he following					
а	The governing body?			8a	X			
b	Each committee with authority to act on behalf of the governing body?			8b	X	<u> </u>		
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		X		
Sec	tion B. Policies (This Section B requests information about policies not required by the Inter	nal F	Revenue Co	de.)				
					Yes	-		
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		<u> </u>		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	the fo	orm?	11a		X		
b	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 ris	e to co	onflicts?	12b	X			
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"							
	describe in Schedule O how this was done			12c	X			
13	Did the organization have a written whistleblower policy?			13	X			
14	Did the organization have a written document retention and destruction policy?			14	X	<u> </u>		
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?							
а	The organization's CEO, Executive Director, or top management official			15a	Х	<u> </u>		
b	Other officers or key employees of the organization			15b		X		
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)							
16a						l		
	with a taxable entity during the year?			16a		X		
þ	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its							
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the							
	organization's exempt status with respect to such arrangements?			16b		<u> </u>		
Sec	tion C. Disclosure							
17	List the states with which a copy of this Form 990 is required to be filed ▶ None							
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 50)1(c)(3	i)s only)					
	available for public inspection. Indicate how you made these available. Check all that apply							
	Own website Another's website X 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 inter-	est po	licy, 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 reco	rds 🕨	•					
	ichael Steele 216 E Woodin Ave	_						
C)	nelan WA 9883	ם .						

Form 990 (201	7) Lake Chelan	Chamber	of (Commerce	91-0588869	Page
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and						
	Independent Contr	actors				
	Check if Schedule C	ontains a res	sponse	<u>e or note to an</u>	y 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 vice.

- 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"

DAA

- 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

K Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee (F) (A) Average Reportable Reportable Estimated Name and Title Position hours per (do not check more than one compensation compensation from amount of box, unless person is both an from related other officer and a director/trustee) (list any the organizations compensation (W-2/1099-MISC) hours for organization from the lighest compensated imployee (W-2/1099-MISC) organization related key employee idividual trustee stitutional trustee organizations and related below dotted organizations line) (1) Tom Campbell 0.00 0.00 X 0 0 Vice President (2) Aaron Evans 0.00 0.00 Treas/Sec X 0 0 (3) Ben Williams 0.00 0 0 0.00 X 0 Director (4) Lester Cooper 0.00 0.00 0 0 President X (5) Sandy Calicoat 0.00 0.00 X 0 0 0 Director (6) Heather Neff 0.00 0 0.00 X 0 Director (7) Rosemary Easley 0.00 X 0 Director 0.00 0 (8) (9) (10)(11)

Form 990 (2017)

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

Total reverse Total revers	Pa	rt V	III Statement of Reve Check if Schedule (nue O cor	ntains a	response o	or note to any line	ın this Part VIII		
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 5 Royalties (i) Real (ii) Personal 6a Gross rents b Less rental exps c Remail income or (loss) d Net rental income or (loss) 7a Gross amount from (iii) Securities sated deads other than inventory b Less cost or other base 4 sales exps c Gain or (loss) d Net gain or (loss) 5 A Gross income from fundraising events (not including \$ of contributions reported on line 1c) 5 See Part IV, line 18 b Less direct expenses c Net income or (loss) from gaming activities 5 See Part IV, line 19 b Less direct expenses b c Net income or (loss) from gaming activities 5 See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances returns and allowances a b Less cost of goods sold b c Net income or (loss) from sales of inventory Miscellamous Revenue Busin Code 11a Rent Income 28,600 28,600			•				(A)	(B) Related or exempt function	Unrelated business	Revenue excluded from tax under sections
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b c d All other revenue 28,600		11a	Rent Income	•	_		28,600	28,600	1	
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e Total. Add lines 11a–11d			All other revenue							
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Part IX Statement of Functional Expenses

