efile GRAPHIC print - DO NOT PROCESS As Filed Data -

DLN: 93493171001228 OMB No 1545-0047 **Return of Organization Exempt From Income Tax** 

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

Open to Public

Department of the Treasury Internal Revenue Service

foundations) ▶ Do not enter social security numbers on this form as it may be made public

▶ Information about Form 990 and its instructions is at <a href="www.irs.gov/form990">www.irs.gov/form990</a>

Inspection

			lendar year, or tax year be C Name of organization	ginning 01-01-2017 , and ending 12	2-31-2	.017	D.F		
	ck if app	plicable	ARCATA CHAMBER OF COMMER(	CE CONTRACTOR OF THE CONTRACTO			D Employe	r identifi	ication number
	dress ch me chai	-					94-1211	704	
	tial retu	-	Doing business as						
		terminated							
□ Am	ended i	return		f mail is not delivered to street address) Room	n/suite		E Telephone	number	
□ Арі	plication	n pending	1635 HEINDON ROAD				(707) 82	2-3619	
			City or town, state or province, ARCATA, CA 95521	country, and ZIP or foreign postal code					
			ARCATA, CA 95521				<b>G</b> Gross rec	eıpts \$ 5€	58,740
			F Name and address of princ	ipal officer	Н	l(a) Is this	a group reti	urn for	
			STEVE MCHANEY 1635 HEINDON ROAD			subor	dinates?		□Yes ☑No
			ARCATA, CA 95521		н		subordinate	es.	☐ Yes ☐No
Tax	k-exem	pt status	501(c)(3) 501(c)(6	4947(a)(1) or 52	,	includ		-t (aaa	instructions)
147	-   : 4 -		V ARCATACHAMBER COM	(Insert 110 )	- 1		exemption i		•
VV	ebsite	:: P VV VV VI	V ARCATACHAMBER COM			Croup	CXCIIIPCIOIII	idilibei	•
,			✓ Corporation ☐ Trust ☐ A		L	Year of forma	tion 1952	M State	of legal domicile CA
. FOITI	n or org	anization	Corporation in Trust in A	Association					-
Pa	rt I	Summ	nary						
				n or most significant activities					
ນ			COMMERCE WITHIN THE CITY						
₹	_								
=	=								
anvellialite	, ,	heck this	hox ▶ ☐ if the organization	discontinued its operations or disposed of	of more	than 25%	of its net as	sets	
5				rning body (Part VI, line 1a)			or its fiet as	" јз ј	12
8	<b>4</b> N	lumber of	independent voting member	s of the governing body (Part VI, line 1b)				4	12
<u> </u>	l		•	calendar year 2017 (Part V, line 2a)			•	5	3
ACHAINES &				necessary)				6	12
֝֝֝֟֝֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓		7a	0						
`	l			Part VIII, column (C), line 12	• •	• •	•	7b	0
	<b>U</b>	vet uniterat	ted business taxable income i	10111 F01111 990-1, IIIIe 34	•	· ·	or Year	76	
	۔ ۔			413		Pri			Current Year
Ġ	l		ons and grants (Part VIII, line	•			105,8	_	96,594
Rəvenue	l	_	ervice revenue (Part VIII, line		66,3	56	68,586		
Ę.	l		, , ,	A), lines 3, 4, and 7d)				2	177,290
	11 0	Other reve	nue (Part VIII, column (A), li	nes 5, 6d, 8c, 9c, 10c, and 11e)			3,0		139
	12 ⊺	otal rever	nue—add lines 8 through 11 (	must equal Part VIII, column (A), line 12	.)		175,2	24	342,609
	13 🤅	Grants and	l sımılar amounts paıd (Part I	X, column (A), lines 1–3 )				0	0
	14 B	Benefits pa	aid to or for members (Part I)	(, column (A), line 4)				0	0
<b>x</b> ?	<b>15</b> S	Salaries, ot	ther compensation, employee	benefits (Part IX, column (A), lines 5–10	))	69,177			78,135
Expenses	<b>16</b> a F	Profession	al fundraising fees (Part IX, c	olumn (A), line 11e)				0	0
þe	Ь⊤	otal fundraı	ısıng expenses (Part IX, column (E	0), line 25) ▶0					
ă	<b>17</b> C	Other expe	enses (Part IX, column (A), lır	nes 11a–11d, 11f–24e)			90,7	49	85,375
	18 ⊺	otal exper	nses Add lines 13-17 (must	equal Part IX, column (A), line 25)			159,9	26	163,510
	19 R	Revenue le	ess expenses Subtract line 18	3 from line 12			15,29	98	179,099
υ Σ						Beainnina	of Current Ye		End of Year
a č									
Net Assets of Fund Balances	20 ⊺	otal asset	cs (Part X, line 16)				270,3	28	449,923
Z Z	21 ⊺	otal liabili	ities (Part X, line 26)				3,0	33	3,529
Ž.	<b>22</b> N	let assets	or fund balances Subtract III	ne 21 from line 20			267,2	95	446,394
Par	t II	Signat	ture Block				· ·		· ·
				amined this return, including accompany	ıng sch	nedules and	statements,	and to	the best of my
			it is true, correct, and compl	ete Declaration of preparer (other than o	officer)	ıs based o	n all informa	tion of w	vhich preparer has
пук	nowled	ige							
		*****				201	3-06-20		
Sign		Signature	e of officer			Date	2		
lere		STEVE M	ICHANEY PRESIDENT						
			print name and title						
			nt/Type preparer's name	Preparer's signature	Date			ΓIN	
Paic	1	LAV	WRENCE E WOOD JR	LAWRENCE E WOOD JR			ck LJ If P( employed	00764531	
	a Darei	r Firr	m's name > JACKSON & EKLUN	D AN ACCOUNTANCY CORP			r's EIN ► 94-2	526731	
_	Only	I Cirr	m's address ▶ 1680 SUTTER ROAL	)		Pho	ne no (707) 8	22-4835	
ノコピ	OIII	у	MCKINLEYVILLE, CA	A 955194217					
1	ha IDC	dia a constitu				1		[J] ,,	es □ No
			his return with the preparer s uction Act Notice, see the s	hown above? (see instructions)	• •	C-1 N 1	12024	<u>▼</u> 1 Y	
OF P	ареги	vork keal	uction Act Notice, see the !	sevarate ilisti UCLIONS.		Cat No 1	1282Y		Form <b>990</b> (2017)

