EXTENDED TO JANUARY 17, 2023

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ 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.

Open to Public Inspection

A F	or the	2021 calendar year, or tax year beginning M	AR 1, 2021 and	ending I	<u>EB 28, 2022</u>	2		
	heck if pplicable	C Name of organization			D Employer identi	fication number		
	Addres		F COMMERCE					
	Name change				63-0384	727		
	Initial return	Number and street (or P.O. box if mail is not de	livered to street address)	Room/suite				
	Final return/	P.O. BOX 1104	•		256-734-	-0454		
	termin- ated	City or town, state or province, country, and	ZIP or foreign postal code		G Gross receipts \$	864,140.		
	Amend return	CULLMAN, AL 35056			H(a) Is this a group	return		
	Application	F Name and address of principal officer. NEX	TH VARDEN		for subordinate	es? Yes X No		
	pendin	SAME AS C ABOVE			H(b) Are all subordinates	included? Yes No		
1.7	ax-exe	mpt status: 501(c)(3) X 501(c) (6)		or 527		a list. See instructions		
J١	Vebsit	e: > WWW.CULLMANCHAMBER.ORG			H(c) Group exempt	ion number 🕨		
KF	orm of	organization: X Corporation Trust A	ssociation Other ►	L Year		M State of legal domicile; AL		
		Summary		·		<u> </u>		
	1	Briefly describe the organization's mission or most	significant activities: BUSI	NESS I	EAGUE			
Governance								
'n	2	Check this box if the organization disco	ntinued its operations or dispos	sed of more	than 25% of its net a	ssets.		
ĕ	3	Number of voting members of the governing body	3	19				
	4	Number of independent voting members of the go				18		
ري وي		Fotal number of individuals employed in calendar y				7		
ıitie.		Total number of volunteers (estimate if necessary)				45		
Activities &		Fotal unrelated business revenue from Part VIII, co				4,059.		
⋖		Net unrelated business taxable income from Form				87.		
					Prior Year	Current Year		
4	8	Contributions and grants (Part VIII, line 1h)			906,823	662,677.		
Revenue					70,709			
eve		nvestment income (Part VIII, column (A), lines 3, 4			21,577			
æ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c			3,840			
		Fotal revenue - add lines 8 through 11 (must equal			1,002,949			
		Grants and similar amounts paid (Part IX, column (0 .	-		
		Benefits paid to or for members (Part IX, column (A			0 .	0.		
w	45	Salaries, other compensation, employee benefits (I			118,934	153,002.		
Expenses	16a	Professional fundraising fees (Part IX, column (A), I			0 .	0.		
per	b ·	Fotal fundraising expenses (Part IX, column (D), lin		0.				
Ě	17	Other expenses (Part IX, column (A), lines 11a-11d	· · · · · · · · · · · · · · · · · · ·		685,097	721,472.		
		Fotal expenses. Add lines 13-17 (must equal Part I			804,031			
	19	Revenue less expenses. Subtract line 18 from line			198,918	-10,334.		
Net Assets or				В	eginning of Current Year			
sets	20	Total assets (Part X, line 16)			1,148,697	1,221,302.		
ASS	21	Total liabilities (Part X, line 26)			202,716	285,655.		
Net	22	Net assets or fund balances. Subtract line 21 from	line 20		945,981	935,647.		
Pa	art II	Signature Block						
Und	er pena	ties of perjury, I declare that I have examined this return,	including accompanying schedule	s and statem	ents, and to the best of n	ny knowledge and belief, it is		
true	correc	, and complete. Declaration of preparer (other than office	er) is based on all information of w	hich preparei	has any knowledge.			
Sig	n	Signature of officer			Date			
Her	е	KEITH VARDEN, INTERIM PRESIDENT						
		Type or print name and title						
		Print/Type preparer's name	Preparer's signature		Date Check	PTIN		
Paid		MARK A. HESTLA		(01/13/23 self-emp			
-	arer	Firm's name WARREN AVERETT,	LLC		Firm's EIN ▶	45-4084437		
Use	Only	Firm's address PO BOX 1245						
		CULLMAN, AL 3505	6-1245		Phone no. 2	56-739-0312		
Mav	the IF	S discuss this return with the preparer shown abo	ve? See instructions			X Yes No		

	Chack if Schodula O contains	a response or note to any line in	this Dort III		
1	Briefly describe the organization's m		uiis Fait III		
•	THIS CORPORATION I		OMOTE THE ACET	CIII.TIIDAT. CTV	TC
	COMMERCIAL, AND IN				
	COUNTY.	DOSIKIAH WEHRAKE	OF THE CITE OF	COLLINAN AND	COULINAIN
	COUNTY.				
_					
2	Did the organization undertake any				
					Yes X No
	If "Yes," describe these new service	s on Schedule O.			
3	Did the organization cease conducti	ng, or make significant changes i	n how it conducts, any progi	ram services?	Yes X No
	If "Yes," describe these changes on	Schedule O.			
4	Describe the organization's program	service accomplishments for eac	ch of its three largest prograi	m services, as measured b	y expenses.
	Section 501(c)(3) and 501(c)(4) organ				
	revenue, if any, for each program se		3	,	1
4a	(Code:) (Expenses \$		ats of \$) (Payanua \$	91,682.)
ти	PROMOTING TOURISM) (Nevenue \$	<u> </u>
	IROMOTING TOOKISM	IN COLDIMAN COONT	•		
	-				
	-				
		106.050			105 106
4b		126,853. including gran) (Revenue \$	105,436.
	PROMOTING ECONOMIC	DEVELOPMENT IN C	CULLMAN COUNTY		
4c	(Code:) (Expenses \$	including gran	ate of \$) (Revenue \$	1
	(σοσε) (Εχρείισες ψ) (Nevenue	/
4d	Other program services (Describe or	า Schedule O.)			
	(Expenses \$	including grants of \$) (Revenue S	\$)
4e	Total program service expenses	341,685.			

Form 990 (2021) CULLMAN AREA CHAMBER OF COMMERCE 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	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5	Х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
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		х
0	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>			21
8	, ,			Х
•	Schedule D, Part III	8		- 22
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?			v
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			37
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
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	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes." complete			
	Schedule D, Parts XI and XII	12a		Х
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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	1 70		
D	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		х
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	טדיו		
13		15		х
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	13		- 23
10		46		Х
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Λ
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
46	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			3.7
	1c and 8a? If "Yes," complete Schedule G, Part II	18		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	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21		X

Form 990 (2021) CULLMAN AREA CHAMBER OF COMMERCE
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? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			37
	Schedule J	23		X
24a				
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			Х
	Schedule K. If "No," go to line 25a	24a		Λ
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24c		
٨	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	2 4 u		
ZJa	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	254		
-	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5 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? If "Yes," complete Schedule L, Part II	26		Х
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? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			37
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	0.4	х	
25.0	Part V, line 1	34	Λ	Х
	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35a		-22
b		35b		
36	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	330		
55	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
٠.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			_
	Note: All Form 990 filers are required to complete Schedule O	38	х	
Par		,		
	Check if Schedule O contains a response or note to any line in this Part V			X
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	5		
b)		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		

Page 5 Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V Yes No 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 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Х Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions. Х 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За Х b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Х financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **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). Х **5a** Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? Х 5b If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? Х b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b 7 Organizations that may receive deductible contributions under section 170(c). 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 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? 7с d If "Yes," indicate the number of Forms 8282 filed during the year 7d Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 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 If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 9 Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? 9a Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: 11 Gross income from members or shareholders 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 b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 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? 13a Note: See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b Enter the amount of reserves on hand Х Did the organization receive any payments for indoor tanning services during the tax year? 14a **b** If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or Х excess parachute payment(s) during the year? 15 If "Yes," see the instructions and file Form 4720, Schedule N. X Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?

17

If "Yes," complete Form 6069.

Page 6 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.

	to mile da, da, di Pod zalem, decembe une amedinatanece, procedere, di changes di centradice.							
<u> </u>	Check if Schedule O contains a response or note to any line in this Part VI			X				
Sec	tion A. Governing Body and Management							
			Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year 1a19							
	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.							
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?	2		Х				
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?	3		X				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X				
5	5 Did the organization become aware during the year of a significant diversion of the organization's assets?							
6	Did the organization have members or stockholders?	6		X				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or							
	more members of the governing body?	7a		Х				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or							
	persons other than the governing body?	7b		X				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:							
а	The governing body?	8a	Х					
b	Each committee with authority to act on behalf of the governing body?	8b	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	9		X				
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)							
			Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?	10a		X				
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,							
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X					
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х					
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe							
	on Schedule O how this was done	12c	Х					
13	Did the organization have a written whistleblower policy?	13		Х				
14	Did the organization have a written document retention and destruction policy?	14		Х				
15	Did the process for determining compensation of the following persons include a review and approval by independent							
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?							
а	The organization's CEO, Executive Director, or top management official	15a		Х				
	Other officers or key employees of the organization	15b		Х				
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.							
16a	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		Х				
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	100						
	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	tion C. Disclosure	100						
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)	availak	ماد				
10	for public inspection. Indicate how you made these available. Check all that apply.	orny)	avalidi)IC				
40	Own website Another's website X Upon request Other (explain on Schedule O)	l file -	sia!					
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	ıınano	ıal					
00	statements available to the public during the tax year.							
20	State the name, address, and telephone number of the person who possesses the organization's books and records EITH VARDEN - 256-734-0454							
	211 2ND AVENUE NE, CULLMAN, AL 35055							

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 the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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 the instructions for the order in which to list the persons above.

(A) Name and title	(B) Average		not c	Pos heck	more	than o		(D) Reportable	(E) Reportable	(F) Estimated amount of
	hours per week (list any hours for	offi				is both or/trus	tee)	compensation from the organization	compensation from related organizations (W-2/1099-MISC/	other compensation from the
	related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related organizations
(1) KEITH VARDEN	40.00									
INTERIM PRESIDENT & CEO		X		X				36,798.	0.	0.
(2) BEN HARRISON	3.00									
CHAIR-ELECT		Х						0.	0.	0.
(3) JOSH WIGGINS	3.00									_
VICE CHAIR		Х						0.	0.	0.
(4) JEFF TOLBERT	3.00									_
PAST CHAIR		Х						0.	0.	0.
(5) STEPHEN PARKER	3.00								•	•
CURRENT CHAIR	2 00	Х						0.	0.	0.
(6) SUZANNE HARBIN	3.00	.,							0	0
VICE CHAIR	2.00	Х						0.	0.	0.
(7) MEL KOLLER	3.00	7.7						0	0	0
VICE CHAIR (8) BRAD WILSON	3.00	X						0.	0.	0.
BD. OF DIR.	3.00	X						0.	0.	0
(9) JEREMY WOOTTEN	3.00	^						0.	0.	0.
BD. OF DIR.	3.00	X						0.	0.	0.
(10) RYNE ASHLEY	3.00	^						0.	0.	0.
BD. OF DIR.	3.00	X						0.	0.	0.
(11) WENDY CRIDER	3.00								·	•
BD. OF DIR.	3,00	x						0.	0.	0.
(12) TANYA ARNOLD	3.00									
BD. OF DIR.		X						0.	0.	0.
(13) MEGAN NEIGHBORS	3.00							_	-	
BD. OF DIR.		Х						0.	0.	0.
(14) LINDSEY DOSSEY	3.00								-	
BD. OF DIR.		Х						0.	0.	0.
(15) ADAM HARRISON	3.00									
BD. OF DIR.		Х						0.	0.	0.
(16) STEPHEN GANNON	3.00									
BD. OF DIR.		Х						0.	0.	0.
(17) JACOB WALDROP	3.00									
VICE CHAIR		X						0.	0.	0.