Sect	on 501(c)(3) and 501(c)(4) organizations must contains a response			прівсе соішті <u>п (A)</u>	
	ot include amounts reported on lines 6b, b, 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	14,157			
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	63,750			
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	249,295			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	3,933			
9	Other employee benefits	30,294			
10	Payroll taxes	26,818			
11	Fees for services (non-employees)				
а	Management	110			
b	Legal	29,138			
C	Accounting	29,136			
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				<u> </u>
r	Investment management fees				
9	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	· '.'.	318,675			
13	Office expenses	36,090		-	
14	Information technology	53,534			
15	Royalties				
16	Occupancy	78,205			
17	Travel	9,405			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	35,984			
23	Insurance	14,471		_	
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
а	Program Event Expense	319,109			-
b	Utilities	17,956			_
С	Repairs	17,873			
d	Gift Certificates	16,113			
e	All other expenses	26,850	^		1
25	Total functional expenses. Add lines 1 through 24e	1,361,760	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				
DAA	following SOP 98-2 (ASC 958-720)				Form 990 (2017)

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 38,310 59,524 Cash-non-interest bearing 2 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 3 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees 5 Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 485,674 128,169 387,212 357,505 b Less accumulated depreciation 10b 10c 11 11 Investments—publicly traded securities 12 Investments—other securities See Part IV, line 11 12 13 Investments—program-related See Part IV, line 11 13 1,708 6,536 14 Intangible assets 225 15 Other assets See Part IV, line 11 15 432,283 420,160 Total assets. Add lines 1 through 15 (must equal line 34) 16 16 17 17 Accounts payable and accrued expenses 18 Grants payable 18 19 Deferred revenue 19 Tax-exempt bond liabilities 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 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 21,158 of Schedule D <u>107,364</u> 21,158 107,364 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets 27 28 Temporarily restricted net assets 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 411,125 32 Retained earnings, endowment, accumulated income, or other funds 32 312.796 33 Total net assets or fund balances 411,125 312,796 33 432,283 420,160 Total liabilities and net assets/fund balances

orm	1990 (2017) Lake Chelan Chamber of Commerce 91-0388889			Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u> 63,</u>	
2	Total expenses (must equal Part IX, column (A), line 25)	2		361 <u>,</u>	
3	Revenue less expenses Subtract line 2 from line 1	3		-98,	<u> 329</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		111,	<u> 125</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	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	3	312,	796
Pa	rt XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				Ш
				Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both			1	
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both				}
	Separate basis Consolidated basis Both consolidated and separate basis				
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				
	Schedule O				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2017)

DAA

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

► Complete if the organization is described below. ▶ Go to www.irs gov/Form990 for instructions and the latest information.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B
- · Section 527 organizations Complete Part I-A only

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

• 8	Section 501(c)(4), (5), or (6) organizations Complete Part III				
Name	e of organization			Employer identi	fication number
	Lake Chelan Chamber			91-05888	
Pai	t I-A Complete if the organization is exem	pt under section 501(c)	or is a sectio	n 527 organizatio	n.
1	Provide a description of the organization's direct and indire	ct political campaign activities	ın Part IV (see ıns	tructions for	
	definition of "political campaign activities")				
2	Political campaign activity expenditures (see instructions)			▶ \$	
3	Volunteer hours for political campaign activities (see instru	ctions)			
Pai	t I-B Complete if the organization is exem	pt under section 501(c	(3).		
1	Enter the amount of any excise tax incurred by the organization	ation under section 4955		▶ \$	
2	Enter the amount of any excise tax incurred by organization	n managers under section 495	5	▶ \$	
3	If the organization incurred a section 4955 tax, did it file Fo	rm 4720 for this year?			☐ Yes ☐ No
4a	Was a correction made?				Yes No
b	If "Yes," describe in Part IV			·	
Pa	rt I-C Complete if the organization is exem	pt under section 501(c	<u>, except secti</u>	on 501(c)(3).	
1	Enter the amount directly expended by the filing organization	on for section 527 exempt func	tion		
	activities			▶ \$	
2	Enter the amount of the filing organization's funds contributed	ted to other organizations for s	ection		
	527 exempt function activities			▶ \$	
3	Total exempt function expenditures Add lines 1 and 2 Ent	ter here and on Form 1120-PO	L,		
	line 17b			▶ \$	
4	Did the filing organization file Form 1120-POL for this year				∐ Yes ∐ No
5	Enter the names, addresses and employer identification nu				
	organization made payments. For each organization listed,				
	the amount of political contributions received that were pro				
	as a separate segregated fund or a political action committee	tee (PAC) If additional space is	s needed, provide	information in Part IV	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds If none, enter -0-	contributions received and promptly and directly
				idilds if florie, enter -0-	delivered to a separate
					political organization
					If none, enter -0-
(1)					
(2)					
					
