Form **990** 

Department of the Treasury

**Return of Organization Exempt From Income Tax** 

OMB No 1545-0047

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

▶ Do not enter Social Security numbers on this form as it may be made public. By law, the IRS generally cannot redact the information on the form

mena	revenue Si	eivice	► Information about Form 990 and its instructions is at www.IRS.gov	/form990			Inspection
A Fo	r the 20	13 caler	idar year, or tax year beginning 01-01-2013 , 2013, and ending 12-31	-2013			
	eck if app		C Name of organization		D Employ	er Idei	ntification number
	ress char		Alaska State Chamber of Commerce		92-00	2681	,
Гиа	me chang	e	Doing Business As		72-00		-
	ial return						
	minated		Number and street (or P O box if mail is not delivered to street address) Room/suit 471 W 36th Ave	e	E Telephor	ne num	ber
_					(907)	278-2	739
	ended ref		City or town, state or province, country, and ZIP or foreign postal code Anchorage, AK 99503				
J App	olication p	ending			<b>G</b> Gross re	ceipts \$	980,705
			F Name and address of principal officer	H(a) Ist	this a group	return	
			Rachael Petro 471 W 36th Ave Ste 201	sub	ordinates?		☐ Yes 🔽 No
			Anchorage, AK 99503	H(b) Are	all subordin	ates	Γ Yes ▼ No
					luded?	400	, 100, 110
I Ta	x-exempt	status	501(c)(3)  501(c) (6)  (insert no)  4947(a)(1) or  527	If"	No," attach	alıst	(see instructions)
J W	ebsite:	► www a	alaskachamber com	H(c) Gr	oup exempti	on nur	nber ▶
V For	n of oma	nmation E	✓ Corporation Trust Association Other ►				
	rt I	Summ		L Year of	formation 195	3 M	State of legal domicile AK
Га							
	То	drive po	icribe the organization's mission or most significant activities ositive change for Alaska's business environment and to improve our r connectivity and support	nember orç	ganizations b	у рго	viding leadership,
Š					a 101		
E E	-	· · · · · · · · · · · · · · · · · · ·					
Activities & Governance	2 6	ack +b-	s box ► if the organization discontinued its operations or disposed of	more the	250/ -5:4:	nat = :	coto
9	2 (1	ieck tins	box   It the organization discontinued its operations or disposed or	more than	25% OF ICS I	net as	sets
<b>≈</b> 6	3 Nu	ımber of	voting members of the governing body (Part VI, line 1a)			3	72
es			independent voting members of the governing body (Part VI, line 1b)		1	4	72
¥	l		ber of individuals employed in calendar year 2013 (Part V, line 2a) .			5	7
ACI	l		ber of volunteers (estimate if necessary)			6	10
	l		lated business revenue from Part VIII, column (C), line 12			7a	0
			ted business taxable income from Form 990-T, line 34			7b	
					ior Year		Current Year
	8	Contribu	itions and grants (Part VIII, line 1h)		260,3	70	269,666
3			service revenue (Part VIII, line 2g)		336,0	_	382,465
Revenue			ent income (Part VIII, column (A), lines 3, 4, and 7d)			8	1
ä			venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		134,9	38	253,365
	12	Total rev	venue—add lines 8 through 11 (must equal Part VIII, column (A), line				
					731,3	98	905,497
			and similar amounts paid (Part IX, column (A), lines 1-3)				0
			paid to or for members (Part IX, column (A), line 4)			—	0
58		Salaries 5–10)	, other compensation, employee benefits (Part IX, column (A), lines	- 1	318,3	n e l	389,098
enses			onal fundraising fees (Part IX, column (A), line 11e)				0
Expe			raising expenses (Part IX, column (D), line 25) ▶70,142			_	
Э			openses (Part IX, column (A), lines 11a–11d, 11f–24e)		333,5	50	450 150
						_	450,150
			penses Add lines 13-17 (must equal Part IX, column (A), line 25)		651,8 79,5	_	839,248
- 07			- 1000 expenses Subtract line 10 Holli line 12	Beginni	ng of Curren		66,249
E C				- Summ	Year		End of Year
Net Assets or Fund Balances	20	Total as	sets (Part X, line 16)	-	366,0	07	480,579
ad E	21	Total lia	bilities (Part X, line 26)		282,9		329,181
žĪ	22	Net asse	ets or fund balances Subtract line 21 from line 20		83,0	72	151,398
Par	t II	Signa	ture Block				
my kr	nowledge		rjury, I declare that I have examined this return, including accompany lief, it is true, correct, and complete Declaration of preparer (other tha wledge				
	I L	******		1	2014 11 12		
Sign			re of officer		2014-11-12 Date		
Here		_					
			Petro President & CEO print name and title				
			t/Type preparer's name Preparer's signature Dai	e C		PTIN	
Paic	1		1 J DOMAGALA CPA	se	elf-employed	P00122	688
	parer	Firm	n's name F Altman Rogers & Company	F	m's EIN 🟲		
	Only		n's address 🕨 425 G Street Suite 500	Pł	none no (907)	274-29	92
J36	Only		Anchorage AK 99501		,		

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

Form	990 (	2013)				Page 2
Par	t III	Statement of Program Check if Schedule O contain			ш	
1	Brief	ly describe the organization's	mission			-
		sitive change for Alaska's bu y and support	siness environment an	d to improve our memb	per organizations by providing	leadership, advocacy,
2		ne organization undertake any rior Form 990 or 990-EZ?		rvices during the year	which were not listed on	
	If"Ye	es," describe these new servi	ces on Schedule O			
3		ne organization cease conduc ces?		•	nducts, any program	
	If "Y∈	es," describe these changes	on Schedule O			
4	exper		501(c)(4) organizations	are required to report	ree largest program services, t the amount of grants and allo	
4a	(Cod	e ) (Expens	es \$ 152,888	including grants of \$	) (Revenue \$	)
	With		arterly newsletter, Legislativ	e Priorities brochure and ele	e Great State of Alaska, communicat ectronic methods for our Capital Note hare information with our members	
4b	(Cod	e ) (Expens	es \$ 41,698	including grants of \$	) (Revenue \$	364,783 )
	legisl one f suppo	ative advocacy needs. We annually full time staff person dedicated to m	produce four meetings that nembership with support staf	promote the interests of our f allocated for a portion of t	of work centers on activities that sup ir members and allow them to netwo their time to build, support and grow E-News, Capital Notes and leadership	rk with each other. We have our membership. Membership
	10.1	\ / P	40.517		) /Dava A	
4c	(Code	, , ,		including grants of \$	) (Revenue \$ nber Executive Committee The full B	oard moote quartedy at the end
	of ea staff	ch of our membership meetings. Th	ne executive committee mee	ts almost monthly in those	months that a full board meeting is it for Board members to meet electron	not held Board support includes
4d	Oth	er program services (Describ	e in Schedule O \			
-ru		er program services (Describ Denses \$	including grants o	f \$	) (Revenue \$	)
4e	- ' '	al program service expenses				
			,,,,,,,			Form <b>990</b> (2013)