Form **990** (2021)

Name and title Average Position Reportable Report			(E) Reportable compensation									
	week (list any hours for related organizations below line)	tee or director				Highest compensated highest compensated employee	tee)	from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	Co	othe ompen from organiz and rel	er sation the ation lated
(18) PHILLIP CLEMMONS	3.00											
VICE CHAIR	2 22	X						0.	0	•		0.
(19) KYLE WILLOUGHBY	3.00	37							0			0
VICE CHAIR (20) CHARLIE NESMITH	3.00	Х						0.	0	•		0.
BD. OF DIR.	3.00	X						0.	0.			
1b Subtotal	1		1				▶	36,798.	0	•		0.
c Total from continuation sheets to Part VI							•	0.	0			0.
d Total (add lines 1b and 1c)								36,798.	0	•		0.
2 Total number of individuals (including but n	ot limited to th	ose	liste	d ab	oove	e) wh	o re	eceived more than \$100,	000 of reportable			^
compensation from the organization											Ye	0 s No
3 Did the organization list any former officer,	director trust	ee k	ev e	mnl	love	ലെ	hia	ihest compensated empl	ovee on		16	5 140
line 1a? If "Yes," complete Schedule J for s										3		Х
4 For any individual listed on line 1a, is the su												
and related organizations greater than \$150),000? If "Yes,	" co	mple	ete S	Sche	edule	J f	or such individual		. 4	+	X
5 Did any person listed on line 1a receive or a												
rendered to the organization? If "Yes," com	plete Schedule	e J fo	or st	ıch <u>i</u>	oers	on				. 5)	X
Section B. Independent Contractors 1 Complete this table for your five highest co	•	•								sation	from	
the organization. Report compensation for	the calendar ye	ear e	endir	ng w	ith (or w	thin		ear.		(C)	
(A) Name and business	address	NC	ONE	S				(B) Description of s	ervices	Com	pensat	tion
2 Total number of independent contractors (ii \$100,000 of compensation from the organization from the organization)	•	ot lin	nited	d to		se lis)	ted	above) who received mo	ore than			
ψτου,σου οι compensation from the organia	Lativii									For	m 99 0	(2021)

63-0384727

		Check if Schodulo O contains a response of	or note to any line	o in this Dart VIII			
-		Check if Schedule O contains a response of	or note to any line	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded
					function revenue	business revenue	from tax under
							sections 512 - 514
ts st	1 a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b	152,210.				
9, E	С	Fundraising events1c					
if s	d	Related organizations 1d					
nis G	_		431,584.				
Sin		All other contributions, gifts, grants, and					
ξ ₽	'		78,883.				
들됨		similar amounts not included above 1f	70,003.				
ξğ	g	Noncash contributions included in lines 1a-1f		660 688			
<u>ठ</u> ह	h	Total. Add lines 1a-1f		662,677.			
			Business Code				
g	2 a	ECONOMIC DEVELOPEMENT	561499	105,436.	105,436.		
Š	b	TOURISM	561499	91,682.	91,682.		
Program Service Revenue	С			·	•		
E S	d						
gra Re	u						
Š	e						
-	•	All other program service revenue		107 110			
	g	Total. Add lines 2a-2f		197,118.			
	3	Investment income (including dividends, interest					
		other similar amounts)	🕨	286.			286.
	4	Income from investment of tax-exempt bond pr					
	5	Royalties					
		(i) Real	(ii) Personal				
	6 a	Gross rents 6a	.,				
		Less: rental expenses 6b					
		Rental income or (loss) 6c					
		d Net rental income or (loss)					
	7 a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a					
	b	Less: cost or other basis					
ē		and sales expenses 7b					
Revenue	С	Gain or (loss) 7c					
ě		Net gain or (loss)	•				
erF		Gross income from fundraising events (not					
Othe	o a	,					
0		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 18					
	b	Less: direct expenses 8b					
	С	Net income or (loss) from fundraising events					
	9 a	Gross income from gaming activities. See					
		Part IV, line 199a					
	b	Less: direct expenses 9b					
		Net income or (loss) from gaming activities	—				
		Gross sales of inventory, less returns					
	10 a	-					
	-	and allowances 10a					
		Less: cost of goods sold 10b					
	С	Net income or (loss) from sales of inventory					
_o			Business Code				
Ď a	11 a	ADVERTISING	541800	4,059.		4,059.	
E E	b						
Miscellaneous Revenue	С						
<u>8</u>	d	All other revenue					
Σ	<u>۔</u> م	Total. Add lines 11a-11d	>	4,059.			
	12	Total revenue. See instructions		864,140.	197,118.	4,059.	286.

63-0384727

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).

Do not include amounts reported on lines 60, 78, 89, 89, and 70 of Part VIII and expenses Total expenses Programs service when the company of the service		Check if Schedule O contains a respon			
and domestic poverments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above to disqualified person (see diriefled under section 14980(1)) and persons described in section 4580(3)(8) Persion plan accruals and contributions (include section 401(k) and 403(b) employer contributions Persion plan accruals and contributions (include section 401(k) and 403(b) employer contributions Persion plan accruals and contributions (include section 401(k) and 403(b) employer contributions Persion plan accruals and contributions (include section 401(k) and 403(b) employer contributions Persion plan accruals and contributions (include section 401(k) and 403(b) employer contributions Persion plan accruals and contributions (include section 401(k) and 403(b) employer contributions Persion plan accruals and contributions (include section 401(k) and 403(b) employer contributions Persion plan accruals and co		•	(A) Total expenses	(C) Management and general expenses	
2 Grants and other assistance to domestic inclivious. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign inclivious. See Part IV, line 15 and 16	1	Grants and other assistance to domestic organizations			
individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid do not not members Compensation of current officers, directors, trustess, and key employees 15 Compensation or included above to disqualitied persons (as defined under section 14988(r)(3)(8) Person plan accruisal and combibitions (include section 4018(2) and 403(3) employer contributions) Person plan accruisal and combibitions (include section 4018(2) and 403(3) employer contributions) Other employee benefits 29 Other employee benefits 29 The paryorit taxes 11, 843. 129 Paryorit taxes 11, 843. 139 Paryorit taxes 14, 843. 140 Paryorit taxes 15, 8950. Accounting 73, 950. Accounting 73, 950. Accounting 73, 950. Advertising and promotion 74, 20. Advertising and promotion 74, 420. Office expenses 10, 40, anount, list line 11g expenses on Sch 0.) 99, 470. Advertising and promotion 74, 20. Office expenses 10, 194. Office expenses 11, 194. Office expenses 10, 194. Office expenses 10, 194. Office expenses 11, 194. Office expenses on line 24e. Outpercollege. 10, 194. 10, 194. 10, 194. 11, 194. 11, 194. 11, 194. 12, 194. 12, 194. 13, 194. 14, 195. 15, 1915. 14, 1915. 15, 1915. 16, 1915. 17, 653. 187, 653. 187, 653. 187, 653. 187, 653. 187, 653. 187, 653. 187, 653. 187, 653. 187, 653. 187, 653. 187, 653. 187, 653. 187, 653. 187, 653. 187, 653. 190, 1915. 11, 191		and domestic governments. See Part IV, line 21			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 4 Barent's paid to or for members 5 Compensation of current officers, directors, trustess, and key employees 6 Compensation for included advoce to disqualified persons (as defined under section 498/ft/l) and persons described in sectio	2	Grants and other assistance to domestic			
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 6 Compensation not included above to disqualified persons is defined under section 4958(I(s)(3)(8) 7 Other salaries and wrages 8 Pension plan accruals and combinutors (include section 401(4) and 48(6)(4) employer contributions) 9 Other employee benefits 10 Payroll taxes 11,843. 129. 129. 130. 140. 150. 150. 160. 170.		individuals. See Part IV, line 22			
individuals. See Part IV, lines 15 and 16 8 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation in inclinded above to disqualified persons (sastingful and several officers), directors, strustees, and key employees Compensation in inclinded above to disqualified persons (sastingful and several officers), and contributions (include section 40) (liquid 40)(b) implicy contributions) Cother employee benefits Characteristic and communications Characte	3	Grants and other assistance to foreign			
4 Benefits paid to or for members 5 Compensation of current offices, directors, trustees, and key employees 6 Compensation of included above to disqualified persons (as defined under section 4956(f)(1)) and persons described in section 4956(f)(1) and persons described in section 495(f)(1) and persons described in section 495(f)(1) and 493(f) employer committees and persons described in section 495(f)(1) and 493(f) employer committees and persons described in section 495(f)(1) and 493(f) employer committees and persons described in section 495(f)(1) and 493(f) employer committees and persons described in section 495(f)(1) and 493(f) employer committees and persons described in section 495(f)(1) and 493(f) employer committees and persons described in section 495(f)(1) and 493(f) employer described in section 495(f) and 493(f) employer described in section 495(f) employer described in s		organizations, foreign governments, and foreign			
5 Compensation of current officers, directors, trustees, and key employees					
trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4586((1)) and persons described in section 4586((3))(8) 7 Other salaries and wages section 401(s) and 403(s) employer contributions (include section 401(s) employees: a Management b Legal C Accounting 7 7, 950. d Lobbying Professional fundraising services. See Part IV, line 17 investment management fees Other, (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0), 99, 470. 20 Advertising and promotion 7 7, 420. 30 Office expenses 13, 194. 11 Information technology 6 6, 612. 13 Office expenses 13, 194. 14 Information technology 6 6, 612. 15 Royalties 16 Occupancy 8 6. 17 Travel 8 6. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 10 Conferences, conventions, and meetings 11 Travel 12 Payments to affiliates 13 Insurance 14 Other expenses. Itemite expenses and covered above, (List inscellamenus expenses on line 24e, Itimized amount, just line 24e expenses on Schedule 0, and COMMITTEE AND PROGRAM E 17 Travel 28 John DEBT EXPENSES 14 4, 417. 10 , 962. 29 Add tother expenses 30 Interest 31 (10, 962. 41 Author expenses. Add lines 1 through 24e 36 Joint costs, Complete his line only if the organization reported in colum (8) joint costs from a combined educational careging and fundraising solicitation.	4	Benefits paid to or for members			
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9	8				
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Form 990 (2021)
Part X Balance Sheet