(3)					
					<u> </u>
(4)					
(5)					
(6)					
	Panagrant Reduction Act Notice see the Instructions for Form	990 or 990 E7	<u>. </u>	Sahadula C (Fa	000 or 000 E7\ 204

Schedule C	(Form 990 or 990-EZ) 2017	Chelan Cha	amber of Co	mmerce	g	1-0588869	Pa	ge 2
Part II-	A Complete if the organ				d filed	Form 5768 (ele	ction under	-
A Chec	* section 501(h)). k ▶ ☐ if the filing organizatio	n holonge to an offi	listed group (and lis	at in Doct IV o	och offili	atod group momb	or's name	
A Chec	address, EIN, expense	-			acii aiiiii	ateu group memi	oei s name,	
B Chec					ns app	lv		
<u> </u>		bbying Expendit		THE PROVIDE	no upp	(a) Filing	(b) Affiliated	
	(The term "expenditures"				orga	nization's totals	group totals	
1a Tota	Il lobbying expenditures to influence p							
b Tota	Il lobbying expenditures to influence a	a legislative body (dire	ect lobbying)					
c Tota	ıl lobbyıng expenditures (add lines 1a	and 1b)						
d Oth	er exempt purpose expenditures							
	el exempt purpose expenditures (add							
f Lob	bying nontaxable amount. Enter the a	mount from the follow	ving table in both					
	mns							
	e amount on line 1e, column (a) or (b) i		ntaxable amount is.					
	over \$500,000	20% of the amour		00.000			•	
	\$500,000 but not over \$1,000,000		% of the excess over \$50	1				
	\$1,000,000 but not over \$1,500,000 \$1,500,000 but not over \$17,000,000		% of the excess over \$1, of the excess over \$1,5	·				
	\$17,000,000	\$1,000,000	1 οι της εχοε33 ονει ψ1,ο	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	ssroots nontaxable amount (enter 25							
•	tract line 1g from line 1a If zero or le	·						
i Sub	tract line 1f from line 1c If zero or les	ss, enter -0-			_			
j If th	ere is an amount other than zero on e	either line 1h or line 1i	, did the organization	file Form 4720				
repo	rting section 4911 tax for this year?						Yes	No
			ing Period Under					
	(Some organizations that ma					of the five colun	nns below.	
		See the separate i	nstructions for lin	es 2a throug	h 2f.)			
	L	obbying Expendit	ures During 4-Yea	r Averaging	Period			
C	Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 201	6	(d) 2017	(e) Total	
2a Lob	bying nontaxable amount							
	bying ceiling amount 9% of line 2a, column (e))							
c Tota	al lobbying expenditures							
d Gra	ssroots nontaxable amount							
	ssroots ceiling amount 1% of line 2d, column (e))	, <u>,</u>						
f Gra	ssroots lobbying expenditures							

Schedule C (Form 990 or 990-EZ) 2017

91-0588869 Schedule C (Form 990 or 990-EZ) 2017 Lake Chelan Chamber of Commerce Page 3 Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 Part II-B `(election under section 501(h)). (a) (b) For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed Yes No Amount description of the lobbying activity During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section Part III-A 501(c)(6). Yes No 1 Were substantially all (90% or more) dues received nondeductible by members? X 2 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section Part III-B 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes." 1 Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year 2b 2c Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?

Part IV Supplemental Information

5 Taxable amount of lobbying and political expenditures (see instructions)

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information

Page 4

Part IV Supplemental Information (continued)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