Part IV	Checklist	of Red	uired	Schedules
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			Yes	No	-
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes		
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 $I^{\otimes 2}$	3		No	
	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		No	
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	Yes		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	6		No	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No	
8		8		No	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9	ski va	No	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	- 3		-	
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes		
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No	
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		No	
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	p E	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes		
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a		No	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional ""	12b	- 111.79	No	
13	Is the organization a school described in section 170 (b)(1)(A)(II)? If "Yes," complete Schedule $E$	13		No	
L4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	7-	No	
Ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No	
15	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	Feetly.	No	
L6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	To a	No	
18	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	Yes		
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No	
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No	
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b			
		_00			

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Par	IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	- 30	No
	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		No
4a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
5a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	25a	345 67	No
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	n Tom	No
6	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
7	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
8	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)	765		
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part	- 15	1 1	
	IV	28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	E 173 I	No
	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	1- V	No
9	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
0	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	201	No
1	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	f w. fe	No
2	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32	6 mak	No
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
	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	2 15 -	No
5a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	UPLANCE	No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		No
6	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		No
7	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
8	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part 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			
	Constitution and the second		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 5  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	
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		9 7 1	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	18.71	No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		No
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 ▶			
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?	55		
		5c	9 1	
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	Yes	
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes	-
	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		
	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			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	is la	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	- + T 1	
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 and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		No
9	Sponsoring organizations maintaining donor advised funds.		- 1	
а	Did the organization make any taxable distributions under section 4966?	9a	v	No
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	n int	No
LO	Section 501(c)(7) organizations. Enter			
	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	V.		
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders	- 3		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	7 70-	No
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	¥101	A II AT	S <sub>le</sub>
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O	13a	==	No
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	- 1		
С	Enter the amount of reserves on hand	4	27	
.4a	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.	14h		

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Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7 "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes See instructions.  Check If Schedule O contains a response or note to any line in this Part VI			
0	·		• • •	
Sec	ction A. Governing Body and Management		24	
			Yes	No
	Enter the number of voting members of the governing body at the end of the tax year	F 107	li ba	7-1
	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			
	Enter the number of voting members included in line 1a, above, who are independent			
	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
	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
	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	e i	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6	Yes	
	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	Yes	
	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
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	-4
	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? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			Yes	No
l0a	Did the organization have local chapters, branches, or affiliates?	10a		No
	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		ř
	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			
.2a	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	25.1-0	No
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		No
.3	Did the organization have a written whistleblower policy?	13	4461	No
.4	Did the organization have a written document retention and destruction policy?	14	Yes	
	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?	edir		
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		No
	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
	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		The state of	
	List the States with which a copy of this Form 990 is required to be filed▶			
	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)			

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of

State the name, physical address, and telephone number of the person who possesses the books and records of the organization

interest policy, and financial statements available to the public during the tax year

▶Rachael Petro 471 W 36th Ave Ste 201 Anchorage, AK 99503 (907) 278-2722

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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

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

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

(A) Name and Title	(B) A verage hours per week (list any hours	more t	han o	one both	box, an	heck unless officer stee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustice or director	Institutional Trustee	Former Highest compensated employee Key employee Officer Institutional Trustee			2/10999-MISS Former Former Highest compensated		(W- 2/1099- MISC)	organization and related organizations
,										
***************************************										17 T T T
									2 752	
			1 1-			- 1 =				
	line g									
					1		-			
										TAUTILLE -
	OS III				1 11	- 21	В			

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

	(A) Name and Title	(B) Average hours per week (list any hours	(C) (D) (E)  Position (do not check more than one box, unless person is both an officer and a director/trustee) (C) (E)  Reportable compensation compensation from the organization (W-2/1099-MISC) (2/1099-MISC)						osition (do not check re than one box, unless rson is both an officer and a director/trustee)  Reportable compensation from the organization (Worganizations (			n (do not check Reportable compensation is both an officer Irrector/trustee) Reportable compensation from the organization (W-organizations (W-organizations (W-organizations)				ated fother sation the
		for related organizations below dotted line)	Individual trusties or director	Institutional Trustee	Officei	Ke) employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC		ganizat relat organiza	ed			
		L. ESTW					V.									
			III.	1	11											
					749	1600			Ep.		_					
					1											
				14												
			3				Υ									
			51													
	f							ū								
						-										
41.	Col. Total							•			+					
1b c	Sub-Total	· · · · · s to Part VII. S	ection /	À .	•						-					
d	Total (add lines 1b and 1c) .							<b> </b>	93,77	21	-		17,500			
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) wi	no received more	than		Yes	No			
3	Did the organization list any foon line 1a? If "Yes," complete S	,				key	emplo	yee,	or highest compe	nsated employee						
4	For any individual listed on line organization and related organ individual	e 1a, is the sum	of repo	rtabl	e co						3		No No			
5	Did any person listed on line 1 services rendered to the organ									n or individual for	5	4	No			
Se	ection B. Independent Co	ntractors														
1	Complete this table for your five compensation from the organizers	e highest comp										ax vear				
		(A) ame and business						,-		(B) escription of services		(C Comper	)			
												1 -7				
			ding but													