Form	990 (2017)					Page	2
Par	t IIII Statement	of Program Service	Accomplish	ments			_
	Check if Sched	dule O contains a respor	ise or note to a	ny line in this Part III		🗆	
1	Briefly describe the o						_
PRO	MOTE COMMERCE WITH	HIN THE CITY OF ARCAT	A				_
							_
_							_
2	-	· •		ices during the year whi	ch were not listed on		
		r 990-EZ?				☐ Yes 🗹 No	
3		se new services on Sche		hanges in how it conduc	to any program		
3	<del>-</del>	□Yes ☑No					
		se changes on Schedule				L Yes LINO	
4				te for onch of its throads	argest program services, as measure	ad by aypanaa	
•	Section 501(c)(3) and		s are required	to report the amount of	grants and allocations to others, the		
4a	(Code	) (Expenses \$	163 510	including grants of \$	) (Revenue \$	68,725 )	-
Tu	See Additional Data	) (Expenses ¢	103,310	merading grants or \$	) (Nevende \$	30,723 /	
							-
4b	(Code	) (Expenses \$		including grants of \$	) (Revenue \$	)	-
	-						_
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	-						-
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4c	(Code	) (Expenses \$		including grants of \$	) (Revenue \$	)	-
	(	, (		<b>9 9</b> +	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	
							_
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4d	Other program service	ces (Describe in Schedul	e O )				-
	(Expenses \$	,	ding grants of s	;	) (Revenue \$	)	
4e	Total program serv		163,51			•	-

**Checklist of Required Schedules** 

Page 3

No

Nο

No

Nο

Nο

Nο

Nο

Νo

Nο

No

Nο

Form **990** (2017)

Yes

Yes

12a

12b

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19

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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? 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? 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? 8

9

Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, 10 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, VIII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

11a 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 Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its 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 reported ın Part X, line 16? *If "Yes," complete Schedule D, Part IX* 😼 . . . . . . . . . . . . . . . . 11d Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏 11e 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 🛸

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 14a business, investment, and program service activities outside the United States, or aggregate foreign investments 14b valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV . . . . . . . . . . . . .

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,

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

12a Did the organization obtain separate, independent audited financial statements for the tax year?

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

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

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

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . . . 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX. 17 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 Part VIII,

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

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20b

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24a

24b

24c

24d

25a

25b

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28a

28b

28c

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35a

35h

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Yes

Form 990 (2017)

Page 4

Nο

Νo

Nο

Νo

Nο

Part IV	Checklist of Required Schedules (continued)

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

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX.

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,"

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

column (A), line 2? If "Yes," complete Schedule I, Parts I and III . . . . . . . . . .

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

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

**b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

**d** Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, 

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

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

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

**20a** Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . . 20a No

Fell	Checklist of Required Schedules (Continued)		
		Yes	No
20 0	1 H		

orm	990 (2017)			Page <b>5</b>
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			
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 2			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
	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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	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		No
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		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	20		
Č	If res, to fine 3a of 3b, and the organization me form 6000-1.	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
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		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
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			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			
_	Did the agreement on dissument the second many many many diseasely an individual to a second benefit and the second	7e 7f		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	/1		
y	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds.  Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	<b>9</b> a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12   10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
L1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
L2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for			
	additional information the organization must report on Schedule O  Enter the amount of reserves the organization is required to maintain by the states in	13a		
	which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	orn. 00	<b>0</b> (2017)
			arm <b>00</b>	1701

orm	990 (2017)			Page <b>6</b>
Part	Governance, Management, and DisclosureFor each "Yes" response to lines 2 through 7b below, and for a "No" 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	·	nse to li	nes
Se	Check if Schedule O contains a response or note to any line in this Part VI	• •		
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 12			
	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 12			
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		No
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
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		No
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		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	e.)	
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 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		No
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		No
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	12c		
13	Did the organization have a written whistleblower policy?	13		No
14	Did the organization have a written document retention and destruction policy?	14		No
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?			
	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its 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		
Sec	ction C. Disclosure	100		
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records   JOELLEN CLARK-PETERSON 1635 HEINDON ROAD ARCATA, CA 95521 (707) 822-3619			

## Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

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

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee" • List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee)
- who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations • List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000
- of reportable compensation from the organization and any related organizations • List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the
- organization, more than \$10,000 of reportable compensation from the organization and any related organizations

<b>(A)</b> Name and Title	(B) Average hours per week (list any hours		ne b	ox, ι n of	t ch inle ficei	ss pers	son	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
(1) JOELLEN CLARK-PETERSON  EXECUTIVE DIRECTOR	40 00	Х		x				47,979	0	(
(2) HEIDI FERRIS DIRECTOR	1 00	Х						0	0	C
(3) STEVE MCHANEY PRESIDENT	1 00	Х		×				0	0	C
(4) BRYAN WILLKOMM SECRETARY	1 00	Х		x				0	0	C
(5) MARK LOUGHMILLER TREASURER	1 00	Х		×				0	0	C
(6) FRANK WHITLATCH PAST PRESIDENT	1 00	х		х				o	0	C
(7) ARRENIA GRUBB DIRECTOR	1 00	Х						О	0	C
(8) JIM GURMAN DIRECTOR	1 00	Х						0	0	C
(9) KATRINA SEPULVEDA DIRECTOR	1 00	Х						О	0	C
(10) KEN HAMIK DIRECTOR	1 00	Х						О	0	C
(11) BRETT SHULER DIRECTOR	1 00	Х						0	0	C
(12) JODIE MARYNOWSKI DIRECTOR	1 00	Х						0	0	C
(13) TANYA FECHNER DIRECTOR	1 00	х						0	0	C

(A)

Name and Title

compensation from the organization ▶ 0

(B)

Average

Part VII

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

(E)