OMB No 1545-0047

2017

Open to Public

Open to Public Inspection

Employer identification number

91-0588869 Lake Chelan Chamber of Commerce Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6 (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? 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 easement on the last day of the tax year Held at the End of the Tax Year 2a Total number of conservation easements 2b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c 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 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 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) Yes No 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 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) 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 a Revenue included on Form 990, Part VIII, line 1 \$ Assets included in Form 990, Part X

		lan Chambe				588869	Page 2
Pa	rt III Organizations Maintainir						ets (continued)
3	Using the organization's acquisition, acces collection items (check all that apply)	sion, and other record	ds, check any o	f the following t	hat are a signi	ficant use of its	
а	Public exhibition	d 🗌	Loan or excha	nge programs			
b	Scholarly research	е 🗌	Other				
С	Preservation for future generations						
4	Provide a description of the organization's	collections and expla	in how they furt	her the organiz	ation's exempt	purpose in Part	
	XIII						
5	During the year, did the organization solicit	or receive donations	of art, historica	I treasures, or o	other similar		
	assets to be sold to raise funds rather than		part of the orga	nization's colle	ction?		Yes No
Pa	irt IV Escrow and Custodial A			00 D-40/	0		
	Complete if the organization 990, Part X, line 21	on answered "Yes	s" on Form 9	90, Part IV, I	ine 9, or rep	oorted an amo	unt on Form
	Is the organization an agent, trustee, custo	dian or other interme	diany for contrib	utions or other	assets not		
	included on Form 990, Part X?	dian or other interme	diary for contrib	ations of other	addets not		☐ Yes ☐ No
b	If "Yes," explain the arrangement in Part XI	II and complete the fo	ollowing table				
-							Amount
С	Beginning balance					1c	,
	Additions during the year					1d	
	Distributions during the year					1e	
f	Ending balance					1f	
2a	Did the organization include an amount on	Form 990, Part X, lin	e 21, for escrov	v or custodial a	ccount liability?	?	Yes No
<u>b</u>	If "Yes," explain the arrangement in Part XI	Il Check here if the	explanation has	been provided	on Part XIII		
Pa	ert V Endowment Funds.						
	Complete if the organization		7			1	
	_	(a) Current year	(b) Prior ye	ear (c)	Two years back	(d) Three years be	ack (e) Four years back
	Beginning of year balance	 -	+				
	Contributions		+			 	
С	Net investment earnings, gains, and		İ	1			
а	losses Grants or scholarships		 				
	Other expenditures for facilities and					ļ	
·	programs			ŀ			
f	Administrative expenses					-	
a	End of year balance		1		-		
2		irrent year end balan	ce (line 1g, colu	mn (a)) held as	· · · · · · · · · · · · · · · · · · ·		
а	Board designated or quasi-endowment ▶	%					
b	Permanent endowment ▶ %	1					
С	Temporarily restricted endowment ▶	%					
	The percentages on lines 2a, 2b, and 2c st	nould equal 100%					
3а	Are there endowment funds not in the poss	session of the organiz	ation that are h	eld and admini	stered for the		[]·
	organization by						Yes No
	(i) unrelated organizations						3a(ı)
	(ii) related organizations			-l- D 2			3a(ii)
D	If "Yes" on line 3a(ii), are the related organ			ile K/			3b
Pa	Describe in Part XIII the intended uses of to Irt VI Land, Buildings, and Equ		owment funds				
ı a	Complete if the organization	•	s" on Form 9	90 Part IV	ine 11a Se	e Form 990 P	art X line 10
	Description of property	(a) Cost or other) Cost or other basis		Accumulated	(d) Book value
		(investment		(other)	1	depreciation	. ,
1a	Land						
	Buildings						
	Leasehold improvements						
d	Equipment						
е	Other			485,6	74	128,169	357,505
Total	I. Add lines 1a through 1e (Column (d) mus	t equal Form 990, Pa	rt X, column (B,	, line 10c)			357,505