Par	t X	Balance Sheet					
		Check if Schedule O contains a response or no	te to any	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			341,000.	1	433,778.
	2	Savings and temporary cash investments			74,853.	2	75,076.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			6,926.	4	27,909.
	5	Loans and other receivables from any current of					
		trustee, key employee, creator or founder, subs	tantial co	ontributor, or 35%			
		controlled entity or family member of any of the	se perso	ns		5	
	6	Loans and other receivables from other disqual	ified pers	ons (as defined			
		under section 4958(f)(1)), and persons describe		6			
ι	7	Notes and loans receivable, net			183.	7	3,102.
Assets	8	Inventories for sale or use				8	
As	9	B			10,830.	9	9,746.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	1,402,947.			
	b	Less: accumulated depreciation	10b	731,256.	714,905.	10c	671,691.
	11	Investments - publicly traded securities			11		
	12	Investments - other securities. See Part IV, line			12		
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equ			1,148,697.	16	1,221,302.
	17	Accounts payable and accrued expenses			12,930.	17	2,892.
	18	Grants payable		18			
	19	Deferred revenue			37,172.	19	21,888.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete	Part IV o	f Schedule D		21	
S	22	Loans and other payables to any current or form	ner office	er, director,			
Liabilities		trustee, key employee, creator or founder, subs	tantial co	ontributor, or 35%			
iabi		controlled entity or family member of any of the	se perso	ns		22	
_	23	Secured mortgages and notes payable to unrel			152,614.	23	260,875.
	24	Unsecured notes and loans payable to unrelate	d third pa	arties		24	
	25	Other liabilities (including federal income tax, pa	•				
		parties, and other liabilities not included on line	s 17-24).	Complete Part X			
		of Schedule D			000 516	25	005 655
	26			. 🕶	202,716.	26	285,655.
"		Organizations that follow FASB ASC 958, che	eck here	► X			
Č		and complete lines 27, 28, 32, and 33.			805 808		0.017 2.00
alan	27	Net assets without donor restrictions	795,797.	27	907,392.		
B	28	Net assets with donor restrictions	150,184.	28	28,255.		
Ĕ		Organizations that do not follow FASB ASC 9					
F		and complete lines 29 through 33.					
ts o	29	Capital stock or trust principal, or current funds				29	
SSe	30	Paid-in or capital surplus, or land, building, or e				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated in			0.45 0.01	31	025 645
8	32	Total net assets or fund balances			945,981.	32	935,647.
	33	Total liabilities and net assets/fund balances			1,148,697.	33	1,221,302.

Theck 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 Total expenses (must equal Part IX, column (A), line 25) 2 874,474. 3 Revenue less expenses. Subtract line 2 from line 1 3 -10,334. 4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4 945,981. 5 Net unrealized gains (losses) on investments 5 Donated services and use of facilities 6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 8 Prior period adjustments 8 Prior period adjustments 8 Other changes in net assets or fund balances (explain on Schedule O) 9 0. Net assets or fund balances at the of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 9 Other changes in net assets or fund balances (explain on Schedule O) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) The state of fund balances at the fund balances (explain on Schedule O) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) The state of fund balances at the fund balances (explain on Schedule O) 10 Net assets or fund balances at the fund balances (explain on Schedule O) 11 Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. 2a Were the organization is financial statements compiled or reviewed by an independent accountant? 2a X If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Consolidated basis, or both: Separate basis Consolidated basis Both consolidated basis Both consolidated basi	Pa	art XI Reconciliation of Net Assets							
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Column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 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: Separate basis X Consolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis or 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? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit	9		_			0.			
Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII X X X X X X X X X	10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,							
Check if Schedule O contains a response or note to any line in this Part XII Check if Schedule O contains a response or note to any line in this Part XII Check if Schedule O contains a response or note to any line in this Part XII Yes No Yes No Accounting method used to prepare the Form 990: Cash X Accrual Other growth of the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant? 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: Separate basis X Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis 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? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? 3a X b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit		column (B)) 10							
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Accounting method used to prepare the Form 990:		Check if Schedule O contains a response or note to any line in this Part XII				X			
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3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit									
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b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit	За	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?		За		X			
or audits, explain why on Schedule O and describe any steps taken to undergo such audits	b	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		. 3b					

Form **990** (2021)

SCHEDULE C (Form 990)

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

Open to Public

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

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

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

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

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

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

•	Section 501(c)(4), (5), or (6) organizat	tions: Complete Part III.								
Nan	me of organization Employer identification number									
		AREA CHAMBER OF			63-0384727					
Pa	art I-A Complete if the org	janization is exempt und	der section 501(c)	or is a section 527 or	ganization.					
2 3	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai art I-B Complete if the org	ures		>	\$					
		•		•						
1	Enter the amount of any excise tax	incurred by the organization un	der section 4955		Ď					
	Enter the amount of any excise tax									
	If the organization incurred a sectio									
	a Was a correction made? b If "Yes," describe in Part IV.				tes No					
	art I-C Complete if the org	janization is exempt und	der section 501(c).	except section 501(c	2)(3).					
2	Enter the amount directly expended Enter the amount of the filing organ exempt function activities	by the filing organization for se ization's funds contributed to o	ection 527 exempt functions for se	tion activities ection 527	\$					
3	Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL,									
	line 17b									
	Did the filing organization file Form									
5	Enter the names, addresses and en made payments. For each organizar contributions received that were propolitical action committee (PAC). If	tion listed, enter the amount pa omptly and directly delivered to	id from the filing organia a separate political org	zation's funds. Also enter th anization, such as a separa	ne amount of political					
	(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					

Schedule C (Form 990) 2021	CULLMAN ARE	A CHAMBER O	F COMMERCE	63-0)384727 Page:
Part II-A Complete if the org section 501(h)).	ganization is exen	npt under sectior	n 501(c)(3) and file	ed Form 5768 (ele	ection under
	ation belongs to an affi	liated group (and list in	Part IV each affiliated	group member's nam	ne address FIN
5 5	re of excess lobbying	•	Trait iv caoir anniatea	group member o num	ic, address, Env,
	ation checked box A ar	•	visions apply.		
Lim	its on Lobbying Exper ditures" means amou	nditures		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infl	uence public opinion (grassroots lobbying)			
b Total lobbying expenditures to infl	uence a legislative boo	dy (direct lobbying)			
c Total lobbying expenditures (add I	ines 1a and 1b)				
d Other exempt purpose expenditur					
e Total exempt purpose expenditure	es (add lines 1c and 1d)			
f Lobbying nontaxable amount. Ent	er the amount from the	e following table in bot	h columns.		
If the amount on line 1e, column (a)	or (b) is: The lob	bying nontaxable am	ount is:		
Not over \$500,000	20% of	the amount on line 1e.			
Over \$500,000 but not over \$1,00	0,000 \$100,00	00 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5	500,000 \$175,00	00 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17	,000,000 \$225,00	00 plus 5% of the exce	ss over \$1,500,000.		
Over \$17,000,000	\$1,000,	000.			
g Grassroots nontaxable amount (er	nter 25% of line 1f)				
h Subtract line 1g from line 1a. If zer	ro or less, enter -0				
i Subtract line 1f from line 1c. If zero	o or less, enter -0				
j If there is an amount other than ze reporting section 4911 tax for this	_	,	ation file Form 4720		Yes N
· · · · · ·		eraging Period Under			
(Some organizations t		01(h) election do not ate instructions for lir	•	of the five columns b	elow.
	Lobbying Exper	nditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2a Lobbying nontaxable amount					

Schedule C (Form 990) 2021

b Lobbying ceiling amount (150% of line 2a, column(e))

c Total lobbying expenditures

 d Grassroots nontaxable amount
 e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Schedule C (Form 990) 2021 CULLMAN AREA CHAMBER OF COMMERCE 63-03847 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

f the l	ch "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description			(b	,,
	obbying activity.	Yes	No	Amo	ount
1 [During the year, did the filing organization attempt to influence foreign, national, state, or				
le	ocal legislation, including any attempt to influence public opinion on a legislative matter				
c	or referendum, through the use of:				
a∖	/olunteers?				
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
	Media advertisements?				
d N	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
	Direct contact with legislators, their staffs, government officials, or a legislative body?				
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?				
jΤ	otal. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	f "Yes," enter the amount of any tax incurred under section 4912				
	f "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	f the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	501(0)(5)	or coo	tion	
d li	III Λ Complete if the exampleation is example under coeffician $E0.1(a)(\Lambda)$ coeffician	เ อบ แนกอา.	UI SEC	uon	
d II art	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	(-)(-),			
d II art		(.) (.) ,		Yes	ı
art				Yes	ı
art I V	501(c)(6).		1	Yes	
art 1 V 2 [3 [501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section	prior year? 1 501(c)(5),	1 2 3 or sec	X	N
art 1 V 2 [3 [501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "	prior year? 1 501(c)(5),	1 2 3 or sec	X	
eart 1 V 2 C 3 C	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes."	prior year? n 501(c)(5), No" OR (b)	1 2 3 or sec	X	
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art Verified to the control of the	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the substantial state of \$10 complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	prior year? n 501(c)(5), No" OR (b)	1 2 3 or sec	X	
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

