

TOURISM PROMOTION PROGRAM • APPLICATION FOR FUNDING

APPLICANT INFORMATION

TYPE OF PROPOSAL

SUBMISSION REQUIREMENTS

Project Title: Silverdale Vistor CenterProject Dates: Beginning: January 1, 2022 Ending: December 31, 2022Name of Organization Silverdale Chamber of Commerce Web Site www/silverdalechamber.com

(360)

Mailing Address: PO Box 1218 Silverdale WA 98383Contact Person: David Emmons E-Mail: david@silverdalechamber.com Phone: (360) 692-6800Amount Requested: \$ \$154,735.00 Total Project Cost: \$ 204,735.00Portion of Total Project Cost Requested: 75.5 (%)Signature of Authorized Representative David Emmons **Tourism Infrastructure:**

Support tourism-related facilities, which is defined as real or tangible personal property with a usable life of three or more years or constructed with volunteer labor and used to support tourism, performing arts, or to accommodate tourist activities.

 Tourism Marketing Activities:

Activities and expenditures designed to increase tourism, including but not limited to advertising, publicizing or otherwise distributing information for the purpose of attracting and welcoming tourists; developing strategies to expand tourism; operating tourism promotion agencies; and funding marketing of special events and festivals designed to attract tourists (*not a current funding priority*).

APPLICANTS MUST SUBMIT THE FOLLOWING:

1. A one-page budget including all income and expenses for the entire project (including matching funds and in-kind contributions) and clearly showing expenses for which County lodging tax dollars will be used.
2. Documentation of non-profit status.
3. Your organization's **most recent tax return** or most recent annual financial statement created by an independent source should a tax return not be available. Other documentation showing financial viability may be considered if agency is newly created and the documentation is prepared by an independent source.
4. A two-page document including a description of the proposed project with an explanation of how it will assist in building tourism and/or promoting events or activities that will bring tourists to Kitsap County. Include marketing plans and examples of performance indicators and well as plans for future sustainability. For more information see the included template.
5. No additional materials will be accepted.
6. If these basic criteria are not met, the application will not be reviewed
7. Certificate of Insurance evidencing that any required insurance coverages are, or will be, in effect through the 2022 calendar year.

Please submit completed applications via Email by August 13, 2021 @ 3:00 P.M.:

Purchasing@co.kitsap.wa.us

All documentation must be received by deadline and contain ALL submission requirements to be considered for funding. Questions? Call Glen McNeill at 360.337.4789 or e-mail gsmneill@co.kitsap.wa.us



Lodging Tax Request: Organization/Event Description

Project Title: *Silverdale Visitor Center – 2022 Tourism Infrastructure & Marketing: 1) Visitor Center Operations, 2) Silverdale Visitor’s Guide, 3) Stay, Shop and Play Local Campaign, 4) Silverdale Tourism Website Development, 5) Silverdale Community Event Support and Promotions, 6) Summers at the Waterfront - Wednesday Night Concert Series, and 7) Regional Advertising for Silverdale*

Name of Organization: Silverdale Chamber of Commerce and Visitor Center

Size of Staff & Board: 2FT, 2PT, 16-member Volunteer Board

Size of Volunteer Base: 35 - 40 Committee members

Geographic Area Served: Silverdale and Kitsap County

Demographic Served: All

Type of Service Provided: Silverdale Tourism, Marketing, Promotion, and Community Events

Description of Proposed Project: The Silverdale Visitor Center (SVC) is housed in the Silverdale Chamber of Commerce office, located in the Kitsap Mall, for high visibility and convenience for visitors to the area. The SVC is open 6 days a week and promotes all areas of Kitsap County with a focus on the unincorporated portions of Silverdale and Central Kitsap County, which do not receive additional support from city tourism budgets. Promotional videos are streamed 16 hours, 337 days a year, in the SVC office and on our Kitsap Mall Kiosk (visible by more than 132,000 mall visitors in 2020). The 49” Kiosk is located just off the center court and has had 93,654 interactions since August 13, 2021. The SVC also hosts a 52” and 100” visible screen, which can be seen through the glass storefront that promotes Silverdale tourism, community events, local tourist attractions, and local businesses. Additionally, the Chamber website highlights the area and streams videos with an average of more than 21k visits per year. The mission of the SVC is to showcase the Silverdale community and bring visitors to Silverdale and Central Kitsap County. While housed and partnering with the Silverdale Chamber on many projects and initiatives, the SVC aims to increase tourism in our community, particularly in the Central Kitsap region.

The following projects are currently supported by or can be further implemented through 2022 Lodging Tax funding from Kitsap County. We are requesting funds to maintain the SVC and increase our outreach with new projects and expanded advertising.