Schedule D (F	orm 990) 2017 Lake Chelan Chamber o	f Commerce	91-0588869	Page
Part VII	Investments—Other Securities.			
	Complete if the organization answered "Yes" on I	Form 990, Part IV, line		e 12
•	(a) Description of security or category	(b) Book value	(c) Method of valuation	
	(including name of security)		Cost or end-of-year market value	
(1) Financial of				
	eld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Colum	n (b) must equal Form 990, Part X, col (B) line 12) ▶		•	
Part VIII	Investments—Program Related.			
	Complete if the organization answered "Yes" on	Form 990, Part IV, line		e 13
	(a) Description of investment	(b) Book value	(c) Method of valuation	
			Cost or end-of-year market value	·
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colum	n (b) must equal Form 990, Part X, col (B) line 13) ▶			
Part IX	Other Assets.			
	Complete if the organization answered "Yes" on	Form 990, Part IV, line	 	
	(a) Description		(b) B	Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)		<u> </u>		
(7)		<u> </u>		
(8)				
(9)				
	n (b) must equal Form 990, Part X, col. (B) line 15)		>	
Part X	Other Liabilities.			
	Complete if the organization answered "Yes" on	Form 990, Part IV, line	e 11e or 11f. See Form 990, Par	tX,
	line 25			
1.	(a) Description of liability	(b) Book value		
	income taxes			
(2) NCB		65,000		
	Card Liability	17,881		
	it Card Payable	14,247		
	oll Taxes Held in Trust	9,996		
(6) Comm	unity Sales Held in Trust	240	-	
(7)				
(8)				•
(9)				1,_,
Total. (Colum	n (b) must equal Form 990, Part X, col (B) line 25) ▶	107,364	5	•

^{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

Part XIII Supplemental Information.

c Add lines 4a and 4b

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line

2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

5

Part XIII Supplemental Information (continued)

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.

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

2017

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Lake Chelan Chamber of Commerce

91-0588869

Employer identification number

Form 990 - Organization's Mission or Most Significant Activities

The Lake Chelan Chamber of Commerce is a voluntary, non-profit, nonpartisan, membership based organization that exists to drive economic
growth through leadership, advocacy, and promotion to enhance the quality
of life in the Lake Chelan Valley.

Form 990, Part I, Line 6

Volunteers are used in the visitor center and to assist with events the Chamber facilitates.

Form 990, Part VI, Line 6 - Classes of Members or Stockholders Members are local business owners.

Form 990, Part VI, Line 7a - Election of Members and Their Rights

Election to the Board is held annually, three members are elected for a

three year term by a majority of ballots received.

Form 990, Part VI, Line 7b - Decisions Subject to Approval of Members Any changes in the by-laws requires a two-thirds majority vote by the members for approval.

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

A copy of the Form 990 is presented to the governing body during a monthly Board Meeting.

Employer identification number

Lake Chelan Chamber of Commerce

91-0588869

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

Potential conflicts are discussed and monitored by the Board at monthly

meetings.

Form 990, Part VI, Line 15a - Compensation Process for Top Official

The Executive Director's compensation is reviewed annually by the executive committee, along with budget considerations and comparable salaries in the area.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Upon request.

Schedule R (Form 990) 2017 Section 512(b)(13)
controlled entity? Open to Public OMB No 1545-0047 (f)
Direct controlling entity × 2017 Inspection Employer identification number Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year 91-0588869 (f)
Direct controlling
entity (e) End-of-year assets r C C (e)
Public charity status
(if section 501(c)(3)) Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33 ► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. 면되 (d) Total income Related Organizations and Unrelated Partnerships (d) Exempt Code section ▶ Go to www.irs.gov/Form990 for instructions and the latest information. 501c3 Legal domicile (state or foreign country) ŝ (c) Legal domicile (state or foreign country) ğ ▶ Attach to Form 990. (b) Primary activity (b) Primary activity Grants 91-1940507 Lake Chelan Chamber of Commerce For Paperwork Reduction Act Notice, see the Instructions for Form 990. DAA (a)
 Name, address, and EIN (if applicable) of disregarded entity (a)Name, address, and EIN of related organization 98816 M LCC Enrichment Fund PO Box 216 Department of the Treasury Internal Revenue Service Name of the organization SCHEDULE R Chelan (Form 990) Part II Part Ξ 3 4 € € 3 3 9 3 3

Schedule R (Form 990) 2017 Page 2 (i) Section 512(b)(13) controlled (k) Percentage ownership Yes No entity (J) Generařor managing partner? res No Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, Ine 34 because it had one or more related organizations treated as a corporation or trust during the tax year Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year Percentage ownership Ξ (I)
Code V—UBI
amount in box 20 of Schedule K-1 (Form 1065) end-of-year assets Share of (h)
Disproportionate
alloc ? Yes No 6 (g)
Share of end-ofyear assets Share of total псоте (f) Share of total income Type of entity (C corp. S corp. or trust) (e)
Predominant
income (related,
unrelated,
excluded from
tax under
sections 512-514) Direct controlling entity Î 91-0588869 (d)
Direct controlling
entity foreign country) Legal domicile (state or õ Schedule R (Form 990) 2017 Lake Chelan Chamber of Commerce (c) Legal domicile state or country) foreign Primary activity Primary activity Name, address, and EIN of related organization Name, address, and EIN of related organization Part IV Part III Š Ξ $\widehat{\Xi}$ 8 3 2 100 4 <u>@</u>