		Check if Schedule O contains a response or note to any li	ne in this Part VIII  (A)	(B)	(c)	(D)
			Total revenue	Related or exempt	Unrelated business	Revenue excluded from
				function revenue	revenue	tax under sections 512-514
10 50	1a	Federated campaigns 1a				7 7 944
ant	ь	Membership dues 1b	- II			
Gr	c	Fundraising events 1c				
ifts, ar A	d	Related organizations 1d				
m G	e	Government grants (contributions) 1e		# E		
Contributions, Giffs, Grants and Other Similar Amounts	f	All other contributions, gifts, grants, and 1f 269,666				
ibut	g	similar amounts not included above  Noncash contributions included in lines		* =		
a offi	-	1a-1f \$				
ತಿ ಕ	h	Total. Add lines 1a-1f	269,666			
e		Business Code				
ven	2a	Alaska Business Week	5,001	5,001		
9. 25.	b	Directory  Membership Dues & Assessments	12,681	12,681		
Š	d	membership Dues & Assessments	364,783	364,783		
38	e					
<u> </u>	f	All other program service revenue	,			
Program Service Revenue		Total. Add lines 2a-2f ▶	202.465			
	3	Investment income (including dividends, interest,	382,465			
		and other similar amounts)	1			
	4	Income from investment of tax-exempt bond proceeds	0			
	5	Royalties	J		<u> </u>	
	6a	Gross rents (1) Keal (11) Felsonial				
	Ь	Less rental				
	c	expenses Rental income				=
	d	or (loss)  Net rental income or (loss)	0			e B
		(i) Securities (ii) Other	1			
	7a	Gross amount from sales of				
		assets other than inventory				
	b	Less cost or other basis and				
		sales expenses Gain or (loss)				
	1	Net gain or (loss)	0			
	8a	Gross income from fundraising				
Other Revenue		events (not including \$				
₹ *		of contributions reported on line 1c)				1
Ğ.		See Part IV, line 18 a 114,060	- 1			
ih ei	ь	Less direct expenses b 75,208				
ō	C	Net income or (loss) from fundraising events	38,852			38,85
	9a	Gross income from gaming activities See Part IV, line 19	- 1			
		a a	1 2			
	Ь	Less direct expenses b	-	( T)		
		Net income or (loss) from gaming activities	0			
	104	Gross sales of inventory, less returns and allowances .				
		a				= 1
		Less cost of goods sold b				
	С	Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code	0			
	11a	Other Revenue	214,513	214,513		
	ь					
	C					
	d	All other revenue				
	e	Total. Add lines 11a-11d	214,513			
	12	Total revenue. See Instructions				

	on 501(c)(3) and 501(c)(4) organizations must complete all columns. All Check if Schedule O contains a response or note to any line in this				
	ot include amounts reported on lines 6b,	(A)	(B) Program service	(C) Management and	(D) Fundraising
'b, 8t	p, 9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	0			
2	Grants and other assistance to individuals in the United States See Part IV, line 22	0		= -	
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	93,721		93,721	-
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	210,675		210,675	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	6,079		6,079	
9	Other employee benefits	48,899		48,899	
10	Payroll taxes	29,724	-	29,724	
11	Fees for services (non-employees)				
a	Management	0			
b	Legal	538	128	410	
c	Accounting	23,821	5,685	18,136	
d	Lobbying	15,000	3,580	11,420	
e	Professional fundraising services See Part IV, line 17	0	3,300	11,120	
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on				
	Schedule O)	5,025	60	4,965	
.2	Advertising and promotion	184,614	184,364	250	
.3	Office expenses	3,011	897	2,114	
.4	Information technology	18,071	1,910	16,161	
.5	Royalties	0			
16	Occupancy	52,030		52,030	
.7	Travel	40,637	39,781	856	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
9	Conferences, conventions, and meetings	0		2 2	
0.	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	13,310		13,310	
23	Insurance	3,856		3,856	
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)				
а	Commissions	30,188		30,188	
b	Bad debt	24,975	24,975	La Paris I	
c	Printing and Publications	11,558	10,650	908	
d	Bank Fees	10,536		10,536	
е	All other expenses	12,980	-57,927	765	70,1
25	Total functional expenses. Add lines 1 through 24e	839,248	214,103	555,003	70,1
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► □ if following SOP 98-2 (ASC 958-720)		i = =		

		2013)				Page <b>11</b>
Par	rt X	Balance Sheet Check if Schedule O contains a response or note to any line in this	Dart V			_
		Check it schedule of contains a response of note to any line in this	Pail X	(A)		· · · ·
				Beginning of year		End of year
	1	Cash-non-interest-bearing		266,713	1	404,658
	2	Savings and temporary cash investments		10,859	2	11,082
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		43,227	4	15,020
	5	Loans and other receivables from current and former officers, dire employees, and highest compensated employees Complete Part Schedule L	II of		3 31	
ts	6	Loans and other receivables from other disqualified persons (as d 4958(f)(1)), persons described in section 4958(c)(3)(B), and cor and sponsoring organizations of section 501(c)(9) voluntary emporganizations (see instructions) Complete Part II of Schedule L	tributing employers		5	0
Assets	١_				6	0
AS	7	Notes and loans receivable, net			7	0
	8	Inventories for sale or use			8	0
	9	Prepaid expenses and deferred charges		18,970	9	21,792
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 70,937			
	b	Less accumulated depreciation	<b>10b</b> 42,910	26,238	10c	28,027
	11	Investments—publicly traded securities			11	0
	12	Investments—other securities See Part IV, line 11			12	0
	13	Investments—program-related See Part IV, line 11			13	0
	14	Intangible assets			14	O
	15	Other assets See Part IV, line 11			15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)		366,007	16	480,579
	17	Accounts payable and accrued expenses		6,690	17	6,389
	18	Grants payable			18	
	19	Deferred revenue		251,238	19	270,270
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedu			21	
Liabilities	22	Loans and other payables to current and former officers, directors key employees, highest compensated employees, and disqualified	, trustees,			
<u>ত্র</u>		persons Complete Part II of Schedule L			22	
ä	23	Secured mortgages and notes payable to unrelated third parties			23	1860-
	24	Unsecured notes and loans payable to unrelated third parties .			24	
	25	Other liabilities (including federal income tax, payables to related and other liabilities not included on lines 17-24). Complete Part >	third parties,		12 7	
		D		25,007	25	52,522
	26	Total liabilities. Add lines 17 through 25		282,935	26	329,181
√s dı		Organizations that follow SFAS 117 (ASC 958), check here ▶   ✓ a lines 27 through 29, and lines 33 and 34.	and complete		i in	
Fund Balances	27	Unrestricted net assets		67,226	27	134,766
<u>ස</u>			· • • • • • •	15,846		
<u>~</u>	28	Temporarily restricted net assets		15,646	28	16,632
ĭ	29	Permanently restricted net assets			29	
工		Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34.	-   and			
0	30	Capital stock or trust principal, or current funds			30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund.			31	
15.5						
et A	32	Retained earnings, endowment, accumulated income, or other fund		00.070	32	454.000
9	33	Total net assets or fund balances		83,072	-33	151,398

Total liabilities and net assets/fund balances . . . . . . . . . . .