- 1. Visitor Center Operations:** we currently employ one part-time Tourism Coordinator who works approximately 30 hours per week and two full-time Chamber staff who dedicate about 8 hours per week to tourism-related tasks and events. The primary function of the Tourism Coordinator is to participate in and promote events throughout the community and promote visiting Silverdale in general. They generate tourism-specific content for the website and social media accounts, prepare mailings for requests for information, and interact directly with the public as the face for tourism at the SVC. Chamber and SVC Staff are also responsible for fulfilling requests through our Hotel Concierge Service (“Come Stay & Play”), creating content for the Silverdale Visitor’s Guide, and working with the Chamber to create content for the SVC section of the Chamber membership weekly e-newsletter, the Monday Morning Memo. A portion of the rent, utilities, equipment, and office supplies for the SVC are provided through Lodging Tax funding. Lodging Tax funds will be utilized for salary, rent, utilities, postage for mailings, sponsorship fees to participate in area events, and supplies for said events. Funds will also support the Kitsap Mall Visitor Kiosk, the Washington Festivals & Events Association, and the Washington Association of Visitor Information Centers memberships.
- 2. Silverdale Visitor’s Guide:** we currently produce a destination magazine for Silverdale that highlights places to visit and shop. These guides are included in the request for information packets given out and mailed out from the SVC, and provided to our local hospitality industry additional business. The Guides are a part of our Hotel Concierge Service, with Guides being placed in participating hotel rooms for guests to use as a resource. In 2022, the Silverdale Visitor’s Guide will be a stand-alone publication and will not be combined with the Silverdale Chamber membership directory. We will also be producing several additional brochures/rack cards for specific industries in Silverdale and the Central Kitsap Region. It should be noted that all Silverdale and Central Kitsap businesses, regardless of Chamber membership, will be included in this guide under industry categories to ensure that all local businesses benefit from the visitors to our region.
- 3. Stay, Shop, and Play Local Campaign:** this campaign will run year-round and be independent of our Silverdale Visitor’s Guide. Participating businesses will receive promotional materials to display as a “partner business” of this program at their locations. A dedicated page on VisitSilverdale.com and the SVC Facebook/Instagram pages will advertise these partner businesses. This new campaign will support and replace the “Come Stay & Play,” which has served Silverdale well but needs new life. Additionally, the Stay, Shop, and Play campaign will have brochures/rack cards created to include as part of our Hotel Concierge Program. Lodging Tax funds will support the creation of these marketing materials and the cost of SVC-branded bags for the Hotel Concierge Program.
- 4. Silverdale Tourism Website Development:** tourism is currently wrapped up in the Chamber website, SilverdaleChamber.com, but there is a need for a stand-alone website dedicated to tourism and visiting Silverdale and the Central Kitsap region. Other jurisdictions in the county have city-supported tourism sites that drive visitors to the area. With the creation of a new VisitSilverdale.com website, we will be able to provide information to visitors in an easier-to-find format that is kept current and relevant for what is going on in the area.

5. **Silverdale Community Event Support and Promotions:** the SVC has sponsored numerous community events annually to promote tourism and visitors to Silverdale and Central Kitsap County, including the annual Silverdale Christmas tree lighting celebration, Whaling Days, Healthy Kids Day, Kitsap Pride, the Kitsap County Fair, and LiveWell Kitsap. Our goal as we move forward is to utilize Lodging Tax funding to help these events and organizations produce quality marketing and promotional pieces for these events that are currently not being created or funded. We will continue to host information on these events on our website, Kitsap Mall kiosk, SVC screens, social media, and Chamber communication channels (weekly emails) to further promote.
6. **Summers at the Waterfront Concert Series:** in partnership with the Kitsap County Parks Department, the SVC plans to host a summer concert series at the Silverdale Waterfront Park to bring individuals from across the West Sound region to shop and stay in Silverdale while enjoying summer outdoor entertainment. The five Wednesday night concert series will bring the young and old to Silverdale Waterfront Park to enjoy a family-friendly event with great local music, enjoying this beautiful park and the beauty of Dyes Inlet.
7. **Regional Advertising for Silverdale:** with our newly created brand of “Who’s got the beat on what’s going on in Silverdale?” campaign, we plan to continue to advertise Silverdale in various regional and local publications, including Sound Publishing’s “Show the Love” and “Discover Kitsap Peninsula” visitors’ pieces, the Kitsap Business Journal, Visit Seattle and the Washington State Visitor’s Guide. We also plan to produce Silverdale-specific publications to promote family activities, performing arts opportunities, retail, and dining. The SVC is strategically poised to advertise Silverdale and the Central Kitsap region more effectively than other organizations as we are hyper-focused on our immediate area and are the central location for visitors seeking out physical information.

History of Organization/Event: For the past 48 years, the Silverdale Chamber of Commerce has led the way in working for and promoting a thriving business community in Central Kitsap. Our 501c6 organization helped launch Whaling Days, Hydroplane Races, Garden Tours, and the Kitsap Peninsula National Water Trails. Additionally, the creation of our Heartbeat of Kitsap “Come Stay & Play” campaign a decade ago has grown into an irreplaceable asset for supporting our local hospitality industry and the more significant tourism industry in Kitsap County. “Come Stay & Play” began with a map and a handful of coupons encouraging tourists to walk the Clear Creek Trail and has now ballooned into welcome bags and a concierge service for newcomers, special interest groups, and reunions. Our partnership with local hotels and restaurants allows us to promote events and businesses to all who come through Silverdale.

The Silverdale Visitor Center is the only tourism visitor center in the Central Kitsap region that is open to the public 6 days a week. Centrally located in our area at Kitsap’s one regional shopping mall, we are poised to serve visitors from all over the region as they explore all that Central Kitsap County has to offer. We offer information from our partner Chambers of Commerce in Kitsap County. We promote all events that will bring outside visitors to Silverdale and Central Kitsap, spending dollars at our local businesses and putting heads in Silverdale and Kitsap County beds. Our social media accounts continuously monitor and promote local businesses and community events. The digital press available within our center and the Kitsap Mall provides engaging content for current and future visitors alike.