Inspection

Name of the organization

CULLMAN AREA CHAMBER OF COMMERCE

Employer identification number 63-0384727

_		(a) Donor advised	I funds	(b) Funds	and other accou	unts
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 w	-				
	are the organization's property, subject to the organization's e	exclusive legal control?			Yes	L No
6	Did the organization inform all grantees, donors, and donor ac	lvisors in writing that gran	nt funds can be used o	only		
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any	other purpose confer	ring		
D -	impermissible private benefit?				Yes	No
Pa	2		on Form 990, Part IV	, line 7.		
1	Purpose(s) of conservation easements held by the organization					
	Preservation of land for public use (for example, recreat	ion or education)	Preservation of a hist	-	-	a
	Protection of natural habitat		Preservation of a cert	ified histo	oric structure	
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization of the complete lines 2a throu	ed conservation contribu	tion in the form of a co			
	day of the tax year.				eld at the End of t	ne lax Year
а				2a		
b				2b		
С	Number of conservation easements on a certified historic stru			2c		
d	Number of conservation easements included in (c) acquired at	•				
	listed in the National Register			2d		
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or te	rminated by the organ	ization du	iring the tax	
	year ►					
4	Number of states where property subject to conservation ease					
5	Does the organization have a written policy regarding the peri	• .	,			
	violations, and enforcement of the conservation easements it					L No
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, and	d enforcing conservation	on easem	ents during the y	ear
_	<u> </u>					
7	Amount of expenses incurred in monitoring, inspecting, handl	ing of violations, and enfo	orcing conservation ea	sements	during the year	
	\$					
_						
8	Does each conservation easement reported on line 2(d) above	•				—
	and section 170(h)(4)(B)(ii)?				Yes	☐ No
9	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation	n easements in its revenu	ue and expense staten	nent and		☐ No
	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation balance sheet, and include, if applicable, the text of the footnotes.	n easements in its revenu	ue and expense staten	nent and		☐ No
9	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation balance sheet, and include, if applicable, the text of the footnoorganization's accounting for conservation easements.	n easements in its revenuote to the organization's f	ue and expense staten	nent and at describ	oes the	□ No
9	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation balance sheet, and include, if applicable, the text of the footnoorganization's accounting for conservation easements. It III Organizations Maintaining Collections of	n easements in its revenunce to the organization's f	ue and expense staten	nent and at describ	oes the	□ No
9 Pa	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation balance sheet, and include, if applicable, the text of the footnoorganization's accounting for conservation easements. It III Organizations Maintaining Collections of Complete if the organization answered "Yes" on Form	n easements in its revenu ote to the organization's f Art, Historical Trea 990, Part IV, line 8.	ue and expense staten financial statements the	nent and at describ	pes the	□ No
9 Pa	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation balance sheet, and include, if applicable, the text of the footnotoganization's accounting for conservation easements. It III Organizations Maintaining Collections of Complete if the organization answered "Yes" on Form If the organization elected, as permitted under FASB ASC 958	n easements in its revenuate to the organization's fart, Historical Trease990, Part IV, line 8.	ue and expense staten financial statements the sures, or Other Services and ball the statement and ball the statem	nent and at describ Similar /	Assets. et works	□ No
9 Pa	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation balance sheet, and include, if applicable, the text of the footnotoganization's accounting for conservation easements. It III Organizations Maintaining Collections of Complete if the organization answered "Yes" on Form If the organization elected, as permitted under FASB ASC 958 of art, historical treasures, or other similar assets held for publications.	n easements in its revenuence to the organization's fart, Historical Treases, Part IV, line 8. B, not to report in its reverlic exhibition, education,	ue and expense staten in ancial statements the sures, or Other sures and balor research in furthera	nent and at describ Similar /	Assets. et works	□ No
9 Par	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation balance sheet, and include, if applicable, the text of the footnote organization's accounting for conservation easements. It III Organizations Maintaining Collections of Complete if the organization answered "Yes" on Form If the organization elected, as permitted under FASB ASC 958 of art, historical treasures, or other similar assets held for publishervice, provide in Part XIII the text of the footnote to its finance.	n easements in its revenuence to the organization's fact, Historical Treases, Part IV, line 8. not to report in its reveiling exhibition, education, cial statements that description.	ue and expense staten financial statements the sures, or Other S nue statement and bal or research in furthera ribes these items.	nent and at describ	Assets. et works	□ No
9 Pa	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation balance sheet, and include, if applicable, the text of the footnot organization's accounting for conservation easements. It III Organizations Maintaining Collections of Complete if the organization answered "Yes" on Form If the organization elected, as permitted under FASB ASC 958 of art, historical treasures, or other similar assets held for public service, provide in Part XIII the text of the footnote to its finance of the organization elected, as permitted under FASB ASC 958 or organization elected, as permitted under FASB ASC 958 or organization elected, as permitted under FASB ASC 958 or organization elected, as permitted under FASB ASC 958 or organization elected, as permitted under FASB ASC 958 or organization elected, as permitted under FASB ASC 958 or organization elected, as permitted under FASB ASC 958 or organization elected, as permitted under FASB ASC 958 or organization elected, as permitted under FASB ASC 958 or organization elected, as permitted under FASB ASC 958 or organization elected, as permitted under FASB ASC 958 or organization elected, as permitted under FASB ASC 958 or organization elected, as permitted under FASB ASC 958 or organization elected as permitted under FASB ASC 958 or organization elected as permitted under FASB ASC 958 or organization elected as permitted under FASB ASC 958 or organization elected as permitted under FASB ASC 958 or organization elected as permitted under FASB ASC 958 or organization elected as permitted under FASB ASC 958 or organization elected as permitted under FASB ASC 958 or organization elected as permitted under FASB ASC 958 or organization elected as permitted under FASB ASC 958 or organization elected as permitted under FASB ASC 958 or organization elected as permitted under FASB ASC 958 or organization elected as permitted under FASB ASC 958 or organization elected as permitted under FASB ASC 958 or organization elected as permitted under FASB ASC 9	n easements in its revenue to the organization's fart, Historical Trea 990, Part IV, line 8. B, not to report in its reveilic exhibition, education, cial statements that descending to the report in its revenue.	ue and expense staten inancial statements the sures, or Other sures, or Other sures at the statement and bal or research in further aribes these items.	nent and at describ similar A ance shee of puller sheet w	Assets. et works blic orks of	□ No
9 Par	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation balance sheet, and include, if applicable, the text of the footnote organization's accounting for conservation easements. It III Organizations Maintaining Collections of Complete if the organization answered "Yes" on Form. If the organization elected, as permitted under FASB ASC 958 of art, historical treasures, or other similar assets held for public service, provide in Part XIII the text of the footnote to its finantif the organization elected, as permitted under FASB ASC 958 art, historical treasures, or other similar assets held for public	n easements in its revenue to the organization's fart, Historical Trea 990, Part IV, line 8. B, not to report in its reveilic exhibition, education, cial statements that descending to the report in its revenue.	ue and expense staten inancial statements the sures, or Other sures, or Other sures at the statement and bal or research in further aribes these items.	nent and at describ similar A ance shee of puller sheet w	Assets. et works blic orks of	□ No
9 Par	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation balance sheet, and include, if applicable, the text of the footnote organization's accounting for conservation easements. It III Organizations Maintaining Collections of Complete if the organization answered "Yes" on Form. If the organization elected, as permitted under FASB ASC 958 of art, historical treasures, or other similar assets held for public service, provide in Part XIII the text of the footnote to its finance of the organization elected, as permitted under FASB ASC 958 art, historical treasures, or other similar assets held for public provide the following amounts relating to these items:	Art, Historical Trea 990, Part IV, line 8. 3, not to report in its rever lic exhibition, education, cial statements that desc 8, to report in its revenue exhibition, education, or	ue and expense staten financial statements the sures, or Other sures and balancer research in furtheral ribes these items. Statement and balancer research in furtherancer for the statement and balancer research in furtherancer for the statement and balancer research in furtherancer financial statement and balancer for the statement and bal	ment and at describe ance sheet we sheet we of public	Assets. et works blic orks of c service,	
9 Par	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation balance sheet, and include, if applicable, the text of the footnot organization's accounting for conservation easements. It III Organizations Maintaining Collections of Complete if the organization answered "Yes" on Form If the organization elected, as permitted under FASB ASC 958 of art, historical treasures, or other similar assets held for public service, provide in Part XIII the text of the footnote to its finance of the organization elected, as permitted under FASB ASC 958 art, historical treasures, or other similar assets held for public provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1	Art, Historical Trea 990, Part IV, line 8. 3, not to report in its rever lic exhibition, education, cial statements that desc 3, to report in its revenue exhibition, education, or	ue and expense staten financial statements the sures, or Other Sures, or Other Sures are statement and balor research in furtheral ribes these items. Statement and balance research in furtherance	nent and at describ ance sheet we sheet we of public by \$	Assets. et works blic orks of	
9 Pai	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation balance sheet, and include, if applicable, the text of the footnot organization's accounting for conservation easements. It III Organizations Maintaining Collections of Complete if the organization answered "Yes" on Form If the organization elected, as permitted under FASB ASC 958 of art, historical treasures, or other similar assets held for public service, provide in Part XIII the text of the footnote to its finance of the organization elected, as permitted under FASB ASC 958 art, historical treasures, or other similar assets held for public 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	n easements in its revenuence to the organization's fart, Historical Treases, not to report in its revenuence exhibition, education, cial statements that descent in the revenuence exhibition, education, or	ue and expense staten financial statements the sures, or Other Sures, or Other Sures are statement and balor research in furtheral ribes these items. Statement and balance research in furtherance	nent and at describ ance sheet we sheet we of public sheet we sheet with the sheet we sheet we sheet with the sheet we sheet with the sheet we sheet with the sheet we sheet w	Assets. et works blic orks of c service,	
9 Par	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation balance sheet, and include, if applicable, the text of the footnot organization's accounting for conservation easements. It III Organizations Maintaining Collections of Complete if the organization answered "Yes" on Form If the organization elected, as permitted under FASB ASC 958 of art, historical treasures, or other similar assets held for public service, provide in Part XIII the text of the footnote to its finantif the organization elected, as permitted under FASB ASC 958 art, historical treasures, or other similar assets held for public 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 If the organization received or held works of art, historical treasures.	n easements in its revenue to the organization's fart, Historical Trea 990, Part IV, line 8. B, not to report in its reveillic exhibition, education, cial statements that desc 8, to report in its revenue exhibition, education, or	ue and expense statentinancial statements the sures, or Other	nent and at describ ance sheet we sheet we of public sheet we sheet with the sheet we sheet we sheet with the sheet we sheet with the sheet we sheet with the sheet we sheet w	Assets. et works blic orks of c service,	
9 Pai	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation balance sheet, and include, if applicable, the text of the footnot organization's accounting for conservation easements. It III Organizations Maintaining Collections of Complete if the organization answered "Yes" on Form If the organization elected, as permitted under FASB ASC 958 of art, historical treasures, or other similar assets held for public service, provide in Part XIII the text of the footnote to its financial fithe organization elected, as permitted under FASB ASC 958 art, historical treasures, or other similar assets held for public 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 If the organization received or held works of art, historical treat the following amounts required to be reported under FASB ASC	n easements in its revenue to the organization's fart, Historical Trea 990, Part IV, line 8. B, not to report in its reveillic exhibition, education, cial statements that desc 8, to report in its revenue exhibition, education, or exhibition, education, or exhibition, education, or exhibition, education, or exhibition education, or exhibition education exhibitions.	ue and expense statentinancial statements the sures, or Other	ance sheet we of public provide	Assets. et works blic orks of c service,	

Sche		AREA CHAM						38472		age 2
Par	rt III Organizations Maintaining C	ollections of Ar	t, Histo	orical Tre	asures, o	r Other S	Similar Ass	ets (conti	nued)	
3	Using the organization's acquisition, accessi	on, and other record	s, check	any of the f	ollowing that	make sign	ificant use of i	ts		
	collection items (check all that apply):									
а	Public exhibition	c	i 🗌 i	Loan or exc	hange progra	am				
b	Scholarly research	e		Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	n how th	ey further th	e organizatio	n's exemp	t purpose in P	art XIII.		
5	During the year, did the organization solicit o	•		-	-	=				
	to be sold to raise funds rather than to be ma							Yes		No
Par	rt IV Escrow and Custodial Arran				n answered '	"Yes" on Fo	orm 990, Part I	V, line 9, o		
	reported an amount on Form 990, Pa									
1a	Is the organization an agent, trustee, custodi	an or other intermed	liary for o	contributions	s or other ass	sets not inc	luded			
	on Form 990, Part X?							Yes		No
b	If "Yes," explain the arrangement in Part XIII									
	•	•	_					Amour	ıt	
С	Beginning balance						1c			
d	Additions during the year						1d			
	Distributions during the year						1e			
	Ending balance						1f			
	Did the organization include an amount on Fe						?	Yes		No
	If "Yes," explain the arrangement in Part XIII.	·								
Pai	rt V Endowment Funds. Complete i	f the organization ar	swered	"Yes" on Fo	rm 990, Part	IV, line 10.				
		(a) Current year	(b) P	rior year	(c) Two yea	rs back (d) Three years ba	ck (e) Fou	r years	back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curr	ent year end balanc	e (line 1c	ı, column (a)) held as:			'		
а	Board designated or quasi-endowment	•	%	,, (,	,					
b	Permanent endowment	%	_							
С	Term endowment	 %								
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.								
За	Are there endowment funds not in the posse	•	ation that	t are held ar	nd administer	ed for the	organization			
	by:	· ·					· ·		Yes	No
	(i) Unrelated organizations							3a(i)		
	(ii) Related organizations									
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as requir	red on So	chedule R?				3b		
4	Describe in Part XIII the intended uses of the									
Par	rt VI Land, Buildings, and Equipm									
	Complete if the organization answere	d "Yes" on Form 990), Part IV	, line 11a. S	ee Form 990	, Part X, lin	e 10.			
	Description of property	(a) Cost or o	other	(b) Cost	or other	(c) Acc	umulated	(d) Boo	k valı	ie
	i enteresty	basis (investr			(other)		eciation	(, = 0 0		
1a	Land									
	Buildings			1,18	3,028.	53	32,362.	65	0,6	66.
	Leasehold improvements			, -	•					· · ·
	Equipment			21	9,919.	19	98,894.	2	1,0	25.