480,579

366,007 34

Form	990 (2013)			F	age <b>12</b>
Par	TXI Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				. F
1	Total revenue (must equal Part VIII, column (A), line 12)			g	05,497
2	Total expenses (must equal Part IX, column (A), line 25)	2			39,248
3	Revenue less expenses Subtract line 2 from line 1	3			66,249
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			83,072
5	Net unrealized gains (losses) on investments	5			-
6	Donated services and use of facilities	5			
7	Investment expenses	7			
8	Prior period adjustments	3		m 2	
9	Other changes in net assets or fund balances (explain in Schedule O)	9			2,077
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	0	1	1	.51,398
Par	t XII Financial Statements and Reporting	. 1			75-
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewe a separate basis, consolidated basis, or both  Separate basis  Consolidated basis  Both consolidated and separate basis	d on	10		
b	Were the organization's financial statements audited by an independent accountant?	1	2b		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separa basis, consolidated basis, or both	te			
	Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of audit, review, or compilation of its financial statements and selection of an independent accountant?	of the	2c	Yes	- a.W
	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?	= =	За		No

3b

Form 990 (2013)

**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

Software ID: 13000170

Software Version: 2013v3.1

EIN: 92-0026812

Name: Alaska State Chamber of Commerce

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Inde						,	,			
(A) Name and Title	(B) Average	Posi		(C) do n	ot cl	neck		(D) Reportable	(E) Reportable	(F) Estimated amount
	hours per week (list	more to	han o	ne b	οx, ι	unless		compensation from the	compensation from related	of other compensation
	any hours	anda	dire	ctor	/trus			organization (W-	organizations (W-	from the
	for related organizations	오코	=	₽	<u>@</u>	등론	공	2/1099-MISC)	2/1099-MISC)	organization and related
	below	G E	State	Officer	ē	98	Former			organizations
	dotted line)	용트	D D		ologi	800	-			
		7 2	<u> </u>		employee	9				
		Individual trustaa or director	Institutional Trustee		0	3				}
			99			Highest compensated employee				
						ĕ				
Portia Babcock	2 00	×						0	0	0
At-Large	0 00			L	_	ļ	<u> </u>			
Cory Baggen	2 00	x	17					0	0	0
At-Large Richard Beneville	0 00	ļ	<u> </u>	<u> </u>	-	-	-			
	1 00	×						0	0	0
Nome Chamber John Sims	0 00		-	_	├	-	├			
	1 00	х						0	0	0
Chugiak-Eagle Mary Ann Pease	0 00		-		$\vdash$	-	├			
	1 00	×			-			0	0	0
District P Greg Deal	1 00		-	_	-	-	-			
A CONTRACTOR OF THE CONTRACTOR		×			-			0	0	0
Kodiak Chamber Bill Bishop	1 00				-		├			
		×						0	0	0
Appointed  Jason Brune	1 00		-	_	-		$\vdash$			
		×						0	0	0
Appointed  Michelle Egan	1 00			<del> </del>	-	-	-	!		
		×						0	0	0
District M Ann Ringstad	1 00				-					
-		х						0	0	0
At Large Cheryle James	1 00		-				-			
Cooper Landing		х				ŀ		0	0	0
Renata Benett	1 00		_	-		<del> </del>	-			
Outside Chamber	0 00	×						0	0	0
Catherine Claxton	1 00		-		-	+	$\vdash$			
Appointed	0 00	X						0	0	0
Janke Bush	1 00	7								
Prince of Wales	0 00	Х						0	0	0
Paula Nance	1 00									
Wasılia Chamber	0 00	Х	-					0	0	0
Darren Franz	1 00									
Appointed	0 00	X					- 4	0	0	0
Doug Ward	1 00							_		
Ketchikan Chamb	0 00	Х						0	0	0
Rebecca Hamon	1 00	U								
Bristol Bay Bor	0 00	Х						0	0	0
Tara Reimer Jones	1 00	v								
District R	0 00	Х				L		0	0	0
Hans Neidig	1 00	х					H	0	0	0
Appointed	0 00	1 ^ .			- 1			0	0	0
Gregory J Galık	1 00	х						0		0
At-Large	0 00	^						U	0	0
Lawrence Gaffaney	1 00	×						0	0	0
District C	0 00	_ ^						U	0	0
Louise Bray	1 00	х					ш	0	0	0
Tacoma Chamber	0 00				_			U	0	0
Jeff Cook	1 00	х						0	0	0
District D	0 00	1 1								
Larry J Cooper	1 00	х	7					0	0	0
District I	0 00									· ·

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) A verage hours per week (list any hours	Posit more th person	ion ( nan o n is b	ne bo oth a ctor/	ox, u an of trus	nless ficer tee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Ke) employee	Highest compensated	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
Ryan Kapp	1 00	х						0	0	0
Soldotna Chambe	0 00	4								
Geri Denkewalter	1 00	х			_			0	0	0
Talkeetna Chamb Gerard Godfrey	0 00 1 00						-			
At-Large	0 00	X						0	0	0
Chris Gerondale	1 00	х		_			_	0	0	0
Appointed	0 00							0		109
Deborah Altermatt	1 00	х		4				0	0	0
Seward Chamber Kim Reitmeier	0 00 1 00									
At-Large	0 00	х						0	0	0
Scott Hawkins	1 00	х						0	0	0
Appointed	0 00							U		U
David Combs	1 00	x						0	0	0
Palmer Chamber Brad Osborne	0 00 3 00									
Dist T Chair	0 00	х		х				0	0	0
Ina L Mueller	1 00							_	_	
Big Lake Chambe	0 00	Х						0	0	0
Bob Tannahill	1 00	×						0	0	0
At Large	0 00		_		_					
Jennifer Imus	1 00	х						0	0	0
Fairbanks Karen Matthias	0 00			-						
District N	0 00	×						0	0	0
Lısa Parker	1 00	×						0	0	0
District Q	0 00			- 1						
Joe Hegna	1 00	×		1				0	0	0
Appointed James Johnsen	0 00 1 00									
Appointed	0 00	Х					10	0	0	0
Lynne Seville	_ 1 00	X						0	0	0
Appointed	0 00					- 1		· ·		
Barbara Mulford	1 00	х						0	0	0
Haines Chamber Eric Wilson	0 00 1 00									
Seattle Chamber	0 00	x						0	0	0
Hal Ingalls	1 00	.,								0
District G	0 00	Х					-	0	0	0
Dee Dee Kay	1 00	x						0	0	0
Appointed  John Rusysniak	0 00									
		х						0	0	0
Tok Chamber Allen Hippler	0 00 2 00									
Dist S Sec/Trea	0 00	Х		X				0	0	0
Ian McGaughey	1 00	х		-				0	0	0
Seldovia Chambe	0 00									
Caroline Higgins	2 00	х						0	0	0
At Large	0 00				L	L				