The Silverdale Chamber greatly appreciates that local businesses cannot thrive without a dedicated effort towards tourism in the community. The partnership between the Silverdale Chamber and the Silverdale Visitor Center allows us to continue bringing the best of Central Kitsap and Silverdale to those who will “**Stay, Shop, and Play Local.**”

Scope of Work: As the only regional tourism facility that is open to the public 6 days a week, the SVC offers in-person services and information to those visiting Silverdale and the greater Kitsap County region. Our staff is engaged in executing tourism-focused promotions and events while also providing outreach services via social media, our website, and the traditional mailing of information and relocation packets.

In partnership with the Silverdale Chamber staff, the SVC Tourism Coordinator keeps the SVC manned, well-stocked in informational brochures, creates content for our in-house and mall kiosk media, assembles Hotel Concierge Program bags, and attends regional events. The Coordinator is also responsible for collecting data analytics on tourism for the SVC, researching articles, and editing materials key to our Silverdale and Central Kitsap promotion.

Project Timeline: January 1, 2022, through December 31, 2022. Most projects’ aspects are ongoing through the year, with print deadlines in May 2022. Event-specific projects (Summers on the Waterfront, support of various Silverdale Community events) will follow event timelines.

- Tourism Coordinator - January 1, 2022-December 31, 2022
- Stay, Shop and Play Local Campaign - Sales of WTM Ads begin on January 1, 2022, with sales continuing to April 15, 2022; proof and send to Printers by May 1, 2022.
- Welcome Bags proofed and ordered as needed, refill/update of Hotel Concierge Program racks by 1st of each month
- Silverdale-Specific Brochures/Rack Cards: January 1-April 15, 2022. Proof and send to printers by May 1, 2022
- Visitor’s Guide (VG) Sales start November 1, 2021, for Visitor’s Guide produced in May 2022
- Videos for Kitsap, TV, Website, and Kiosk: January 1, 2021-Dec 31, 2021

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

2020

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2020 calendar year, or tax year beginning _____, **2020, and ending** _____, **20**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Silverdale Chamber of Commerce PO Box 1218 Silverdale, WA 98383	D Employer identification number 91-0911216	E Telephone number (360) 692-6800
F Name and address of principal officer: Same As C Above		G Gross receipts \$ <u>263,608.</u>	
I Tax-exempt status: <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) (<u>6</u>) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "No," attach a list. See instructions	
J Website: www.silverdalechamber.com		H(c) Group exemption number ▶	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: <u>1973</u> M State of legal domicile: <u>WA</u>	

Part I Summary

1	Briefly describe the organization's mission or most significant activities: <u>Promoting Silverdale area business community</u>		
2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
3	Number of voting members of the governing body (Part VI, line 1a)	3	18
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	0
5	Total number of individuals employed in calendar year 2020 (Part V, line 2a)	5	5
6	Total number of volunteers (estimate if necessary)	6	0
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	8,710.
7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
9	Program service revenue (Part VIII, line 2g)	141,587.	201,720.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	13.	6.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	93,175.	30,313.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	234,775.	232,039.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		
14	Benefits paid to or for members (Part IX, column (A), line 4)		
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	150,957.	148,996.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	3,326.	
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ <u>30,690.</u>		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	91,442.	79,550.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	245,725.	228,546.
19	Revenue less expenses. Subtract line 18 from line 12	-10,950.	3,493.
20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
21	Total liabilities (Part X, line 26)	101,588.	93,406.
22	Net assets or fund balances. Subtract line 21 from line 20	14,842.	3,167.
		86,746.	90,239.

COPY

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer: Date: <u>4/20/21</u>	
	Type or print name and title: <u>Rick Soper</u> Chairman	

Paid Preparer Use Only	Print/Type preparer's name: <u>Don Knight CPA</u> Preparer's signature: Date: <u>4-20-21</u>	Check <input type="checkbox"/> if self-employed	PTIN: <u>P01904955</u> Firm's name: <u>Parker Mooers & Cena PS, CPA's</u> Firm's address: <u>9222 Bay Shore Dr NW Ste 150 Silverdale, WA 98383</u> Firm's EIN: <u>91-1702384</u> Phone no.: <u>(360) 692-8808</u>
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May the IRS discuss this return with the preparer shown above? See instructions Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

Promoting Silverdale area business community

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 34,640. including grants of \$) (Revenue \$)

Provide services for members by representation at community events and promoting Silverdale area.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses **▶ 34,640.**