Reportable

**(D)** Reportable

Page 8

		hours per week (list any hours for related	than one box, unless person is both an officer and a director/trustee)				1	from the from relat organization (W-		compensatio from related organizations ( 2/1099-MISO	ed composition com		of other sation the	
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2,1033 112		2,1033 1133		relat organiza	ed
41.												$\perp$		
c ·	Total from continuation sheets to P	 art VII, Sectio 	nΑ.		• •		<b>*</b>		47,9	79		0		0
2	Total number of individuals (including of reportable compensation from the			e list	ed a	bov	e) who	rec	eıved more th	an \$1	00,000			
													Yes	No
3	Did the organization list any <b>former</b> line 1a? <i>If "Yes," complete Schedule</i> 2			ee, k	еу е •	mple •	oyee,	or hi	ghest comper	sated • •	employee on	3		No
4	For any individual listed on line 1a, is organization and related organization individual										n the	4		No
5	Did any person listed on line 1a receivervices rendered to the organization					,			-			5		No
Se	ection B. Independent Contract	ors											'	
1	Complete this table for your five high from the organization Report compet											mpen	sation	
	Name a	(A) and business addre	ess							Desc	(B) ription of services		(C Comper	
													ļ	

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

(C)

Position (do not check more

Part			Revenue									rage <b>3</b>
		Check if Schedul		a respo	onse or n	ote to any	/ line in t	hıs Part VIII	ι			🗆
								(A) revenue	(B) Relate exem funct	d or npt ion	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	1	La Federated campaigi	ns	1a					rever	iue		512-514
nts Ints		<b>b</b> Membership dues		1b	<u> </u>	53,033						
3ra nou		c Fundraising events		1c		<u> </u>						
S. C An		d Related organizatio		1d								
Gift Bar		e Government grants (co		1e		43,470						
<u>.</u> . <u>≡</u>		f All other contributions,	·	16	<u> </u>							
tior sr S		and similar amounts no above		1f		91						
Contributions, Gifts, Grants and Other Similar Amounts		g Noncash contribution in lines 1a-1f \$	ons included									
S e		<b>h Total.</b> Add lines 1a-1	lf			<b>•</b>		96,594				
<u> </u>	Γ					Business	s Code					
Service Revenue	2	a PROGRAM SERVICE REV	/ENU				541900		68,586	68,5	86	
ď		ь		_								
٦ ۲		с ———		_	-							
3		d			ŀ							
an					ŀ							
Program	·	<b>f</b> All other program se	rvice revenue		L		68,586					<b>"</b>
4	٩	Total.Add lines 2a-2f	f	•	<u> </u>							
		Investment income (ii similar amounts) .			interest,	and other		1,87	3			1,873
	l	· Income from investme			ond proce		-					
		Royalties		-		_	•					
			(ı) Real		(II) P	ersonal						
	6	a Gross rents										
		<b>b</b> Less rental expenses					-					
		c Rental income or (loss)										
		d Net rental income o	r (loss)			•	┪					
			(ı) Securit	ies	(11)	Other						
	7	a Gross amount from sales of				400,00	20					
		assets other than inventory				100,00						
		<b>b</b> Less cost or					_					
		other basis and sales expenses				224,58	13					
		C Gain or (loss)				175,41	.7					
		<b>d</b> Net gain or (loss) .				<b>&gt;</b>	7	175,41	7			175,417
4.	8	a Gross income from fi (not including \$	_									
Other Revenue		contributions reporte	ed on line 1c)	of								
₹ •		See Part IV, line 18		а								
œ.	l	<b>b</b> Less direct expense		Ь								
He		<ul><li>c Net income or (loss)</li><li>a Gross income from g</li></ul>			ents .	· •	_			+		
ō	-	See Part IV, line 19		-	J							
				a			4					
	l	<b>b</b> Less direct expenses <b>c</b> Net income or (loss)		b								
		<b>Pa</b> Gross sales of invent		activit		<u> </u>	1		+	+		
		returns and allowand	ces		]							
				a		1,687	_					
		<b>b</b> Less cost of goods s		b		1,548	<u>'</u>	139		139		
	_	Net income or (loss)  Miscellaneous		inven		. ► ess Code				133		
	1	1a			240		+					
		b										
		с			-				1			
		d All other revenue .			-				+			
		e Total. Add lines 11a			L	<b></b>	+		+			
		2 Total revenue. See			_				1			
	Ĺ			- '	• •	• •		342,609	Э	68,725		0 177,290 Form <b>990</b> (2017)