Schedule D (Form 990) 2021

671,691.

e Other

d Equipment

Total. Add lines 1a through 1e. (Column (d) must equal Form 990. Part X. column (B), line 10c.)

(a) Descripti (1) Financial	Complete if the organization answered "Yes" or ion of security or category (including name of security) I derivatives	(b) Book value	(c) Method of valuation: Cost or end-	of year market value
(2) Closely h	derivatives			oryear market value
(2) Other	neld equity interests			
(a) Other _				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)) must aqual Form 000. Part V and (P) line 10.)			
Part VIII) must equal Form 990, Part X, col. (B) line 12.) ▶ Investments - Program Related.			
	Complete if the organization answered "Yes" or (a) Description of investment	n Form 990, Part IV, line (b) Book value	11c. See Form 990, Part X, line 13. (c) Method of valuation: Cost or end-	of year market value
(1)	(a) Description of investment	(b) Book value	(c) Method of Valuation. Cost of end-	or-year market value
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col. (b)) must equal Form 990, Part X, col. (B) line 13.)			
	Other Assets. Complete if the organization answered "Yes" or	n Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
		escription		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Part X	nn (b) must equal Form 990, Part X, col. (B) line 1 Other Liabilities.	(5.)		
	Complete if the organization answered "Yes" or	n Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25.	
1.	(a) Description of liability			(b) Book value
(1) Fede	eral income taxes			
(2)				
(3)				
(4)				
(5)				
(5) (6)				
(5) (6) (7)				
(5) (6)				

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 Schedule D (Form 990) 2021

X

Par	rt XI	Reconciliation of Revenue per Audited Financial Statement	ts Wit	th Revenue per Ret	urn.	
		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	Amou	ints included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net u	nrealized gains (losses) on investments	2a			
b	Dona	ted services and use of facilities	2b			
С	Reco	veries of prior year grants	2c			
d	Other	(Describe in Part XIII.)	2d			
е		nes 2a through 2d			2e	
3	Subtr	act line 2e from line 1			3	
4	Amou	ints included on Form 990, Part VIII, line 12, but not on line 1:	1			
а		tment expenses not included on Form 990, Part VIII, line 7b	4a			
b		(Describe in Part XIII.)	4b			
С		nes 4a and 4b			4c	
5 Do:	Total	revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		ith Evnances per D	5	
Pai	IL VII	Reconciliation of Expenses per Audited Financial Statemer	ILS VV	itii Expenses per K	eturn	ł-
		Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.			.	
1		expenses and losses per audited financial statements			1	
2		ints included on line 1 but not on Form 990, Part IX, line 25:	_			
a		ted services and use of facilities	2a			
b		year adjustments	2b			
C		losses	2c			
d		(Describe in Part XIII.)	2d		0-	
_		nes 2a through 2d			2e 3	
3		act line 2e from line 1			3	
4		ints included on Form 990, Part IX, line 25, but not on line 1: tment expenses not included on Form 990, Part VIII, line 7b	4a			
a		(Describe in Part XIII.)	4b			
					4c	
5		nes 4a and 4b expenses. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 18.</i>)			5	
	rt XIII	Supplemental Information.				
		descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV	•		Part X	, line 2; Part XI,
iines	2d and	d 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addition	onai ini	formation.		
D 3 T) III 37					
PAF	Κ.Τ. X	, LINE 2:				
TH	IS G	UIDANCE REQUIRES ENTITIES TO ASSESS THE	R U	NCERTAIN TAX	PRC	VISIONS
FOE	R TH	E LIKELIHOOD THEY WOULD BE OVERTURNED UP	PON	IRS EXAMINAT	ION.	THE
CHZ	AMBE	R HAS DETERMINED THAT IT DOES NOT HAVE A	NY	POSITIONS AT	FEE	BRUARY 28,
202	22 Т	HAT IT WOULD BE UNABLE TO SUBSTANTIATE.				

SCHEDULE O (Form 990)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for the latest information.

2021
Open to Public Inspection

Internal Revenue Service

Name of the organization

CULLMAN AREA CHAMBER OF COMMERCE

Employer identification number 63-0384727

FORM 990, PART V, LINE 3B: INFORMATION REGARDING UBI FROM FRINGE BENEFITS: THE ORGANIZATION DID NOT, DURING THE YEAR, PROVIDE ANY FRINGE BENEFITS TO ANY INDIVIDUALS THAT MAY CONSTITUTE UBI. ADDITIONALLY, THE ORGANIZATION DOES NOT PROVIDE ANY PARKING FACILITIES TO VOLUNTEER OR CONTRACT LABOR. FORM 990, PART VI, SECTION B, LINE 11B: THE BOARD AND OFFICERS PROVIDES ALL SUPPORTING DOCUMENTS FOR PREPARATION OF THE INFORMATION RETURN AND THE BOARD REVIEWS THE ENTIRE FORM 990 PRIOR TO FILING. FORM 990, PART VI, SECTION B, LINE 12C: THERE IS NO FORMAL PROCESS SET FORTH TO MONITOR COMPLIANCE WITH THIS POLICY. IT IS EXPRESSLY KNOWN BY ALL DIRECTORS AND OFFICERS THAT CONFLICTS OF INTEREST ARE NOT ALLOWED. FORM 990, PART VI, SECTION C, LINE 19: ALL GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, FINANCIAL STATEMENTS AND FORM 990 ARE AVAILABLE FOR PUBLIC INSPECTION AT THE OFFICE OF THE ORGANIZATION AT 301 2ND AVE SW, CULLMAN, AL 35055. FORM 990, PART IX, LINE 11G, OTHER FEES: CONTRACT LABOR 96,056. CONSULTANT FEES 3.414. TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A 99,470.

Schedule O (Form 990) 2021 Page **2**

Name of the organization CULLMAN AREA CHAMBER OF COMMERCE	Employer identification number 63-0384727
FORM 990, PART XII, LINE 2C:	
CULLMAN AREA CHAMBER OF COMMERCE 63-0384727	
RETURNS OF THE TAXPAYER HAS NOT CHANGED FROM THAT OF THE P	RIOR YEAR.

132212 11-11-21 Schedule O (Form 990) 2021

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

CULLMAN AREA CHAMBER OF COMMERCE

Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

63-0384727

(a)	(b)	(c)	(d)	(e))	(f)	
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state of foreign country)			r assets Direct of	controlling ntity	9
Part II Identification of Related Tax-Exempt Organ organizations during the tax year.	izations. Complete if the organization	on answered "Yes" on Form 990	0, Part IV, line 34,	pecause it had one	or more related tax-exe	mpt	
(a)	(b)	(c)	(d)	(e)	(f)	Section (g)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public charity status (if section	Direct controlling entity	cont	512(b)(13 trolled tity?
		, , ,		501(c)(3))		Yes	No
CULLMAN AREA CHAMBER FOUNDATION - 47-427924	1				CULLMAN AREA CHAMBER OF		
CULLMAN, AL 35056	ASSIST BUSINESS LEAGUE	ALABAMA	501(C)(3)	LINE 7	COMMERCE	X	

Page 2

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year. Part III

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets		ortionate tions?	Code V-UBI amount in box 20 of Schedule	General of managing partner?	Percentage ownership
		country)		sections 512-514)		400010	Yes	No	K-1 (Form 1065)	Yes No)

Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	()	i)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership	512(t contr	i) etion b)(13) rolled ity?
		country)						Yes	No

1a

Page 3

Х

Yes No

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

b	b Giπ, grant, or capital contribution to related organization(s)				מר		
С	c Gift, grant, or capital contribution from related organization(s)				1c		X
	d Loans or loan guarantees to or for related organization(s)				1d		X
	Loans or loan guarantees by related organization(s)				1e		X
f	f Dividends from related organization(s)				1f		X
g	g Sale of assets to related organization(s)				1g		X
	h Purchase of assets from related organization(s)				1h		X
i	i Exchange of assets with related organization(s)				1i		X
j	j Lease of facilities, equipment, or other assets to related organization(s)				1j		X
k	k Lease of facilities, equipment, or other assets from related organization(s)				1k		X
	Performance of services or membership or fundraising solicitations for related organization(s)				11		X
m	m Performance of services or membership or fundraising solicitations by related organization(s)				1m		X
n	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		X
0	Sharing of paid employees with related organization(s)				10		X
р	p Reimbursement paid to related organization(s) for expenses				1 p		X
q	Reimbursement paid by related organization(s) for expenses				1q		X
r	r Other transfer of cash or property to related organization(s)				1r		X
	s Other transfer of cash or property from related organization(s)				1s		X
2	If the answer to any of the above is "Yes," see the instructions for information on who must cor	mplete th	is line, including covered r	elationships and transaction thresholds.			
	(a) (b) Name of related organization (type (a)	ction	(c) Amount involved	(d) Method of determining amount inv	olved		
1)							
٥١							
2)							
3)							
<u> </u>							
4)							
٠,							
5)							
-,							
6)							
	163 11-17-21			Schedule	R (Form	n 990)	2021

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign	related, unrelated, excluded from tax under sections 512-514)	(e) (1 re all ers sec. Shar (c)(3) gs.? tot	re of tal	(g) Share of end-of-year	Disprotion allocat	ppor- ate ions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Genera manag partn	(k) Percentag ownership
		country)	sections 512-514) Ye	No inco	ome	assets	Yes	No	(Form 1065)	Yes	NO
	_										
	_										
	-										
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132165 11-17-21 Schedule R (Form 990) 2021

Name: CULLMAN AREA CHAMBER OF COMMERCE	FEIN:	63-0384727
--	-------	------------

Ivan	C. CODDIMIN THE	A CHAMBER OF CO	MILIKOL							FEIN.	03-0304727
	e and Entity: A on 382 Annual Limitation	ADVERTISING POST	-2017 NOL FED Section 382 Carryover		DETAIL C	ARRYOVER SCH	IEDULE				
Yea Orig	r Original ii- Carryover	Total Amount Used	Amount Used for 02/29/20	Amount Used for							
A 20	18 2,02	8. 2,028	. 2,028.								
A 20 B C											
D											
D E F											
G H											
ī											
J											
K L											
М											
N O											
Р											
Q R											
S											
S T U											
V W											
٧٧	E Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount
Deta Typ	ail S Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used for
ТУР	e C										
A											
B C D E F											
D											
F											
G H											
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J K											
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N O											
P Q											
R S											
S T											
U											
V W											
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112571 04-01-21