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A.....		X
2 Is the organization required to complete Schedule B, Schedule of Contributors See instructions?.....		X
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I.....		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II.....		
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.....		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I.....		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II.....		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.....		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV.....		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If 'Yes,' complete Schedule D, Part V.....		X
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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI.....	X	
b Did the organization report an amount for investments — other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII.....		X
c Did the organization report an amount for investments — program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII.....		X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX.....		X
e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X.....		X
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.....		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII.....		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional.....		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E.....		X
14a Did the organization maintain an office, employees, or agents outside of the United States?.....		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV.....		X
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.....		X
16 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.....		X
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.....		X
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.....	X	
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.....		X
20a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H.....		X
b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?.....		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.....		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If 'Yes,' complete Schedule I, Parts I and III.</i>		X
23 Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J.</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25a.</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24b		
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		
d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?		
24d		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If 'Yes,' complete Schedule L, Part I.</i>		
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If 'Yes,' complete Schedule L, Part I.</i>		
25b		
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part II.</i>		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part III.</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If 'Yes,' complete Schedule L, Part IV.</i>		X
28a		X
b A family member of any individual described in line 28a? <i>If 'Yes,' complete Schedule L, Part IV.</i>		X
28b		X
c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If 'Yes,' complete Schedule L, Part IV.</i>		X
28c		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M.</i>		X
29		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M.</i>		X
30		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If 'Yes,' complete Schedule N, Part I.</i>		X
31		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If 'Yes,' complete Schedule N, Part II.</i>		X
32		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part I.</i>		X
33		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1.</i>		X
34		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
35a		X
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)? <i>If 'Yes,' complete Schedule R, Part V, line 2.</i>		
35b		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2.</i>		
36		
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI.</i>		X
37		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	X	
38	X	

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.

	Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.		
1 a		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
1 b		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
1 c		

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

		Yes	No
2 a	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. 2 a 5		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2 b	X	
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year? 3 a	X	
b	If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation on Schedule O 3 b	X	
4 a	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)? 4 a		X
b	If 'Yes,' enter the name of the foreign country ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 b		X
c	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? 5 c		
6 a	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? 6 a	X	
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6 b		X
7 Organizations that may receive deductible contributions under section 170(c).			
a	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? 7 a		
b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7 b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7 c		
d	If 'Yes,' indicate the number of Forms 8282 filed during the year. 7 d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7 g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966? 9 a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 b		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12 10 a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 b		
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders 11 a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11 b		
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12 a		
b	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12 b		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? 13 a		
Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13 b		
c	Enter the amount of reserves on hand 13 c		
14 a	Did the organization receive any payments for indoor tanning services during the tax year? 14 a		X
b	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on Schedule O 14 b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15		X
If 'Yes,' see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16		X
If 'Yes,' complete Form 4720, Schedule O.			

Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

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

Section A. Governing Body and Management

		Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year 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 on Schedule O.	18	
b	Enter the number of voting members included on line 1a, above, who are independent		
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?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7 a	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?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?		X
b	Each committee with authority to act on behalf of the governing body?		X
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 on Schedule O.		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10 a	Did the organization have local chapters, branches, or affiliates?		X
b	If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11 a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O		
12 a	Did the organization have a written conflict of interest policy? If 'No,' go to line 13.		X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done.		
13	Did the organization have a written whistleblower policy?		X
14	Did the organization have a written document retention and destruction policy?		X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official.		X
b	Other officers or key employees of the organization		X
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions).		
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
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?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed ▶ None
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on 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. See Schedule O
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records ▶
Don Knight CPA 3100 Bucklin Hill Rd Suite 100 Silverdale WA 98383 (360) 692-6800

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

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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 organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Kathleen Gordon Executive Direc	40 0			X				65,908.	0.	0.
(2) Kristal Thomas Past Chairman	2 0	X						0.	0.	0.
(3) Ken Sethney Director	2 0	X						0.	0.	0.
(4) Erin Sorensen Director	2 0	X						0.	0.	0.
(5) Steven Boe Director	2 0	X						0.	0.	0.
(6) Rick Soper Chairman	10 0	X						0.	0.	0.
(7) KristiAnn Stecker Director	2 0	X						0.	0.	0.
(8) Jeff Reed Director	2 0	X						0.	0.	0.
(9) Jason Wright Chairman Elect	2 0	X						0.	0.	0.
(10) Rosie Apalisok Director	2 0	X						0.	0.	0.
(11) Joel Baxter Director	2 0	X						0.	0.	0.
(12) Scott Shoemaker Director	2 0	X						0.	0.	0.
(13) Amanda Smith Director	2 0	X						0.	0.	0.
(14) Jennifer Strong Director	2 0	X						0.	0.	0.

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 for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(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 organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(15) <u>Marcy Richards</u> ----- Outgoing Chair	2 ----- 0			X			0.	0.	0.
(16) <u>Don Knight</u> ----- Treasurer	2 ----- 0			X			0.	0.	0.
(17) <u>Barry Doll</u> ----- Director	2 ----- 0			X			0.	0.	0.
(18) <u>Micki Peak</u> ----- Secretary	2 ----- 0			X			0.	0.	0.
(19) -----									
(20) -----									
(21) -----									
(22) -----									
(23) -----									
(24) -----									
(25) -----									
1 b Subtotal							65,908.	0.	0.
c Total from continuation sheets to Part VII, Section A							0.	0.	0.
d Total (add lines 1b and 1c)							65,908.	0.	0.
2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶	0								

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If 'Yes,' complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If 'Yes,' complete Schedule J for such individual</i>		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If 'Yes,' complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 0