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Inde (A) Name and Title	(B) A verage hours per week (list any hours for related	Posi more t perso and a	tion ( han o n is l	ne b ooth	ox, ι an o /trus	inless fficer tee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)  or clipctor  or clipctor		organization and related organizations							
Renee Schofield	2 00	×	1/4	×			4	0	0	and anstruction and
Dist A Chair	0 00			L^	^					TO THE SECOND I
Jennifer Gibbins	1 00	x						0	0	0
Cordova Chamber	0 00	^							0	0
James W Mendenhall PE	1 00	X	ŝų		7 6			0	0	0
At-Large	0 00	_ ^		57.11				0	0	0
Jeff Lentfer	1 00	×					-	0	0	0
Appointed	0 00							0	U	Agreement Specification of
Marilyn Romano	1 00	×						0	0	0
At-Large	0 00		37.7	7.5.	7.0	-,1				
Nance Larsen	1 00	×						0	0	0
District O	0 00	_ ^		2.0				O .	0	ı
Robert Peterkin II	1 00	×						0	0	0
Kenai Chamber	0 00							0	U	0.5
Max Mertz CPA	1 00								0	
Juneau Chamber	0 00	Х						0	0	0
Ralph Samuels	1 00	- 1-1-1-2	114.7	516	200		Diame.			
Appointed	0 00	Х			1			0	0	0
Wendy Lindskoog	1 00		1 1	V						11-
District L	0 00	×		X				0	0	0
Dave MacDowell	1 00	V								
Appointed	0 00	X						0	0	0
Ptarmica McConnell	1 00	F		2 -		14 14			41311-4	
Sitka Chamber	0 00	X			1		- 1	0	0	0
Margaret Russell	1 00					-				
District F	0 00	X						0	0	0
Andrew Teuber	1 00		17	51					्	sgirle
At-Large	0 00	Х						0	0	0
Mike Satre	1 00	,								
District B	0 00	X						0	0	0
Annette Sheppard	1 00	, , , , , , , , , , , , , , , , , , ,								
District J	0 00	Х			Ħ			0		0
Casey Sullivan	2 00	1,7		Ţ,						
Appointed	0 00	Х		X				0	0	0
Jack B Wilbur Jr	1 00					F	-	_	76	
District E	0 00	Х						0	0	0
Kelly Bender	1 00							_		
Whittier Chamb	0 00	X						0	0	0
Matt Gill	1 00									
District K	0 00	X		-				0	0	0
Lucinda Martinez	1 00									
Homer Chamber	0 00	Х	-	= =				0	0	0
Rachael Petro	40 00									
		1	1	Х		1		93,721	0	17,500

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### **SCHEDULE C**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

▶ See separate instructions. ▶ Information about Schedule C (Form 990 or 990-EZ) and its

OMB No 1545-0047

Open to Public Inspection

instructions is at www.irs.gov/form990. If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C • Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts FA and C below. Do not complete Part FB Section 527 organizations Complete Part I-A only If the organization answered "Yes" to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-A ◆ 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-B If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** Alaska State Chamber of Commerce 92-0026812 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes Was a correction made? □ No Yes If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities 1 Enter the amount of the filing organization's funds contributed to other organizations for section 527 2 exempt function activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? Yes Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0 -
	Total III			
			-1 **	
20-1				
		HELT .		
		1-4-4-5		
		2 -4 * 1 - 1	14 444	

Schedule C (Form 990 or 990-EZ) 2013	chedule	C (Fo	rm 990	or 990	-EZ	2013
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section 4911 tax for this year?

Page 2

☐ Yes ☐ No

	under section 501(h)).	in is exempt under section sorter(s)	and n	ied Form 5700	(election
	expenses, and share of excess lob		ated gr	oup member's name	e, address, EIN,
В	Check 🕨 🗀 if the filing organization checked b	ox A and "limited control" provisions apply			_
	Limits on Lobbying (The term "expenditures" means a		i	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public	opinion (grass roots lobbying)			
b	Total lobbying expenditures to influence a legis	lative body (direct lobbying)			
C	Total lobbying expenditures (add lines 1a and 1	b)		relice and Arrivity	
d	Other exempt purpose expenditures				
e	Total exempt purpose expenditures (add lines :	c and 1d)		all ty and advance	
f	Lobbying nontaxable amount Enter the amount columns	from the following table in both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:			
	Not over \$500,000	20% of the amount on line 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000			
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	41		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000			= =
	Over \$17,000,000	\$1,000,000			
					Tale of the second
g	Grassroots nontaxable amount (enter 25% of la	ne 1f)			
h	Subtract line 1g from line 1a If zero or less, en	ter-0-	1,63		
i	Subtract line 1f from line 1c If zero or less, ent	er -0-	13		
j	If there is an amount other than zero on either I	ine 1h or line 1i, did the organization file Form 47	20 rep	orting	

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

	Lobbying Expendit	ures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) Total
2a	Lobbying nontaxable amount	Moor and control		2 2		ic to
b	Lobbying ceiling amount (150% of line 2a, column(e))					
С	Total lobbying expenditures					
d	Grassroots nontaxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					