Part LX	Statement of Functional Expenses
Section 501(	(c)(2) and E01(c)(4) arganizations must complete all columns. All other organizations must complete column (A)

orm 990 (2017) Page <b>10</b>								
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all co	lumns All other orga	anizations must comp	elete column (A)					
Check if Schedule O contains a response or note to any	line in this Part IX	<u></u>		<u> 🗆</u>				
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses				
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21								
2 Grants and other assistance to domestic individuals See Part IV, line 22								
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16								
4 Benefits paid to or for members								
<b>5</b> Compensation of current officers, directors, trustees, and key employees	47,979	47,979						
<b>6</b> 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	30,156	30,156						
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)								
9 Other employee benefits								
10 Payroll taxes								
11 Fees for services (non-employees)								
a Management								
<b>b</b> Legal	3,900	3,900						
c Accounting	2,625	2,625						
	2,023	2,023						
d Lobbying								
e Professional fundraising services See Part IV, line 17								
f Investment management fees								
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)								
12 Advertising and promotion	5,226	5,226						
<b>13</b> Office expenses	5,919	5,919						
14 Information technology	1,150	1,150						
<b>15</b> Royalties								
16 Occupancy	20,017	20,017						
17 Travel	·	,						
18 Payments of travel or entertainment expenses for any federal, state, or local public officials								
	3,266	3,266						
19 Conferences, conventions, and meetings	3,200	3,200						
<b>20</b> Interest								
21 Payments to affiliates								
<b>22</b> Depreciation, depletion, and amortization	3,499	3,499						
23 Insurance	6,568	6,568						
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)								
a MIXERS AND DINNERS EXPE	17,030	17,030						
b FOURTH OF JULY EXPENSE	13,130	13,130						
c SPECIAL EVENTS	907	907						
d POSTAGE	835	835						
e All other expenses	1,303	1,303						
25 Total functional expenses. Add lines 1 through 24e	163,510	163,510	C	0				
Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	, -	, ,						
Check here ► ☐ If following SOP 98-2 (ASC 958-720)				1				

11

12

13

14

15

16

17

18

19

20

21

23

24

25

26

27

28

29

31

32

33

34

Liabilities 22

Fund Balances

Assets or 30

Net

Page **11** 

6.537

342

144

167,903

449,923

3,529

3,529

0

446,394

446,394

449.923

Form **990** (2017)

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

b Less accumulated depreciation

Grants payable . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

Investments—publicly traded securities .

Intangible assets . . . . .

Other assets See Part IV, line 11 .

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

Total liabilities. Add lines 17 through 25 .

Investments—other securities See Part IV, line 11 .

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

Escrow or custodial account liability Complete Part IV of Schedule D

key employees, highest compensated employees, and disqualified

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 30 through 34.

Capital stock or trust principal, or current funds . . . .

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

Retained earnings, endowment, accumulated income, or other funds

Loans and other payables to current and former officers, directors, trustees,

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

Organizations that follow SFAS 117 (ASC 958), check here lacktriangle and

Investments—program-related See Part IV, line 11

	Beginning of year		End of year
1 Cash-non-interest-bearing	24,285	1	60,403
2 Savings and temporary cash investments	2,906	2	205,773

Pledges and grants receivable, net . . 3 15.625 4 8,821 Accounts receivable, net . Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part 5 II of Schedule L . . . . .

54.489

218.226

690

270.328

3.033

10c

11 12

13

14

15

16

17

18

19

20

21

22 23

24

25

26

27

28

29

30 0

31

32

33

34

3.033

267,295

267,295

270.328

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) 6 voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L . . . Assets Notes and loans receivable, net . Inventories for sale or use . 6.626 8 1.970 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other 10a 54,633 basis Complete Part VI of Schedule D

10b

☐ Both consolidated and separate basis

2c

3a

3b

No

Form 990 (2017)

Separate basis

Audit Act and OMB Circular A-133?