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1 a				
	b Membership dues	1 b 118,432.				
	c Fundraising events	1 c				
	d Related organizations	1 d				
	e Government grants (contributions)	1 e 83,288.				
	f All other contributions, gifts, grants, and similar amounts not included above	1 f				
	g Noncash contributions included in lines 1a-1f	1 g				
	h Total. Add lines 1a-1f		201,720.			
	Program Service Revenue	2 a	Business Code			
b						
c						
d						
e						
f All other program service revenue						
g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		6.	6.		
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6 a Gross rents	(i) Real				
		(ii) Personal				
		6 c Net rental income or (loss)				
	7 a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
		7 c Net gain or (loss)				
	8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18					
		8 b Less: direct expenses	53,172.			
		c Net income or (loss) from fundraising events	31,569.	21,603.		21,603.
	9 a Gross income from gaming activities. See Part IV, line 19					
		9 b Less: direct expenses				
c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances						
	10 b Less: cost of goods sold					
	c Net income or (loss) from sales of inventory					
Miscellaneous Revenue	11 a <u>Visitors Guide & Adv.</u>	Business Code	8,425.	8,425.		
	b <u>Advertising</u>		285.	285.		
	c					
	d All other revenue					
	e Total. Add lines 11a-11d		8,710.			
12 Total revenue. See instructions		232,039.	6.	8,710.	21,603.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.				
2 Grants and other assistance to domestic individuals. See Part IV, line 22.				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	65,908.	32,954.	32,954.	0.
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.	0.	0.	0.
7 Other salaries and wages.	70,570.		70,570.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).				
9 Other employee benefits.				
10 Payroll taxes.	12,518.		12,518.	
11 Fees for services (nonemployees):				
a Management.				
b Legal.				
c Accounting.	4,465.		4,465.	
d Lobbying.	176.			176.
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.				
13 Office expenses.	10,149.		10,149.	
14 Information technology.				
15 Royalties.				
16 Occupancy.	18,564.		18,564.	
17 Travel.	584.		584.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.				
20 Interest.	593.		593.	
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.				
23 Insurance.	1,358.		1,358.	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <u>Tourism Marketing</u>	30,514.			30,514.
b <u>Bank Charges</u>	2,750.		2,750.	
c <u>Miscellaneous</u>	2,588.		2,588.	
d <u>Employee Work Expenses</u>	1,537.		1,537.	
e All other expenses.	6,272.	1,686.	4,586.	
25 Total functional expenses. Add lines 1 through 24e.	228,546.	34,640.	163,216.	30,690.
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1	Cash – non-interest-bearing	72,483.	1	38,439.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	29,105.	4	52,086.
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	181.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 34,070.		
	10b	Less: accumulated depreciation	10b 34,070.	10c	
	11	Investments – publicly traded securities		11	
	12	Investments – other securities. See Part IV, line 11		12	
	13	Investments – program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	2,700.
16	Total assets. Add lines 1 through 15 (must equal line 33)	101,588.	16	93,406.	
Liabilities	17	Accounts payable and accrued expenses	14,842.	17	3,167.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D ..		25	
	26	Total liabilities. Add lines 17 through 25	14,842.	26	3,167.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 27, 28, 32, and 33.				
	27	Net assets without donor restrictions		27	
	28	Net assets with donor restrictions		28	
	Organizations that do not follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 29 through 33.				
	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
	31	Retained earnings, endowment, accumulated income, or other funds	86,746.	31	90,239.
	32	Total net assets or fund balances.	86,746.	32	90,239.
33	Total liabilities and net assets/fund balances.	101,588.	33	93,406.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	232,039.
2	Total expenses (must equal Part IX, column (A), line 25)	2	228,546.
3	Revenue less expenses. Subtract line 2 from line 1	3	3,493.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	86,746.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	90,239.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____		
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.			
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?	X	
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:			
<input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2 b	Were the organization's financial statements audited by an independent accountant?		X
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:			
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2 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?		X
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.			
3 a	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?		X
3 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 on Schedule O and describe any steps taken to undergo such audits		

**SCHEDULE D
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2020

Open to Public Inspection

Employer identification number

Silverdale Chamber of Commerce

91-0911216

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
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		

5 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

6 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 7.

- 1 Purpose(s) of conservation easements held by the organization (check all that apply).
- Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area
- Protection of natural habitat Preservation of a certified historic structure
- Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2 a
b Total acreage restricted by conservation easements	2 b
c Number of conservation easements on a certified historic structure included in (a)	2 c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2 d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 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 No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 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)? Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 8.

1 a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1. ▶ \$ _____

(ii) Assets included in Form 990, Part X. ▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1. ▶ \$ _____

b Assets included in Form 990, Part X. ▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange program
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1 a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If 'Yes,' explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance.....	1 c
d Additions during the year.....	1 d
e Distributions during the year.....	1 e
f Ending balance.....	1 f

2 a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If 'Yes,' explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1 a Beginning of year balance.....					
b Contributions.....					
c Net investment earnings, gains, and losses.....					
d Grants or scholarships.....					
e Other expenditures for facilities and programs.....					
f Administrative expenses.....					
g End of year balance.....					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment ▶ _____ %
- b Permanent endowment ▶ _____ %
- c Term endowment ▶ _____ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3 a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) Unrelated organizations.....	3a(i)	
(ii) Related organizations.....	3a(ii)	
b If 'Yes' on line 3a(ii), are the related organizations listed as required on Schedule R?.....	3b	

Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land.....				
b Buildings.....				
c Leasehold improvements.....				
d Equipment.....				
e Other.....		34,070.	34,070.	0.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.).....				0.