_	filed Form 5768 (election under section 501(h)).	(a	1)		(b)	
For ead activit	th "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying y.	Yes	No	4	A mour	nt
1	During the year, did the filing organization attempt to influence foreign, national, state or local egislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			200		
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?	- 10 70			11.1	
e	Publications, or published or broadcast statements?		PT .			
f	Grants to other organizations for lobbying purposes?	= 1	79.1			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	2	16	i i		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?				L 19 11	ře s
j	Total Add lines 1c through 1:					
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	- î		1		
С	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?					
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6).	01(c	(5),	or s	ectio	n
			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	Yes	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		No
	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		No
	III-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."	No" C	)(5), (b)	Par	t III	n -A,
	Dues, assessments and similar amounts from members	1				
	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	2a				
	Current year	<del></del>				
	Carryover from last year	2b				
	Total	2c				
	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and					
	political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				
	t IV Supplemental Information					
Prov	ide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grou II-B, line 1 Also, complete this part for any additional information	p lıst),	Part I	[-A,	ine 2,	and
	Return Reference Explanation				in in	
						11,

Page 4

Return Reference	Explanation	
	***************************************	
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	Average 2011	

Schedule D (Form 990) 2013

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DLN: 93493316049984

### SCHEDULE D

(Form 990)

Department of the Treasury

## **Supplemental Financial Statements**

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions. ► Information about Schedule D (Form 990)

OMB No 1545-0047

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and its instructions is at www.irs.gov/form990. Internal Revenue Service Employer identification number Name of the organization Alaska State Chamber of Commerce 92-0026812 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year Aggregate contributions to (during year) 2 Aggregate 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 Yes 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? Conservation Easements. Complete if the organization answered "Yes" to 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 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 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) **2**c C Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year -Number of states where property subject to conservation easement is located ... Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year **▶** \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to 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) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X **▶** \$ If the organization received or held works of art, 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

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

**▶** \$ \_

-\$

Par	terr Organizations Maintaining Co	llections of Ar	t, His	stori	cal Tr	easu	res, or O	ther	Similar As	sets (	continued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other reco	rds, c	heck	any of t	he follo	wing that a	are a	significant use	e of its	
а	Public exhibition		d	$\Gamma$	Loan	orexch	ange progr	ams			
b	Scholarly research		е	Γ	Other						
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expl	aın ho	w the	/ furthe	er the o	rganızatıon	's exe	empt purpose	ın	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t								lar	┌ Yes	□ No
Pa	rt IV Escrow and Custodial Arrang Part IV, line 9, or reported an an						answere	d "Ye	s" to Form 9	₹90,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	lian or other interm	ediary	for c	ontribu	tions o	r other ass	ets n	ot	☐ Yes	□ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	e follo	wing t	able		_				
							-		Ar	nount	
c	Beginning balance						-	1c			
d	Additions during the year						-	1d		T-	- in
e	Distributions during the year						-	1e			
f	Ending balance						L	1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, lin	ne 217	•						Yes	∏ No
b	If "Yes," explain the arrangement in Part XII										
Pa	rt V Endowment Funds. Complete										
1a	Beginning of year balance	(a)Current year	(b	)Prior y	ear	b (c) I w	o years back	(d)1	hree years back	(e)Four	years back
b	Contributions							+			
c	Net investment earnings, gains, and losses							-			
	Net investment earnings, gams, and losses							-			
d	Grants or scholarships										
е	Other expenditures for facilities and programs										
f	Administrative expenses							<b>†</b>			
g	End of year balance										
2	Provide the estimated percentage of the curi	rent year end balan	ce (lır	ne 1a.	colum	n (a)) h	eld as				
а	Board designated or quasi-endowment			- 5,							
ь	Permanent endowment >-										
_	Temporarily restricted endowment >										
	The percentages in lines 2a, 2b, and 2c show										
3a	Are there endowment funds not in the posses organization by	ssion of the organiz	ation	that a	re held	l and ac	dministered	fort	he	34:	, Dia
	(i) unrelated organizations								3a(	(i) Yes	No
	(ii) related organizations					The III			3a(	-	
b	If "Yes" to 3a(II), are the related organization		d on S	ched	ule R?				3		
4	Describe in Part XIII the intended uses of th										
Pai	t VI Land, Buildings, and Equipme		the o	rgan	zatıor	answ	ered 'Yes	' to F	orm 990, Pa	irt IV, I	ine
	11a. See Form 990, Part X, line 1 Description of property	10.		l (a	) Cost o	r other	(b)Cost or	other	(c) Accumulate	d (d)	Book value
	,				sis (inve		basis (oth		depreciation		
1a	Land										
b	Buildings										
C	Leasehold improvements										
d	Equipment										
	Other						70	,937	42,9	)10	28,027
Tota	<ol> <li>Add lines 1a through 1e (Column (d) must e</li> </ol>	qual Form 990 Part	X. coli.	ımn (F	3) line	10(c))					28 027

<ul><li>(a) Description of security or category (including name of security)</li></ul>	(b)Book value	(c) Method of valuation Cost or end-of-year market value
L)Financial derivatives		
)Closely-held equity interests		
her		
	=	
tal. (Column (b) must equal Form 990, Part X, col (B) line 12)		
rt VIII Investments-Program Related. Cor	mplete if the organization	n answered 'Yes' to Form 990, Part IV, line 1
See Form 990, Part X, line 13.  (a) Description of investment	(b) Rook value	(c) Mathad of valuation
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
		9525
		odan and
tal. (Column (b) must equal Form 990, Part X, col (B) line 13 )		
art IX Other Assets. Complete if the organization (a) Descrip		), Part IV, line 11d See Form 990, Part X, line 15 (b) Book value
(a) Descrip	COL	(b) Book Value
		and the same of th
tal. (Column (b) must equal Form 990, Part X, col.(B) line 15	.)	
Part X Other Liabilities. Complete if the organ	nization answered 'Yes' t	o Form 990, Part IV, line 11e or 11f. See
Form 990, Part X, line 25.	(b) no alternative	
(a) Description of liability	(b) Book value	
deral income taxes		
crued Payroll Liabilities	28,637	
ase Payable	23,885	
ac (Listense 11 a charace	<u> </u>	