Name: CULLMAN AREA CHAMBER OF COMMERCE	FEIN:	63-0384727

	e and Entity: PRE	E-2018 NOL FE	D Section 382 Carryover		DETAIL C	ARRYOVER SCH	IEDULE				
Year Origi	r Original i- Carryover d Amount	Total Amount Used	Amount Used for 02/28/18	Amount Used for							
A 201		377	. 377.								
A 201 B C D E											
D F											
F											
G H											
I											
J K											
L M											
N											
O P											
Q R											
S T											
T U											
V											
W	E Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount
Deta	uil S Used for B C	Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used for	Used for
Туре	e C ———										
A B C											
C											
D E F											
F											
G H											
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U V											
W											

112571 04-01-21

Form **990-T Exempt Organization Business Income Tax Return** OMB No. 1545-0047 (and proxy tax under section 6033(e)) For calendar year 2021 or other tax year beginning $\ \underline{MAR}\ 1$, $\ 2021$, and ending $\ FEB\ 28$, $\ 2022$ ► Go to www.irs.gov/Form990T for instructions and the latest information. Department of the Treasury ▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). Internal Revenue Service Check box if Name of organization (Check box if name changed and see instructions.) address changed. CULLMAN AREA CHAMBER OF COMMERCE **B** Exempt under section Print 63-0384727 Group exemption number (see instructions) X 501(c)(6 Number, street, and room or suite no. If a P.O. box, see instructions. Type 408(e) 220(e) P.O. BOX 1104 City or town, state or province, country, and ZIP or foreign postal code 408A []530(a)]529(a) [35056 529A CULLMAN, AL Check box if 1,221,302. C Book value of all assets at end of year an amended return. Check organization type ► X 501(c) corporation 501(c) trust 401(a) trust Other trust Check if filing only to Claim credit from Form 8941 Claim a refund shown on Form 2439 Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation Enter the number of attached Schedules A (Form 990-T) 1 During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes If "Yes," enter the name and identifying number of the parent corporation. The books are in care of ► KEITH VARDEN Telephone number $\triangleright 256 \overline{-734 - 0454}$ **Total Unrelated Business Taxable Income** Total of unrelated business taxable income computed from all unrelated trades or businesses (see 1,087. instructions) 1 2 Reserved 2 1,087. 3 3 Add lines 1 and 2 0. 4 Charitable contributions (see instructions for limitation rules) 4 1,087. Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3 5 Deduction for net operating loss. See instructions 6 6 Total of unrelated business taxable income before specific deduction and section 199A deduction. 7 1,087. Subtract line 6 from line 5 1,000. Specific deduction (generally \$1,000, but see instructions for exceptions) 8 8 9 **Trusts.** Section 199A deduction. See instructions 9 1,000. Total deductions. Add lines 8 and 9 10 10 Unrelated business taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7, 11 87. enter zero Tax Computation Organizations taxable as corporations. Multiply Part I, line 11 by 21% (0.21) 18. 1 Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on Schedule D (Form 1041) Tax rate schedule or Part I, line 11 from: 2 Proxy tax. See instructions 3 3 4 Other tax amounts. See instructions 4 Alternative minimum tax (trusts only) 5 5 Tax on noncompliant facility income. See instructions 6 6

Form **990-T** (2021)

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Total. Add lines 3 through 6 to line 1 or 2, whichever applies

For Paperwork Reduction Act Notice, see instructions.

<u>Part</u>	Ш	Tax and Payments						
1a	Foreig	gn tax credit (corporations attach Form 11	118; trusts attach Form 1116)	1a				
b								
С	Gene	ral business credit. Attach Form 3800 (see	e instructions)	1c				
d		t for prior year minimum tax (attach Form						
е	Total	credits. Add lines 1a through 1d				1e		
2	Subtr					2	1	L8.
3	Other	r amounts due. Check if from: Form 4			Form 8866			
			(attach statement)			3		
4		tax. Add lines 2 and 3 (see instructions).	· · · · · · · · · · · · · · · · · · ·	•			4	
		on 1294. Enter tax amount here				4		<u> </u>
5		ent net 965 tax liability paid from Form 965				5		0.
6a		nents: A 2020 overpayment credited to 202				-		
b		estimated tax payments. Check if section				-		
C			accurac (acc inct wations)			-		
d		gn organizations: Tax paid or withheld at s				-		
e		up withholding (see instructions)t for small employer health insurance pren				-		
f		r credits, adjustments, and payments:				-		
g			Other Total					
7		payments. Add lines 6a through 6g				7		
8		nated tax penalty (see instructions). Check				8		
9		lue. If line 7 is smaller than the total of line	********			9	1	L8.
10		payment. If line 7 is larger than the total o				10		
11		the amount of line 10 you want: Credited			Refunded >	11		
Part		Statements Regarding Certain A		ation (see inst				
1	At any	y time during the 2021 calendar year, did	the organization have an interest in	or a signature or	other authority		Yes	No
	over a	a financial account (bank, securities, or otl	her) in a foreign country? If "Yes," the	ne organization n	nay have to file			
	FinCE	EN Form 114, Report of Foreign Bank and	Financial Accounts. If "Yes," enter	the name of the	foreign country			
	here	>						Х
2	During	g the tax year, did the organization receive	e a distribution from, or was it the g	rantor of, or tran	sferor to, a			
	foreig	n trust?						Х
	If "Ye	es," see instructions for other forms the org	ganization may have to file.					
3		the amount of tax-exempt interest receive						
4	Enter	available pre-2018 NOL carryovers here	▶ \$ Do no	ot include any po	st-2017 NOL ca	ırryover		
	show	n on Schedule A (Form 990-T). Don't redu	ice the NOL carryover shown here b	y any deduction	reported on Par	t I, line 4.		
5		2017 NOL carryovers. Enter available Bus	•	,				
	the ar	mounts shown below by any NOL claimed	d on any Schedule A, Part II, line 17	for the tax year.	See instructions	i.		
		Business Activit	ty Code		post-2017 NOL	carryover		
				\$				
				\$				37
6a		ne organization change its method of acco	,					X
b		is "Yes," has the organization described the	he change on Form 990, 990-EZ, 99	0-PF, or Form 11	28? If "No,"			
Part		in in Part V						
rovide	trie ex	xplanation required by Part IV, line 6b. Als	so, provide any other additional inion	mation. See inst	ructions.			
	Ur	nder penalties of perjury, I declare that I have examined t	this return, including accompanying schedules a	nd statements, and to	the best of my knowle	edge and belief, it	is true,	
Sign	co	orrect, and complete. Declaration of preparer (other than	taxpayer) is based on all information of which pr	eparer has any knowle				
Here			INTER	RIM PRESI		May the IRS discu he preparer show		th
		Signature of officer	Date				Yes	No
		Print/Type preparer's name	Preparer's signature	Date	Check	if PTIN		
Paid		. 31 1 1	, , , , , , , , , , , , , , , , , , ,		self- employed			
repa	rer	MARK A. HESTLA		01/13/23			327430	
Jse C		Firm's name ► WARREN AVERE	TT, LLC	· · · · · · · · · · · · · · · · · · ·	Firm's EIN		084437	7
- J-	, y	PO BOX 124!						
		Firm's address CIII.I.MAN A1	T. 35056-1245		Phone no	256-730	-0312	

Form 990-T (2021)

SCHEDULE A (Form 990-T)

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

2021

	timent of the Treasury al Revenue Service Do not enter SSN numbers on this form as it							3).	Open to Public Inspection for 501(c)(3) Organizations Only
A	Name of the organization CULLMAN AREA CHAMBER OF COMMERCE						mployer 3 – 0 3		cation number 27
c (Jurelated business activity code (see instructions) ► 54180	0				D S	Sequence) :	1 of 1
E [Describe the unrelated trade or business ADVERTISING								
	rt I Unrelated Trade or Business Income		(A) Inc	come		(B) I	Expense	s	(C) Net
1 a	Gross receipts or sales								
b	Less returns and allowances c Balance ▶	1c							
2	Cost of goods sold (Part III, line 8)	2							
3	Gross profit. Subtract line 2 from line 1c	3							
4 a	Capital gain net income (attach Sch D (Form 1041 or Form								
	1120)). See instructions	4a							
b	Net gain (loss) (Form 4797) (attach Form 4797). See instructions)	4b							
С	Capital loss deduction for trusts	4c							
5	Income (loss) from a partnership or an S corporation (attach								
	statement)	5							
6	Rent income (Part IV)	6							
7	Unrelated debt-financed income (Part V)	7							
8	Interest, annuities, royalties, and rents from a controlled								
	organization (Part VI)	8							
9	Investment income of section 501(c)(7), (9), or (17)								
	organizations (Part VII)	9							
10	Exploited exempt activity income (Part VIII)	10							
11	Advertising income (Part IX)	11		4,0	59.		2,9	72.	1,087.
12	Other income (see instructions; attach statement)	12							
13	Total. Combine lines 3 through 12	13		4,0	59.		2,9	72.	1,087.
	Deductions Not Taken Elsewhere See instruction directly connected with the unrelated business in	come							s must be
1	Compensation of officers, directors, and trustees (Part X)							1	
2	Salaries and wages							2	
3	Repairs and maintenance							3	
4	Bad debts							4	
5	Interest (attach statement). See instructions							5	
6	Taxes and licenses				1			6	
7	Depreciation (attach Form 4562). See instructions			7					
8	Less depreciation claimed in Part III and elsewhere on return			8a				8b	
9	Depletion							9	
10	Contributions to deferred compensation plans							10	
11	Employee benefit programs							11	
12	Excess exempt expenses (Part VIII)							12	
13	Excess readership costs (Part IX)							13	
14	Other deductions (attach statement)							14	0.
15	Total deductions. Add lines 1 through 14							15	0.
16	Unrelated business income before net operating loss deduction. Su							40	1 007
4-	column (C)							16	1,087.
17	Deduction for net operating loss. See instructions							17	1 000

LHA For Paperwork Reduction Act Notice, see instructions.