Part VII Investments – Other Securities.

N/A

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) -----		
(B) -----		
(C) -----		
(D) -----		
(E) -----		
(F) -----		
(G) -----		
(H) -----		
(I) -----		
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)		

Part VIII Investments – Program Related.

N/A

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.)		

Part IX Other Assets.

N/A

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, column (B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

N/A

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements.....		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	a Net unrealized gains (losses) on investments.....	2 a		
	b Donated services and use of facilities.....	2 b		
	c Recoveries of prior year grants.....	2 c		
	d Other (Describe in Part XIII.).....	2 d		
	e Add lines 2a through 2d.....		2 e	
3	Subtract line 2e from line 1.....		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b.....	4 a		
	b Other (Describe in Part XIII.).....	4 b		
	c Add lines 4a and 4b.....		4 c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).....		5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

N/A

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements.....		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	a Donated services and use of facilities.....	2 a		
	b Prior year adjustments.....	2 b		
	c Other losses.....	2 c		
	d Other (Describe in Part XIII.).....	2 d		
	e Add lines 2a through 2d.....		2 e	
3	Subtract line 2e from line 1.....		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b.....	4 a		
	b Other (Describe in Part XIII.).....	4 b		
	c Add lines 4a and 4b.....		4 c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).....		5	

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization

Silverdale Chamber of Commerce

Employer identification number

91-0911216

Part I Fundraising Activities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations
- b Internet and email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

b If 'Yes,' list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in column (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						0.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
		<u>Special Events</u> (event type)	_____ (event type)	<u>None</u> (total number)	(add column (a) through column (c))	
Revenue	1	Gross receipts.....	53,172.		53,172.	
	2	Less: Contributions.....				
	3	Gross income (line 1 minus line 2).....	53,172.		53,172.	
Direct Expenses	4	Cash prizes.....				
	5	Noncash prizes.....				
	6	Rent/facility costs.....				
	7	Food and beverages.....				
	8	Entertainment.....				
	9	Other direct expenses.....	31,569.		31,569.	
	10	Direct expense summary. Add lines 4 through 9 in column (d)..... ▶				31,569.
	11	Net income summary. Subtract line 10 from line 3, column (d)..... ▶				21,603.

Part III Gaming. Complete if the organization answered 'Yes' on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming	
		_____	_____	_____	(add column (a) through column (c))	
Revenue	1	Gross revenue.....				
Direct Expenses	2	Cash prizes.....				
	3	Noncash prizes.....				
	4	Rent/facility costs.....				
	5	Other direct expenses.....				
	6	Volunteer labor.....	Yes _____ % No	Yes _____ % No	Yes _____ % No	
	7	Direct expense summary. Add lines 2 through 5 in column (d)..... ▶				
	8	Net gaming income summary. Subtract line 7 from line 1, column (d)..... ▶				

9 Enter the state(s) in which the organization conducts gaming activities: _____
 a Is the organization licensed to conduct gaming activities in each of these states? Yes No
 b If 'No,' explain: _____

10 a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No
 b If 'Yes,' explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 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? Yes No

13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13 a	%
b An outside facility	13 b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b 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 ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2020

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

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

Name of the organization

Silverdale Chamber of Commerce

Employer identification number

91-0911216

Form 990, Part VI, Line 11b - Form 990 Review Process

No review was or will be conducted.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

No other documents available to the public.

Client 20E1002

Silverdale Chamber of Commerce

91-0911216

4/26/21

4:59 PM

	2020	2019	Diff
REVENUE			
Contributions and grants.....	201,720	141,587	60,133
Investment income.....	6	13	-7
Other revenue.....	30,313	93,175	-62,862
Total revenue.....	232,039	234,775	-2,736
EXPENSES			
Salaries, other compen., emp. benefits...	148,996	150,957	-1,961
Professional fundraising expenses.....	0	3,326	-3,326
Other expenses.....	79,550	91,442	-11,892
Total expenses.....	228,546	245,725	-17,179
NET ASSETS OR FUND BALANCES			
Revenue less expenses.....	3,493	-10,950	14,443
Total assets at end of year.....	93,406	101,588	-8,182
Total liabilities at end of year.....	3,167	14,842	-11,675
Net assets/fund balances at end of year.	90,239	86,746	3,493

2020

Federal Unrelated Business Income Tax Summary

Page 1

Client 20E1002

Silverdale Chamber of Commerce

91-0911216

4/26/21

4:59 PM

	2020	2019	Diff
REVENUE			
Net advertising income.....	285	970	-685
Total revenue.....	285	970	-685
DEDUCTIONS			
Total deductions.....	0	0	0
Unrelated business taxable income before	285	970	-685
Unrelated business taxable income.....	285	970	-685
TOTAL UNRELATED BUSINESS TAXABLE INCOME			
Total unrelated business taxable income.	285	970	-685
Unrelated business taxable income before	285	970	-685
Unrelated business taxable income before	285	970	-685
Specific deduction.....	1,000	1,000	0
Unrelated business taxable income.....	0	0	0
TAX COMPUTATION			
Income tax.....	0	0	0
TAX AND PAYMENTS			
Total tax.....	0	0	0
Total payments and credits.....	0	0	0
REFUND OR AMOUNT DUE			
Tax due.....	0	0	0
Overpayment.....	0	0	0