Part	ΧΙ	Reconciliation of Rethe organization answ	evenue per Audited Financial Statements With Revenue prered 'Yes' to Form 990, Part IV, line 12a.	er Re	turn Complete if
1	Tota		r support per audited financial statements	1	1,003,056
2	A mo	unts included on line 1 but	t not on Form 990, Part VIII, line 12		
a	Net	unrealized gains on invest	ments 2a	İ	
b	Don	ated services and use of fa	collities		
C	Reco	overies of prior year grants	2c		
d	Othe	er (Describe in Part XIII )		1	
e	Add	lines 2a through 2d		2e	27,351
3	Subt	cract line <b>2e</b> from line <b>1</b> .		3	975,705
4	A mo	unts included on Form 990	D, Part VIII, line 12, but not on line 1		
а	Inve	stment expenses not inclu	ided on Form 990, Part VIII, line 7b . 4a		
b	Othe	er (Describe in Part XIII )	4b -70,208		
C	Add	lines 4a and 4b	· · · · · · · · · · · · · · · · · · ·	4c	-70,208
5	Tota		4c. (This must equal Form 990, Part I, line 12)	5	905,497
Part	XII		kpenses per Audited Financial Statements With Expenses swered 'Yes' to Form 990, Part IV, line 12a.	per l	Return. Complete
1	Tota	l expenses and losses per	audited financial statements	1	934,730
2	A mo	unts included on line 1 but	not on Form 990, Part IX, line 25		
a	Dona	ated services and use of fa	cilities 2a 24,601		
b	Prior	year adjustments	2b		
С	Othe	rlosses			
d	Othe	er (Describe in Part XIII )	2d 70,881		
e	Add	lines 2a through 2d		2e	95,482
3	Subt	ract line <b>2e</b> from line <b>1</b> .		3	839,248
4	A mo	unts included on Form 990	), Part IX, line 25, but not on line 1:		
а	Inve	stment expenses not inclu	ded on Form 990, Part VIII, line 7b 4a		
b	Othe	r (Describe in Part XIII )	4b	ŀ	
c	Add	lines 4a and 4b		4c	
5	Tota	l expenses Add lines <b>3</b> an	d <b>4c.</b> (This must equal Form 990, Part I, line 18)	5	839,248
Part	XIII	Supplemental Info	ormation		
	/ , line	4, Part X, line 2, Part XI,	Part II, lines $3,5$ , and $9$ , Part III, lines $1a$ and $4$ , Part IV, lines $1b$ and $2b$ , lines $2d$ and $4b$ , and Part XII, lines $2d$ and $4b$ . Also complete this part to $p$		e any additional
	R	eturn Reference	Explanation		
Part X	FIN	48 Footnote	The Chamber is exempt from Federal income taxes under Section 501(c)( Internal Revenue Code Although the Chamber is exempt from federal income derived from unrelated business activities is subject to the requirements of Form 990T and a tax liability may be determined on these activities. The	me ta of filing Chamb	xes, any income i Federal Income Tax per's policy is to

Ketaili Kelerelice	Explanation
Part X FIN48 Footnote	The Chamber is exempt from Federal income taxes under Section 501(c)(6) of the United States Internal Revenue Code. Although the Chamber is exempt from federal income taxes, any income derived from unrelated business activities is subject to the requirements of filing Federal Income Tax Form 990T and a tax liability may be determined on these activities. The Chamber's policy is to include penalties and interest associated with income taxes in income tax expense. The Chamber's 990 is open to audit from state and federal taxing agencies. The tax years open for audit are 2010, 2011, and 2012. The Chamber believes that it has appropriate support for any tax positions taken, and as such, does not have any uncertain tax positions that are material to the financial statements.
Part XI, Line 2d Other revenue amounts included in F/S but not included on form 990	ABPAC \$2750
Part XII, Line 2d Other expenses and losses per audited F/S	Expenses from the PAC Program Activities \$673 Event expenses recored on Part VIII \$70208
- A	

Schedule D (1 01111 990) 2013		rage 3
Part XIII Supplemental Information	on (continued)	
Return Reference	Explanation	
	1. DOS MARTO STRUCTURE SOCIO CONTRACTOR DE C	
		***************************************
Market and addition		Company of Section (Company)
	The state of the s	
		the maccommunity of the second control of
W. DOWNERS WARRANT WITH THE TAXABLE PROPERTY.		