Consolidated basis

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

If the organization changed either its oversight process or selection process during the tax year, explain in 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

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

## Additional Data

Software ID: Software Version:

**EIN:** 94-1211704

Name: ARCATA CHAMBER OF COMMERCE

Form 990 (2017)

Form 990, Part III, Line 4a:

PROMOTED TOURISM AND BUSINESS EXPANSION AND GROWTH IN THE ARCATA AREA AND THE NORTH COAST

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE D

Total acreage restricted by conservation easements

structure listed in the National Register

(ii) Assets included in Form 990, Part X

Assets included in Form 990, Part X

tax year 🕨

Number of conservation easements on a certified historic structure included in (a)

Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic

**Supplemental Financial Statements** 

▶ Attach to Form 990.

▶ 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.

DLN: 93493171001228 OMB No 1545-0047

> Open to Public Inspection

Department of the Treasury

(Form 990)

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization **Employer identification number** ARCATA CHAMBER OF COMMERCE 94-1211704 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 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? ☐ Yes ☐ No 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? 🗌 Yes 🗌 No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 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 an historically important land area Protection of natural habitat Preservation of a certified historic structure 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 Year Total number of conservation easements

Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes

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)

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the

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. Part III 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

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

Cat No 52283D

2b

2c

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2017

Pai	t IIII	Organizations Maintaining Col	lections of Art	, Histori	ical T	reası	ures, or	Other	Similar A	ssets (	continue	d)
3		g the organization's acquisition, accessions (check all that apply)	n, and other recor	ds, check	any of	the fo	ollowing t	hat are a	significant	use of its	collection	on
а		Public exhibition		d		Loan	or excha	ange prog	ırams			
b		Scholarly research		e		Othe	er					
С		Preservation for future generations										
4	Provi Part :	de a description of the organization's col XIII	lections and expla	in how the	ey furt	her th	e organız	ation's ex	kempt purpo	ose in		
5		ng the year, did the organization solicit o es to be sold to raise funds rather than to							nılar	□ Ye	es 🗆	No
Pa	rt IV						_					
		Complete if the organization answ X, line 21.	vered "Yes" on F	Form 990	), Part	: IV, I	ine 9, or	reporte	ed an amoi	unt on F	orm 99	0, Part
1a		e organization an agent, trustee, custodi ded on Form 990, Part X?	an or other interm	nediary for	contri	bution	ns or othe	er assets	not	□ Ye	es 🗆	No
ь	If "Y€	es," explain the arrangement in Part XIII	and complete the	e following	table		Γ		Δ.	mount		
С		nning balance	·	-			Ī	1c				
d	Addıt	cons during the year					Ī	1d				
e	Distri	ibutions during the year					[	1e				
f	Endır	ng balance					Ī	1f				
2a	Dıd tl	he organization include an amount on Fo	orm 990, Part X, lii	ne 21, for	escrov	v or cu	ustodial a	ccount lia	ability?		,	No
b	If "Y∈	es," explain the arrangement in Part XIII	Check here if the	e explanat	ion ha	s been	provided	d in Part )	XIII			
Pä	art V	Endowment Funds. Complete if	the organizatio	n answei	red "Y	es" o	n Form 🧐	990, Par	t IV, line 1	LO.		
_	_		(a)Current year	(b)P	rior yea	ar	(c)Two ye	ears back	(d)Three ye	ars back	(e)Four y	years back
	_	ning of year balance										
		butions										
		vestment earnings, gains, and losses										
		or scholarships				_						
	and pr	expenditures for facilities rograms										
		istrative expenses										
g	End of	year balance										
2		de the estimated percentage of the curre	ent year end balar	nce (line 1	g, colu	mn (a	)) held as	s				
а	Board	d designated or quasi-endowment <b>&gt;</b>										
b		anent endowment <b>&gt;</b>										
C	Temp	oorarily restricted endowment <b>&gt;</b>										
_	•	percentages on lines 2a, 2b, and 2c shou	•									
3a		here endowment funds not in the posses nization by	ssion of the organi	zation tha	t are h	ield ar	nd admini	stered fo	r the		Ye	s No
	-	nrelated organizations								3	a(i)	
		elated organizations									a(ii)	
b		es" on 3a(ıı), are the related organızatıor				? .					3b	
4	Desci	ribe in Part XIII the intended uses of the	organization's en	dowment	funds							
Pa	rt VI	Land, Buildings, and Equipmen			D= -1	T) ( '		C	000 5		- 10	
	Descr	Complete if the organization answ iption of property (a) Cost or oth (investme	ner basis (b) C	ost or other					rm 990, Pa lepreciation		1 <b>e</b> 10. ( <b>d)</b> Book v	alue
_	, ,											
	Land											
	Buildin	-										
		nold improvements										
		nent							<b></b> .			
	Other		/ 5: 022 5			54,633			54,489			144
1 ot	ai. Add	lines 1a through 1e (Column (d) must e	quai rorm 990, Pa	art X, colui	mn (B)	, iine	IU(C)).		<b>P</b>			144