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
08/13/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER David Lee, State Farm 10868 NW Myhre Place Ste 101 Silverdale, WA 98383	CONTACT NAME: Sheila Jones PHONE (A/C, No, Ext): 360-613-5550 E-MAIL ADDRESS: sheila@davidleeinsurance.com		FAX (A/C, No): 360-613-5551
	INSURER(S) AFFORDING COVERAGE		
INSURED SILVERDALE CHAMBER OF COMMERCE P.O. BOX 1218 SILVERDALE WA 98383-1218	INSURER A : State Farm Mutual Automobile Insurance Company		NAIC # 25178
	INSURER B : State Farm Fire and Casualty Company		25143
	INSURER C :		
	INSURER D :		
	INSURER E :		
	INSURER F :		

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
B	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			98-C7-Q951-2	08/18/2021	08/18/2022	EACH OCCURRENCE	\$ 1,000,000
								DAMAGE TO RENTED PREMISES (Ea occurrence)
							MED EXP (Any one person)	\$ 5,000
							PERSONAL & ADV INJURY	\$ 2,000,000
							GENERAL AGGREGATE	\$ 2,000,000
							PRODUCTS - COMP/OP AGG	\$ 2,000,000
								\$
AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY							COMBINED SINGLE LIMIT (Ea accident)	\$
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$							EACH OCCURRENCE	\$
							AGGREGATE	\$
								\$
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below			N/A				PER STATUTE	OTH-ER
							E.L. EACH ACCIDENT	\$
							E.L. DISEASE - EA EMPLOYEE	\$
							E.L. DISEASE - POLICY LIMIT	\$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER [Empty space]	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE

**2022 Lodging Tax Draft Budget
Silverdale Visitor Center**

\$ 54,485.00	Visitor Center Operations		
	Salary/Wages	\$ 36,500.00	
	Tourism Coordinator (30 hours per week)		\$ 23,500.00
	Chamber Staff Support of Center		\$ 7,500.00
	Social Media Coordinator		\$ 2,000.00
	Graphic Designer		\$ 3,500.00
	Center Operations/Maintenance	\$ 17,985.00	
	Rent/Utilities		\$ 4,800.00
	Telephone Service		\$ 600.00
	Equipment Lease		\$ 600.00
	Office Supplies		\$ 420.00
	Postage		\$ 240.00
	Promotion Items		\$ 2,500.00
	Kitsap Mall Visitor Kiosk		\$ 8,400.00
	Washington Festivals & Events Association		\$ 250.00
	Washington Association of Visitor information Centers		\$ 175.00
\$ 15,000.00	Silverdale Visitor's Guide		
	Silverdale Visitor Guide		\$ 11,500.00
	Digital Map of Silverdale		\$ 3,500.00
\$ 6,500.00	Stay, Shop, and Play Local Campaign		
	Printing		\$ 1,750.00
	Promotion items		\$ 1,500.00
	Creative Design		\$ 750.00
	Hotel Concierge Program		\$ 2,500.00
\$ 4,000.00	Silverdale Tourism Website Development		
	Web site Development		\$ 3,500.00
	Web site Maintenance		\$ 500.00

\$ 19,000.00	Silverdale Community Event Support and Promotions		
	Silverdale Christmas Tree Lighting Festival		\$ 5,000.00
	Silverdale GreenDrinks		\$ 1,000.00
	Kitsap County Fair		\$ 3,000.00
	Healthy Kids Day		\$ 1,000.00
	Kitsap Pride		\$ 2,500.00
	NW Food Truck Fest		\$ 1,500.00
	Whaling Days		\$ 5,000.00
\$ 44,000.00	Summers at the Waterfront - Wednesday Night Concert Series		
	Park Department Rent		\$ 1,000.00
	Stage/Sound/Lighting/Tent		\$ 28,000.00
	Entertainment		\$ 12,500.00
	Advertising/Promotions		\$ 2,500.00
\$ 11,750.00	Regional Advertising for Silverdale		
	Washington State Visitors' Guide (Peninsulas)		\$ 2,500.00
	Visit Seattle		\$ 1,750.00
	Sound Publishing		\$ 5,000.00
	Discover Kitsap Peninsula and Beyond		\$ 1,500.00
	Show the Love - Stay, Shop & Dine Local		\$ 1,000.00
\$ 154,735.00	Total 2022 Funding Request		

Address any reply to: Sixth and Leona Bldg., Seattle, Wash. 98121
Department of the Treasury
J. Murphy (206) 442-4768

District Director
Internal Revenue Service

Date: AUG 28 1974
In reply refer to: L-179, Code 428
SEA:BO: 74-1413



Central Kitsap Chamber of Commerce
P.O. Box 1218
Silverdale, Washington 98383

Internal Revenue Code: Section 501(c) (6)
Form 990 Required: Yes No
Accounting Period Ending: December 31

Dear Applicant:

Based on information supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from Federal income tax under the provisions of the Internal Revenue Code section indicated above.