Schedule D (Form 990) 2013

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DLN: 93493316049984

**SCHEDULE G** (Form 990 or 990-EZ)

Department of the Treasury

**Supplemental Information Regarding Fundraising or Gaming Activities** 

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

OMB No 1545-0047

	THIOTHERION GROWL SCHOOL	are a (Tottiii	99U OT 99U-t	Z) and its instructions is at w	ww.irs.gov/form990.	Inspection
e of the organization ca State Chamber of Comme					Employer ider	ntification number
					92-0026812	
					to Form 990, Part IV	, line 17.
Indicate whether the organi	zation raised funds	through a	ny of the f	ollowing activities Che	eck all that apply	
	itations					
Phone solicitations						
▼ In-person solicitations			_	, -,,,,,,,,,	,	
or key employees listed in F	Form 990, Part VII)	or entity	ın connec	tion with professional f	undraising services?	┌ Yes ┌
If "Yes," list the ten highes to be compensated at least	t paid individuals or \$5,000 by the orga	entities (	fundraisei	rs) pursuant to agreem	ents under which the fu	ndraiser is
) Name and address of individual or entity (fundraiser)	(ii) Activity	fundra: cust cont	ser have ody or rol of	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
n d -		Yes	No	_ =		
_ =				_	-	
		<b>-</b>				
					,	
		-				
			=			
			▶			
List all states in which the o	rganization is regis	tered or li	censed to	solicit contributions o	r has been notified it is	exempt from
	Fundraising Active Form 990-EZ filers  Indicate whether the organical Mail solicitations  Internet and email solicity Phone solicitations  In-person solicitations  Internet and email solicity In-person solicitations  If "Yes," list the ten highes to be compensated at least  Name and address of individual or entity (fundraiser)	Fundraising Activities. Complete Form 990-EZ filers are not required.  Indicate whether the organization raised funds  Mail solicitations  Internet and email solicitations  Phone solicitations  In-person solicitations  Did the organization have a written or oral agreor key employees listed in Form 990, Part VIII)  If "Yes," list the ten highest paid individuals on to be compensated at least \$5,000 by the organization or entity (fundraiser)  (ii) Activity  List all states in which the organization is regis	Fundraising Activities. Complete if the or Form 990-EZ filers are not required to complete if the organization raised funds through and mail solicitations.  Mail solicitations.  Phone solicitations.  In-person solicitations.  Did the organization have a written or oral agreement with or key employees listed in Form 990, Part VII) or entity of the compensated at least \$5,000 by the organization.  Name and address of individual or entity (fundraiser).  Name and address of contribution or entity (fundraiser).  Yes.	Fundraising Activities. Complete if the organizati Form 990-EZ filers are not required to complete this Indicate whether the organization raised funds through any of the file Mail solicitations in the file Mail solicitations is given in the result of the organization have a written or oral agreement with any indicate or key employees listed in Form 990, Part VII) or entity in connect of the organization have a written or oral agreement with any indicated the organization have a written or oral agreement with any indicated the organization have a written or oral agreement with any indicated the organization have a written or oral agreement with any indicated the organization have a written or oral agreement with any indicated the organization have a written or oral agreement with any indicated the organization have a written or oral agreement with any indicated the organization or entities (fundraiser).  Name and address of individual or entities (fundraiser have custody or control of contributions?  Yes No  Install states in which the organization is registered or licensed to	Fundraising Activities. Complete if the organization answered "Yes" Form 990-EZ filers are not required to complete this part.  Indicate whether the organization raised funds through any of the following activities. Che Mail solicitations  Mail solicitations  Form Phone solicitations  Form Phone solicitations  In-person solicitations  Indicate whether the organization answered "Yes"  Form Phone solicitations  Form Phone solicitations  Indicate whether the organization for solicitations  Indicate whether the organizations  Form Phone solicitations  Indicate whether the organizations  Form Phone solicitations  Indicate whether the organization have a written or oral agreement with any individual (including office or key employees listed in Form 990, Part VII) or entity in connection with professional for the professional form of the pro	### Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV Form 990-EZ filers are not required to complete this part.  Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations    Internet and email solicitations

Part II	Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported
	more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List
	events with gross receipts greater than \$5,000.

		9				
			(a) Event #1 Fundraising Events	(b) Event #2	(c) O ther events	(d) Total events (add col (a) through col (c))
			(event type)	(event type)	(total number)	331 (3)
Revenue	1	Gross receipts	114,060	0		114,060
eve	2	Less Contributions				7 -
<u>~</u>	3	Gross income (line 1 minus line 2)	114,060			114,060
	4	Cash prizes				
မ	5	Noncash prizes				
Expenses	6	Rent/facility costs	17,19	1		17,191
ᄶ	7	Food and beverages .	4,429	9		4,429
Direct	8	Entertainment				
Δ	9	Other direct expenses .	53,588	3		53,588
	10	Direct expense summary Add lin	es 4 through 9 ın columr	ı(d)		(75,208)
	11	Net income summary Subtract li	ne 10 from line 3, column	n (d)	,,,	38,852
Par	t II	Gaming. Complete if the or \$15,000 on Form 990-EZ, lii	rganization answered ne 6a.	"Yes" to Form 990, Pa	rt IV, line 19, or repo	orted more than
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Re	1	Gross revenue				
ses	2	Cash prizes				
kbeni	3	Non-cash prizes				
Direct Expenses	4	Rent/facility costs				
౼	5	Other direct expenses				7.
	6	Volunteer labor	┌ Yes %		┌ Yes %	_
	7	Direct expense summary Add line	s 2 through 5 in column (	(d)		
	8	Net gaming income summary Subt	tract line 7 from line 1, co	olumn (d)	I <b>.</b>	
9		ter the state(s) in which the organiz	ation operates gaming ac	tivities		Yes No
a		the organization licensed to operate 'No," explain				. I fes I No
Ь		No, explain				
10a	We	re any of the organization's gaming	licenses revoked, suspe	nded or terminated during	the tax year?	· · Fyes FNo
b	If'	'Yes," explain				

Sch	edule G (Form 990 or 990-EZ) 2013				Page <b>3</b>				
Doe	s the organization operate gaming activiti	es with nonmembers?		г	Yes No				
12	Is the organization a grantor, beneficiar	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity							
	formed to administer charitable gaming?				Tyes TNo				
13	Indicate the percentage of gaming activ	ity operated in							
а	The organization's facility	N3-040-1-16	Service of the section	13a	%				
b	An outside facility			13b	%				
14	Enter the name and address of the person	on who prepares the org	ganızatıon's gamıng/specıal events	books and records	;				
	Name -								
	Address								
	Address				************				
15a	Does the organization have a contract w	oth a third party from w	hom the organization receives gam	nına					
	revenue?				Гу. Г.				
b					I Yes I No				
	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the								
_	amount of gaming revenue retained by the third party 🕨 \$								
C	If "Yes," enter name and address of the third party								
	Name ►								
	Name 🟲								
	Address 🏲								
	***************************************				**********				
16	Gaming manager information								
	Name -								
		*************							
	Gaming manager compensation 🏲 \$								
	Description of services provided		***************************************						
	Director/officer	Employee	☐ Independent contract	or					
17	Mandatory distributions								
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to								
	retain the state gaming license?	retain the state gaming license?							
b	Enter the amount of distributions require	d under state law distr	ibuted to other exempt organizatio	ns or spent					
	in the organization's own exempt activit								
Pai			nations required by Part I, line						
	Part III, lines 9, 9b, 10b, 15b additional information (see in		as applicable. Also complete t	nis part to provid	e any				
		ou actions).							
	Return Reference		Explanation						

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2013

Open to Public Inspection

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

> Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization Alaska State Chamber of Commerce Employer identification number

92-0026812

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part III, Line 4d Other Program Services Description	I hope with distributed assets the
Form 990, Part VI, Line 6 Explanation of Classes of Members or Shareholder	The Alaska State Chamber of Commerce is a membership organization
Form 990, Part VI, Line 11b Form 990 Review Process	CEO reviews form with CPA's and Auditors
Form 990, Part VI, Line 15a Compensation Review & Approval Process - CEO, Top Management	Board provides annual review and evaluation of the President/CEO
Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	Upon request
Other Changes In Net Assets Or Fund Balances - Other Increases	The Net Income from PAC Program = \$2077