Part VII Investments—Other Securities. Complete if the organiz See Form 990, Part X, line 12.	ation answe	ered tes on Form s	990, Part IV, lille IID.
(a) Description of security or category (including name of security)	(b) Book value		hod of valuation of-year market value
(1) Financial derivatives			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Column (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,			
	Book value		hod of valuation of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )  Part IX  Other Assets. Complete if the organization answered 'Yes' on Fo  (a) Description	orm 990, Par	t IV, line 11d See Forn	n 990, Part X, line 15 (b) Book value
(1) BUILDING RENT EXCHANGE (2) WORKER COMP DEPOSIT			167,708 195
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)  Part X Other Liabilities. Complete if the organization answered '		 m 990, Part IV, line	▶ 167,903 11e or 11f.
See Form 990, Part X, line 25.  1. (a) Description of liability		ok value	
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 ) ▶			
2. Liability for uncertain tax positions In Part XIII, provide the text of the footnotogranization's liability for uncertain tax positions under FIN 48 (ASC 740) Check			

1

2

Total revenue, gains, and other support per audited financial statements . . .

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Schedule D (Form 990) 2017

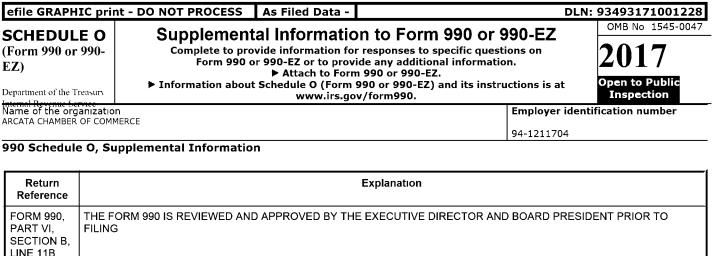
1

Schedule D (Form 990) 2017

Page 4

а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII )	2d		
е	Add lines <b>2a</b> through <b>2d</b>		2e	
3	Subtract line $2e$ from line $1$		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line ${f 1}$			
а	Investment expenses not included on Form 990, Part VIII, line 7b .	4a		
b	Other (Describe in Part XIII )	4b		
c	Add lines <b>4a</b> and <b>4b</b>		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12	)	5	
Par	Reconciliation of Expenses per Audited Financial States Complete if the organization answered 'Yes' on Form 990, Pa		Retur	n.
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	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII )	2d		
е	Add lines <b>2a</b> through <b>2d</b>		2e	
3	Subtract line <b>2e</b> from line <b>1</b>		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII )	4b		
С	Add lines <b>4a</b> and <b>4b</b>		4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 1	8)	5	
Pai	t XIII Supplemental Information			
	vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provid		rt V, line	4, Part X, line 2, Part
	Return Reference Explanation			

<u> </u>	orm 990) 2017	Page <b>5</b>	
Part XIII	Supplemental Info		
Ret	urn Reference	Explanation	
			Schedule D (Form 990) 2017



Return Explanation
Reference

990 Schedule O, Supplemental Information

FORM 990, THE COMPENSATION OF THE EXECUTIVE DIRECTOR IS DETERMINED BY THE BOARD OF DIRECTORS
PART VI,
SECTION B,
LINE 15

Return Explanation
Reference
FORM 990. GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST

990 Schedule O, Supplemental Information

PART VI, SECTION C, LINE 19