Unless specifically excepted, you are liable for taxes under the Federal Insurance Contributions Act (social security taxes) on remuneration of \$50 or more to each of your employees during a calendar quarter. And, unless excepted, you are also liable for tax under the Federal Unemployment Tax Act on remuneration of \$50 or more to each of your employees during a calendar quarter if, during the current or preceding calendar year, you have one or more employees at any time in each of 20 calendar weeks or pay wages of \$1,500 or more in any calendar quarter. If you have any questions about excise, employment, or other Federal taxes, please address them to this office.

If your purposes, character, or method of operation is changed, you must let us know so we can consider the effect of the change on your exempt-status. Also, you must inform us of all changes in your name or address.

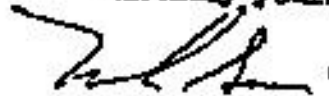
The block checked at the top of this letter shows whether you must file Form 990, Return of Organization Exempt From Income Tax. If the Yes box is checked, you are only required to file Form 990 if your gross receipts each year are normally more than \$5,000. If a return is required, it must be filed by the 15th day of the fifth month after the end of your annual accounting period. The law imposes a penalty of \$10 a day, up to a maximum of \$5,000, for failure to file the return on time.

You are not required to file Federal income tax returns unless you are subject to the tax on unrelated business income under section 511 of the Code. If you are subject to this tax, you must file an income tax return on Form 990-T. In this letter we are not determining whether any of your present or proposed activities are unrelated trade or business as defined in section 513 of the Code.

You need an employer identification number even if you have no employees. If an employer identification number was not entered on your application, a number will be assigned to you and you will be advised of it. Please use that number on all returns you file and in all correspondence with the Internal Revenue Service.

Please keep this determination letter in your permanent records.

Sincerely yours,



Michael Hassel
District Director



STATE of WASHINGTON SECRETARY of STATE

I, **Ralph Munro**, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF AMENDMENT

to

CENTRAL KITSAP CHAMBER OF COMMERCE

a Washington Non Profit corporation. Articles of Amendment were
filed for record in this office on the date indicated below.

Changing name to **SILVERDALE CHAMBER OF COMMERCE**

Corporation Number **2-231315-9**

Date: **April 7, 1989**

Given under my hand and the seal of the State
of Washington, at Olympia, the State Capitol.

Ralph Munro, Secretary of State

FILED

ARTICLES OF AMENDMENT

APR 07 1989

WASHINGTON NONPROFIT CORPORATION ACT - 24.03

SECRETARY OF STATE
STATE OF WASHINGTON

Pursuant to the provisions of RCW 24.03 of the Washington Nonprofit Corporation Act, the undersigned adopts the following Articles of Amendment to the Articles of Incorporation:

(1) The name of record of the corporation is: _____
CENTRAL KITSAP CHAMBER OF COMMERCE

(2) The following amendment(s) to the articles of incorporation was(were) adopted on: Oct. 27, 1988, 1988 ;

Change all references in the Articles of Incorporation from Central Kitsap Chamber of Commerce to Silverdale Chamber of Commerce.

(3) Check and complete one of the following applicable statements:

(X) Oct. 27, 1988 was the date of the meeting of members at which the amendment was adopted. A quorum was present at the meeting and the amendment received at least two-thirds of the votes which members present or represented by proxy were entitled to cast.

() The amendment was adopted by a consent in writing by all members entitled to vote thereto.

() There are no members, or no members having voting rights. The amendment received a majority vote directors in office at a meeting of the board held on _____.

3/16/89

(Date)

Hayden P. ... PRESIDENT
(Signature and title of officer)

FILING FEE \$10.00

FILE IN DUPLICATE



STATE of WASHINGTON SECRETARY of STATE

I, **Ralph Munro**, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF AMENDMENT

to

CENTRAL KITSAP CHAMBER OF COMMERCE

a Washington Non Profit corporation Articles of Amendment were filed for record in this office on the date indicated below.

Changing name to **SILVERDALE CHAMBER OF COMMERCE**

Corporation Number: 2-231315-9

Date: April 7, 1989

Given under my hand and the seal of the State of Washington, at Olympia, the State Capitol.

Ralph Munro, Secretary of State

(3) Check and complete one of the following applicable statements:

(X) Oct. 27, 1988 was the date of the meeting of members at which the amendment was adopted. A quorum was present at the meeting and the amendment received at least two-thirds of the votes which members present or represented by proxy were entitled to cast.

() The amendment was adopted by a consent in writing by all members entitled to vote thereto.

() There are no members, or no members having voting rights. The amendment received a majority vote directors in office at a meeting of the board held on _____.

3/16/89

(Date)

Stephen Parker President
(Signature and title of officer)

FILING FEE \$10.00

FILE IN DUPLICATE

FILED

APR 07 1989

ARTICLES OF AMENDMENT

WASHINGTON NONPROFIT CORPORATION ACT - 24.03

SECRETARY OF STATE
STATE OF WASHINGTON

Pursuant to the provisions of RCW 24.03 of the Washington Nonprofit Corporation Act, the undersigned adopts the following Articles of Amendment to the Articles of Incorporation:

(1) The name of record of the corporation is: _____

CENTRAL KITSAP CHAMBER OF COMMERCE

(2) The following amendment(s) to the articles of incorporation was(were) adopted on: Oct. 27, 1988, 1988:

Change all references in the Articles of Incorporation from Central Kitsap Chamber of Commerce to Silverdale Chamber of Commerce.