Unrelated business taxable income. Subtract line 17 from line 16

Schedule A (Form 990-T) 2021

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Part	III Cost of Goods Sold Enter meti	nod of inventory valuation	on •		rago <u>z</u>
1		,		1	
2	Purchases				
3	Cost of labor				
4	Additional section 263A costs (attach statement)			4	
5	Other costs (attach statement)				
6	Total. Add lines 1 through 5				,
7	Inventory at end of year			_	
8	Cost of goods sold. Subtract line 7 from line 6. Enter h			_	
9	Do the rules of section 263A (with respect to property p	,			Yes No
Part					
1	Description of property (property street address, city, s	tate. ZIP code). Check it	f a dual-use. See instr	uctions.	
-	A	,,			
	В				
	С				
	D				
		Α	В	С	
2	Rent received or accrued		_		
a	From personal property (if the percentage of				
_	rent for personal property is more than 10%				
	but not more than 50%)				
b	From real and personal property (if the				
-	percentage of rent for personal property exceeds				
	50% or if the rent is based on profit or income)				
С	Total rents received or accrued by property.				
Ū	Add lines 2a and 2b, columns A through D				
	rad into 2d and 25, coldmit ranodgri 5			I	
3	Total rents received or accrued. Add line 2c columns A	through D. Enter here a	and on Part I line 6 co	olumn (A)	0.
•	Deductions directly connected with the income	tinoagn B. Entor hero a		Siditility y	
4	in lines 2(a) and 2(b) (attach statement)				
•	in inios z(a) and z(b) (attaon statement)			I	
5	Total deductions. Add line 4 columns A through D. En	iter here and on Part I li	ne 6. column (B)	•	0.
Part '		ee instructions)	5, 55.6 (2)		
1	Description of debt-financed property (street address, of	· · · · · · · · · · · · · · · · · · ·	eck if a dual-use. See	instructions.	
-	A	,,,			
	В				
	c				
	D				
		Α	В	С	
2	Gross income from or allocable to debt-financed		_		
_	property				
3	Deductions directly connected with or allocable				
•	to debt-financed property				
а	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
C	Total deductions (add lines 3a and 3b,				
C	columns A through D)				
4					
4	Amount of average acquisition debt on or allocable				
_	to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-				
_	financed property (attach statement)			2.1	
6	Divide line 4 by line 5	%	%	%	%
7	Gross income reportable. Multiply line 2 by line 6		1.11. 7		0.
8	Total gross income (add line 7, columns A through D)	. Enter here and on Part	I, line /, column (A)	>	<u> </u>
_			T		
9	Allocable deductions. Multiply line 3c by line 6			(5)	
10	Total allocable deductions. Add line 9, columns A thr				0.
11	Total dividends-received deductions included in line	IU			U •

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	VI Interest, Annu		oyalties, and Re	ents fror	n Control	led Or	ganization	S (se	e instruct	ions)	r age c
			-			E	Exempt Contro	,			
	Name of controlle organization	d	2. Employer identification number	incon	unrelated me (loss) structions)		al of specified ments made	that is	t of colur included olling orga gross inc	in the iniza-	Deductions directly connected with income in column 5
(1)											
(2)											
(3)											
(4)											
	. Tarrable because			 	Controlled O		1		0	44.5	
•	. Taxable Income	ir	Net unrelated acome (loss) e instructions)		otal of specif lyments mad		that is inc	cluded ir	n the ation's	С	eductions directly onnected with ome in column 10
(1)											
(2)											
(3)											
(4)											
							Add colum Enter here line 8, c		Part I,	Enter	columns 6 and 11. here and on Part I, e 8, column (B)
Totals						•			0.		0.
Part	VII Investment	Income	of a Section 50	1(c)(7), (9), or (17)	Orga	nization (s	ee instr	uctions)		
	1. Desc	cription of	income		2. Amou incon		3. Deduction directly connumber (attach states	ons ected	4. Set- (attach st		5. Total deductions and set-asides (add cols 3 and 4)
(1)											
(2)											
(3)											
(4)					Add amou	Enter					Add amounts in column 5. Enter here and on Part I,
Totals				>	line 9, colu	ımn (A) .					line 9, column (B)
Part	VIII Exploited E	xempt /	Activity Income	, Other 1	Than Adve	ertisin	g Income	(see inst	tructions)		
1	Description of exploite	ed activity:									
2	Gross unrelated busin	ess incom	e from trade or busi	ness. Ente	r here and o	n Part I,	line 10, colum	n (A)		2	
3	Expenses directly con										
4	line 10, column (B) Net income (loss) from		trade or business.							3	
•	'						•			4	
5	Gross income from ac									5	
6	Expenses attributable									6	
7	Excess exempt expen										
	4 Enter here and on F	Part II line	12							7	

Schedule A (Form 990-T) 2021

Part	IX Advertising Income				
1	Name(s) of periodical(s). Check box if reporting	g two or more periodicals on a c	onsolidated basis.		
	A CLASSIC CULLMAN MAG	SAZINE			
	B EYES OF PROGRESS NE	WSLETTER			
	c 🗆				
	D				
Enter a	amounts for each periodical listed above in the	corresponding column.			
		A	В	С	D
2	Gross advertising income	2,972.	1,087.		
_	Add columns A through D. Enter here and on				4,059.
а	That columns / through B. Enter hore and on	()			
3	Direct advertising costs by periodical	2,972.	0.		
а	Add columns A through D. Enter here and on			1	2,972.
а	Add coldinins A through b. Enter here and on	Tarti, iiile TT, coluitiit (b)			
4	Advertising gain (loss). Subtract line 3 from lin	20			
7		ie			
	2. For any column in line 4 showing a gain,				
	complete lines 5 through 8. For any column in				
	line 4 showing a loss or zero, do not complete		1,087.		
_	lines 5 through 7, and enter zero on line 8		1,007.		
5	Readership costs				
6	Circulation income				
7	Excess readership costs. If line 6 is less than				
	line 5, subtract line 6 from line 5. If line 5 is les				
_	than line 6, enter zero				
8	Excess readership costs allowed as a				
	deduction. For each column showing a gain o				
	line 4, enter the lesser of line 4 or line 7				
				1	
а	Add line 8, columns A through D. Enter the gr	reater of the line 8a, columns tota	al or zero nere and or	' <u> </u>	0
	Part II, line 13			>	0.
a Part	Part II, line 13		ee instructions)	>	
	Part II, line 13 X Compensation of Officers, Dir	ectors, and Trustees (se	ee instructions)	3. Percentage	4. Compensation
	Part II, line 13		ee instructions)	3. Percentage f time devoted	4. Compensation attributable to
Part	Part II, line 13 X Compensation of Officers, Dir	ectors, and Trustees (se	ee instructions)	3. Percentage of time devoted to business	4. Compensation
Part (1)	Part II, line 13 X Compensation of Officers, Dir	ectors, and Trustees (se	ee instructions)	3. Percentage f time devoted to business %	4. Compensation attributable to
(1) (2)	Part II, line 13 X Compensation of Officers, Dir	ectors, and Trustees (se	ee instructions)	3. Percentage If time devoted to business %	4. Compensation attributable to
(1) (2) (3)	Part II, line 13 X Compensation of Officers, Dir	ectors, and Trustees (se	ee instructions)	3. Percentage of time devoted to business % % %	4. Compensation attributable to
(1) (2)	Part II, line 13 X Compensation of Officers, Dir	ectors, and Trustees (se	ee instructions)	3. Percentage If time devoted to business %	4. Compensation attributable to
(1) (2) (3) (4)	Part II, line 13 X Compensation of Officers, Dir 1. Name	ectors, and Trustees (se	ee instructions)	3. Percentage of time devoted to business % % %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	Part II, line 13 X Compensation of Officers, Dir 1. Name . Enter here and on Part II, line 1	ectors, and Trustees (se	ee instructions)	3. Percentage of time devoted to business % % %	4. Compensation attributable to
(1) (2) (3) (4)	Part II, line 13 X Compensation of Officers, Dir 1. Name Enter here and on Part II, line 1	ectors, and Trustees (se	ee instructions)	3. Percentage of time devoted to business % % %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	Part II, line 13 X Compensation of Officers, Dir 1. Name . Enter here and on Part II, line 1	ectors, and Trustees (se	ee instructions)	3. Percentage of time devoted to business % % %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	Part II, line 13 X Compensation of Officers, Dir 1. Name . Enter here and on Part II, line 1	ectors, and Trustees (se	ee instructions)	3. Percentage of time devoted to business % % %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	Part II, line 13 X Compensation of Officers, Dir 1. Name . Enter here and on Part II, line 1	ectors, and Trustees (se	ee instructions)	3. Percentage of time devoted to business % % %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	Part II, line 13 X Compensation of Officers, Dir 1. Name . Enter here and on Part II, line 1	ectors, and Trustees (se	ee instructions)	3. Percentage of time devoted to business % % %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	Part II, line 13 X Compensation of Officers, Dir 1. Name . Enter here and on Part II, line 1	ectors, and Trustees (se	ee instructions)	3. Percentage of time devoted to business % % %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	Part II, line 13 X Compensation of Officers, Dir 1. Name . Enter here and on Part II, line 1	ectors, and Trustees (se	ee instructions)	3. Percentage of time devoted to business % % %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	Part II, line 13 X Compensation of Officers, Dir 1. Name . Enter here and on Part II, line 1	ectors, and Trustees (se	ee instructions)	3. Percentage of time devoted to business % % %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	Part II, line 13 X Compensation of Officers, Dir 1. Name . Enter here and on Part II, line 1	ectors, and Trustees (se	ee instructions)	3. Percentage of time devoted to business % % %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	Part II, line 13 X Compensation of Officers, Dir 1. Name . Enter here and on Part II, line 1	ectors, and Trustees (se	ee instructions)	3. Percentage of time devoted to business % % %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	Part II, line 13 X Compensation of Officers, Dir 1. Name . Enter here and on Part II, line 1	ectors, and Trustees (se	ee instructions)	3. Percentage of time devoted to business % % %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	Part II, line 13 X Compensation of Officers, Dir 1. Name . Enter here and on Part II, line 1	ectors, and Trustees (se	ee instructions)	3. Percentage of time devoted to business % % %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	Part II, line 13 X Compensation of Officers, Dir 1. Name . Enter here and on Part II, line 1	ectors, and Trustees (se	ee instructions)	3. Percentage of time devoted to business % % %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	Part II, line 13 X Compensation of Officers, Dir 1. Name . Enter here and on Part II, line 1	ectors, and Trustees (se	ee instructions)	3. Percentage of time devoted to business % % %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	Part II, line 13 X Compensation of Officers, Dir 1. Name . Enter here and on Part II, line 1	ectors, and Trustees (se	ee instructions)	3. Percentage of time devoted to business % % %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	Part II, line 13 X Compensation of Officers, Dir 1. Name . Enter here and on Part II, line 1	ectors, and Trustees (se	ee instructions)	3. Percentage of time devoted to business % % %	4. Compensation attributable to unrelated business

Depreciation and Amortization (Including Information on Listed Property)

► Attach to your tax return.

OMB No. 1545-0172

Attachment Sequence No. 179

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

► Go to www.irs.gov/Form4562 for instructions and the latest information.