Yes No

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

Schedule R (Form 990) 2017 Lake Chelan Chamber of Commerce

Part V

Organizations listed in Parts II–IV7 In	201	066 m	(Forr	Schedule R (Form 990) 201			
sections with one or more related organizations listed in Parts II–N? 10 10 10 10 10 10 10 10 10 10 10 10 10 1							
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1							
19 19 19 19 19 19 19 19							
19						type (a–s)	
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sactions with one or more related organizations listed in Parts II–IV? Indication Indicatio				on thresholds	elationships and transacti	line, including covered	for information
14 17 19 19 19 19 19 19 19	××		15	l .			Other transfer of cash or property to related organization(s) Other transfer of cash or property from related organization(s)
sections with one or more related organizations listed in Parts II–IV? 14 16 17 16 17 16 17 17 19 19 19 19 19 19 19 19 19 19 19 19 19	×		19				Reimbursement paid by related organization(s) for expenses
led entity led organization(s) led entity led organization(s) led entity led organization(s)	×		1p				Reimbursement paid to related organization(s) for expenses
seactions with one or more related organizations listed in Parts II–IV? led entity led entity 11 16 17 19 19 10 11 11 11 11 11 11 11	×		9				Sharing of paid employees with related organization(s)
sactions with one or more related organizations listed in Parts II–IV? led entity led entity ltd 1/10	×		1n				Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
sections with one or more related organizations listed in Parts II-IV? led entity led entity 16 16 17 19 19 11 11 11 11 11	×		1m				m Performance of services or membership or fundraising solicitations by related organization(s)
sactions with one or more related organizations listed in Parts II–IV? Ied entity Id 16 16 16 16 16 16 16 16 16 16 16 16 16	×		=				sing solicitations for related organization(s)
sactions with one or more related organizations listed in Parts II–IV? Id a 1b 1c 1d 1c 1d 1d 1d 1d 1d 1d 1d 1d 1d 1d 1d 1d 1d	×		¥				related organization(s)
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sactions with one or more related organizations listed in Parts II–IV? 1a 1b 1c 1c 1d 1d 1d 1d 1d 1d 1d 1d 1d 1d 1d 1d 1d	×		11				
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sactions with one or more related organizations listed in Parts II–IV? 1a 1b 1b 1b 1c 1c 1c 1c 1c 1c 1c 1c 1c 1c 1c 1c 1c	×		10	1			nzation(s)
sactions with one or more related organizations listed in Parts II–IV?	×		1b				Gift, grant, or capital contribution to related organization(s)
any of the following transactions with one or more related organizations listed in Parts II–IV?	×		1a	1			Receipt of (i) interest, (ii) annuites, (iii) royalties, or (iv) rent from a controlled entity
					in Parts II–IV?	ted organizations listed	1 During the tax year, did the organization engage in any of the following transactions with one or more rela

Schedule R (Form 990) 2017 Lake Chelan Chamber of Commerce

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

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

(a) (b) (c) (d) (e)	(p)	(2)	(a)	(e)	9	(6)	ε		3		8
Name, address, and EIN of entity	Primary activity	Legal domicile (state or	Predominant income (related, unrelated, excluded	Are all parmer section 501(c)(3)	Share of total income	Share of end-of-year assets	Disproportionate allocations?	amount in box 20 of Schedule K-1	General or managing partner?		Percentage ownership
		foreign country)	from tax under sections 512-514)	organizations?	٦,		00%				
(1)				3					<u> </u>	<u> </u>	
(2)											
(3)											
(4)											
(5)											
(9)											
(2)											
(8)											
(6)											
(10)											
(11)											
								Sched	Schedule R (Form 990) 2017) 2017

Supplemental Information.

Provide additional information for responses to questions on Schedule R See Instructions.