990 Business or activity to which this form relates Identifying number

Part I Elec	AREA CHAMBER (OF COMMERC	CE FO	RM 990 I	PAGE 10		63-0384727
Fait i Elec	tion To Expense Certain Prope	rty Under Section 17	'9 Note: If you have any	listed property,	complete Part	V before yo	ou complete Part I.
1 Maximum	amount (see instructions)					1	1,050,000.
2 Total cost	of section 179 property plac	ed in service (see i	nstructions)			2	
3 Threshold	cost of section 179 property	before reduction	n limitation			3	2,620,000.
4 Reduction	in limitation. Subtract line 3	from line 2. If zero	or less, enter -0-			4	
5 Dollar limitatio	n for tax year. Subtract line 4 from line	1. If zero or less, enter -	0 If married filing separately, see	instructions		5	
6	(a) Description of pr	roperty	(b) Cost (bus	iness use only)	(c) Elected of	cost	
	perty. Enter the amount from						
	ed cost of section 179 prope						
	deduction. Enter the smaller						
	of disallowed deduction from			·			
	ncome limitation. Enter the s 9 expense deduction. Add l		,	,			
	of disallowed deduction to 2					12	
	se Part II or Part III below for			13			
B	pecial Depreciation Allowa			de listed prope	ertv.)		
	preciation allowance for qua		•				
the tax year	•				_	14	
•	ubject to section 168(f)(1) ele						
. ,	reciation (including ACRS)					16	
	IACRS Depreciation (Don't						
			Section A				
17 MACRS de	eductions for assets placed i	in service in tax ye	ars beginning before 202	1		17	34,541.
18 If you are elect	ting to group any assets placed in serv	vice during the tax year in	to one or more general asset acc	ounts, check here	▶ □	1	
	Section B - Assets			,			
	0001101112 7100011		e During 2021 Tax Year		neral Deprecia	tion Syste	m
(a) C	Classification of property	(b) Month and year placed in service	e During 2021 Tax Year (c) Basis for depreciation (business/investment use only - see instructions)			tion System (f) Method	(g) Depreciation deduction
		(b) Month and year placed	(c) Basis for depreciation (business/investment use	Using the Ger			
19a 3-year	Classification of property	(b) Month and year placed	(c) Basis for depreciation (business/investment use	Using the Ger			
19a 3-year b 5-year	Classification of property property	(b) Month and year placed	(c) Basis for depreciation (business/investment use	Using the Ger			
19a 3-yearb 5-yearc 7-year	Classification of property property property	(b) Month and year placed	(c) Basis for depreciation (business/investment use	Using the Ger			
19a 3-yearb 5-yearc 7-yeard 10-year	Classification of property property property property	(b) Month and year placed	(c) Basis for depreciation (business/investment use	Using the Ger			
 19a 3-year b 5-year c 7-year d 10-yea e 15-year 	Property property property property property property r property	(b) Month and year placed	(c) Basis for depreciation (business/investment use	Using the Ger			
 19a 3-year b 5-year c 7-year d 10-yea e 15-yea f 20-yea 	property property property property property r property r property	(b) Month and year placed	(c) Basis for depreciation (business/investment use	Using the Ger (d) Recovery period		(f) Method	
19a 3-year b 5-year c 7-year d 10-yea e 15-yea f 20-yea g 25-yea	property property property property r property r property r property r property r property r property	(b) Month and year placed	(c) Basis for depreciation (business/investment use	(d) Recovery period 25 yrs. 27.5 yrs.		(f) Method	
19a 3-year b 5-year c 7-year d 10-yea e 15-yea f 20-yea g 25-yea	property property property property property r property r property r property r property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use	Using the Gel (d) Recovery period 25 yrs. 27.5 yrs. 27.5 yrs.	(e) Convention MM MM	(f) Method S/L S/L S/L	
19a 3-year b 5-year c 7-year d 10-yea e 15-yea f 20-yea g 25-yea h Reside	property property property property r property r property r property r property r property r property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use	(d) Recovery period 25 yrs. 27.5 yrs.	(e) Convention MM MM MM	S/L S/L S/L S/L	
19a 3-year b 5-year c 7-year d 10-yea e 15-yea f 20-yea g 25-yea h Reside	property property property property r property sential rental property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	Using the Get (d) Recovery period 25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs.	(e) Convention MM MM MM MM	(f) Method S/L S/L S/L S/L S/L S/L	(g) Depreciation deduction
19a 3-year b 5-year c 7-year d 10-yea e 15-yea f 20-yea g 25-yea h Reside	property property property property r property sential rental property Section C - Assets I	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use	Using the Get (d) Recovery period 25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs.	(e) Convention MM MM MM MM	S/L S/L S/L S/L S/L S/L S/L S/L	(g) Depreciation deduction
19a 3-year b 5-year c 7-year d 10-yea e 15-yea f 20-yea g 25-yea h Reside i Nonres	property property property property r property sential rental property Section C - Assets I	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs.	(e) Convention MM MM MM MM	S/L	(g) Depreciation deduction
19a 3-year b 5-year c 7-year d 10-yea e 15-yea f 20-yea g 25-yea h Reside i Nonres 20a Class I b 12-yea	property property property property r property r property r property r property r property r property sential rental property Section C - Assets I	(b) Month and year placed in service / / / / / Placed in Service	(c) Basis for depreciation (business/investment use only - see instructions)	25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs. Jsing the Alter	(e) Convention MM MM MM MM MM MM MM Depreci	S/L	(g) Depreciation deduction
19a 3-year b 5-year c 7-year d 10-yea e 15-yea f 20-yea g 25-yea h Reside i Nonres 20a Class I b 12-yea c 30-year	property property property property r property r property r property r property r property r property sential rental property Section C - Assets I	(b) Month and year placed in service / / / / / / Placed in Service	(c) Basis for depreciation (business/investment use only - see instructions)	25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs. Jsing the Alter 12 yrs. 30 yrs.	(e) Convention MM MM MM MM MM MM MM MM MM	S/L	(g) Depreciation deduction
19a 3-year b 5-year c 7-year d 10-yea e 15-yea f 20-yea g 25-yea h Reside i Nonres 20a Class I b 12-yea c 30-yea d 40-yea	Property property property property r property r property r property r property r property r property sential rental property Section C - Assets I ife r r	(b) Month and year placed in service / / / / / Placed in Service	(c) Basis for depreciation (business/investment use only - see instructions)	25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs. Jsing the Alter	(e) Convention MM MM MM MM MM MM MM Depreci	S/L	(g) Depreciation deduction
19a 3-year b 5-year c 7-year d 10-yea e 15-yea f 20-yea g 25-yea h Reside i Nonres 20a Class I b 12-yea c 30-yea d 40-yea Part IV S	property property property property r property r property r property r property r property r property sidential rental property Section C - Assets I ife r r r	(b) Month and year placed in service / / / / Placed in Service / / / / / / / / / / / / / / / / / /	(c) Basis for depreciation (business/investment use only - see instructions) During 2021 Tax Year L	25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs. Jsing the Alter 12 yrs. 30 yrs. 40 yrs.	(e) Convention MM MM MM MM MM MM MM MM MM	S/L	(g) Depreciation deduction
19a 3-year b 5-year c 7-year d 10-yea e 15-yea f 20-yea g 25-yea h Reside i Nonres 20a Class I b 12-yea c 30-yea d 40-yea Part IV S 21 Listed prop	property property property property r property r property r property r property r property r property sidential rental property Section C - Assets I ife r r r ummary (See instructions.)	(b) Month and year placed in service / / / / Placed in Service / / / ee 28	(c) Basis for depreciation (business/investment use only - see instructions) During 2021 Tax Year L	25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs. Jsing the Alter 12 yrs. 30 yrs. 40 yrs.	(e) Convention MM MM MM MM MM MM MM MM MM	S/L	(g) Depreciation deduction
19a 3-year b 5-year c 7-year d 10-yea e 15-yea f 20-yea g 25-yea h Reside i Nonres 20a Class I b 12-yea c 30-yea d 40-yea Part IV S 21 Listed prop	property property property property r property sidential rental property Section C - Assets I ife r r ummary (See instructions.) perty. Enter amount from line amounts from line 12, lines	(b) Month and year placed in service / / / / / Placed in Service / / / at through 17, line	(c) Basis for depreciation (business/investment use only - see instructions) During 2021 Tax Year Less 19 and 20 in column (25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs. Jsing the Alter 12 yrs. 30 yrs. 40 yrs.	MM	S/L S/L	em
19a 3-year b 5-year c 7-year d 10-yea e 15-yea f 20-yea g 25-yea h Reside i Nonres 20a Class I b 12-yea c 30-yea d 40-yea Part IV S 21 Listed prop 22 Total. Add Enter here	property property property property r property r property r property r property r property r property sidential rental property Section C - Assets I ife r r r ummary (See instructions.)	(b) Month and year placed in service / / / / Placed in Service / / / 2 28	(c) Basis for depreciation (business/investment use only - see instructions) During 2021 Tax Year Uses 19 and 20 in column (artnerships and S corporations)	25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs. Jsing the Alter 12 yrs. 30 yrs. 40 yrs.	MM	S/L S/L	(g) Depreciation deduction

CULLMAN AREA CHAMBER OF COMMERCE 63-0384727 Page 2 Form 4562 (2021) Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.) **Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable. Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.) 24a Do you have evidence to support the business/investment use claimed? 24b If "Yes," is the evidence written? Yes Nο Yes Nο (c) (e) (i) (f) (g) (a) Type of property Date Business/ Basis for depreciation Elected Cost or Recovery Method/ Depreciation placed in investment (business/investment section 179 (list vehicles first) Convention deduction other basis period use percentage use only) service cost 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use 26 Property used more than 50% in a qualified business use: % % % 27 Property used 50% or less in a qualified business use S/L -% S/L -% % S/L -28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 Add amounts in column (i), line 26. Enter here and on line 7, page 1 29 Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles. (a) (b) (c) (d) (e) (f) 30 Total business/investment miles driven during the Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle year (don't include commuting miles) Total commuting miles driven during the year ... 32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year. Add lines 30 through 32 Yes 34 Was the vehicle available for personal use No Yes No Yes No Yes No Yes No Yes No during off-duty hours? Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons. 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your Yes No 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners **39** Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles Part VI Amortization (f) (a) (b) (c) (d) (e) Amortization Description of costs Date amortization Amortizable Amortization for this year Code section begins amount period or percentage 42 Amortization of costs that begins during your 2021 tax year

43 Amortization of costs that began before your 2021 tax year

44 Total. Add amounts in column (f). See the instructions for where to report

43

Form **8868**

(Rev. January 2022)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870. Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Taxpayer identification number (TIN) Type or Name of exempt organization or other filer, see instructions. print 63-0384727 CULLMAN AREA CHAMBER OF COMMERCE File by the Number, street, and room or suite no. If a P.O. box, see instructions. P.O. BOX 1104 filing your return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions 35056 CULLMAN, AL Enter the Return Code for the return that this application is for (file a separate application for each return) **Application** Return **Application** Return Is For Code Is For Code Form 990 or Form 990-EZ Form 1041-A 01 08 Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 Form 990-T (corporation) 07 KEITH VARDEN • The books are in the care of \triangleright 211 2ND AVENUE NE - CULLMAN, AL 35055 Telephone No. ► 256-734-0454 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this . If it is for part of the group, check this box 🕨 🦳 and attach a list with the names and TINs of all members the extension is for. JANUARY 17, 2023 , to file the exempt organization return for I request an automatic 6-month extension of time until the organization named above. The extension is for the organization's return for: calendar year , and ending FEB 28, 2022 ► X tax year beginning MAR 1, 2021 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period 3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less 0. any nonrefundable credits. See instructions. За If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8868** (Rev. 1-2022)