

990

Return of Organization Exempt From Income Tax

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

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

OMB No. 1545-0047 2020

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

<u>A</u>	For the	e 2020 calendar y	ear, or tax year begini	ning	07-01	, 2020, ar	nd ending		06-30 , 20 21			
В	Check if a	applicable:	C Name of organizationMi	ramar-Pembroke Pines	Chamber	of Com	merce,	Inc. D Em	ployer identification number			
	Address	change	Doing business as						59-1660741			
Ī	Name ch	_	·	D. box if mail is not delivered to street addr	ress)		Room/suite	E Tele	ephone number			
Ħ	Initial retu	•	9001-B Pembrok		,				(954)432-9808			
Ħ		ırn/terminated		rince, country, and ZIP or foreign postal co	.do		G Gross receipts					
H					iue				·			
H	Amended		Pembroke Pines				1	\$	194,607			
Ш	Application	on pending	·	ncipal officer: Robert Goltz			l '	a) Is this a group retu				
_			Same as C abov	. –	\Box		——— H(I	b) Are all subordin				
<u> </u>) (insert no.) 4947(a)(1) or	527				list. See instructions			
-	Website:		<u>iramarpembrokep</u>					c) Group exemption				
		organization: X Cor	poration Trust Ass	ociation Other	LY	ear of formation	n: 1969	M State of I	egal domicile: FL			
F	art I	Summary										
	1	•	-	on or most significant activities:					the purpose of			
ė				ndustrial, profession		_						
Governance		-		ea; assisting small b	suiness	growth	through	n hosting	of networking			
ern				velopment programs.								
Š	2			discontinued its operations or di				ı	i			
∞ ∞	3		-	0 , (, ,				<u> </u>	16			
es	4		_	s of the governing body (Part VI,					16_			
<u>∨iti</u>	5	Total number of i	ndividuals employed in	calendar year 2020 (Part V, line	2a) .			5	2			
Activities	6	Total number of	volunteers (estimate if n	ecessary)				6				
•	7a			Part VIII, column (C), line 12				7a	0			
	b	Net unrelated bu	siness taxable income	from Form 990-T, Part I, line 11			<u></u>	7b	0			
							—	rior Year	Current Year			
_	8		d grants (Part VIII, line					204,464	164,187			
ηe	9	Program service	revenue (Part VIII, line	2g)				96,653	12,495			
Revenue	10	Investment incor	ne (Part VIII, column (A), lines 3, 4, and 7d)					0			
8	11	Other revenue (F	Part VIII, column (A), lin	es 5, 6d, 8c, 9c, 10c, and 11e)				23,608	17,925			
	12	Total revenue - a	ndd lines 8 through 11 (r		324,725	194,607						
	13	Grants and simil	ar amounts paid (Part I)	K, column (A), lines 1-3)					0			
	14	Benefits paid to	or for members (Part IX	, column (A), line 4)					0			
s	15	Salaries, other c	ompensation, employee	e benefits (Part IX, column (A), lir	nes 5-10)			170,284	148,264			
Expenses	16a	Professional fund	draising fees (Part IX, c	olumn (A), line 11e)					0			
ber	b	Total fundraising	expenses (Part IX, colu	ımn (D), line 25)		0						
ŭ	17	Other expenses	(Part IX, column (A), lin	es 11a-11d, 11f-24e)				139,186	76,505			
	18	Total expenses.	Add lines 13-17 (must	equal Part IX, column (A), line 25	5)			309,470	224,769			
	19	Revenue less ex	penses. Subtract line 1	8 from line 12				15,255	(30,162)			
ō	Ses						Beginnin	g of Current Year	End of Year			
sets	<u>E</u> 20	Total assets (Par	t X, line 16)					57,889	43,251			
Net Assets or	මී 21	Total liabilities (P	Part X, line 26)					10,699	26,955			
	[22	Net assets or fur	nd balances. Subtract li	ne 21 from line 20				47,190	16,296			
Pa	art II	Signature	Block									
				n, including accompanying schedules and cer) is based on all information of which pr			f my knowledg	e and belief, it is				
uuc	, correct,	and complete. Declarat	lion of preparer (other than one	cer) is based on all illiormation of which pr	eparer rias arry	Kilowieuge.						
~ :-		Patrici	la Archer						11-08-2021			
Sig	gn	Signature of	officer					[Date			
He	re	Patrici	la Archer, Pres	ident/CEO								
_		Type or print	name and title									
		Print/Type prepare	r's name	Preparer's signature	D	ate		Check X if	PTIN			
Pa	id	Michael B	ayere	Michael Bayere	11	L-08-202	21	self-employed	P02003354			
Pre	epare	r Firm's name	CAS Assu	rance, LLC			Firm's	EIN •				
Us	e Onl	y Firm's address	3600 S S	tate Road 7 Suite 48			Phone	e no.				
			Miramar	FL 33023				954	-362-7113			
Mav	the IR	S discuss this retu		own above? (see instructions)					X Yes No			

Part IV

			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		х
2	Is the organization required to complete Schedule B, Schedule of Contributors See instructions?	2		Х
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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	_		
_	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		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
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		
9		۰		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	-		^
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10		Α
•	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		х
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		х
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		х
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		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		х
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		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
40	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	40		
47	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	47		
19	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		v
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	10		Х
13	If "Yes," complete Schedule G, Part III	19		v
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		x
zo a b	ARMA NA III ARA III AR	20b		
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 (2020) Miramar-Pembroke Pines Chamber of Commerce, Inc.

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		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
200	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	200		
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L. Part I	25b		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	250		
20	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
		20		
27	controlled entity or family member or 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	07		
00	persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part			
	IV instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	00-		
	"Yes," complete Schedule L, Part IV	28a		<u>X</u>
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 lines 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? <i>If "Yes," complete Schedule M</i>	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		_X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note: All Form 990 filers are required to complete Schedule O.	38	Х	
Par				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Form W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		

EEA

20) <u>Miramar-Pembroke Pines Chamber of Commerce, Inc.</u>

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 2a 2			
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 <i>e-file</i> (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		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 financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	х	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	х	
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? • • • • • • • • • • • • • • • • • • •	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	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.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		х
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х
	If "Yes," complete Form 4720, Schedule O.			

59-1660741

Part VI G

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

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

The prevention of voling members of the governing body all the end of the tax year The prevention body deligned from a visiting inflate among members of the governing body, or of the governing body deligned troad authority to an executive committee or similar committee, explain on Schedule 0. Description Descripti	Sec	tion A. Governing Body and Management			
If there are malarial differences in volting rights among members of the governing body, or if the governing body dependent body and support body body body body body body body body				Yes	No
if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule 0. b Einst the number of voiling members included in line 1a, above, who are independent. 2 Did any efficier, director, trustee, or key employee have a family relationship or a business relationship with any other efficier, director, trustee, or key employees to a management of output or the direct supervision of efficiers, director, trustees, or key employees to a management of output or the direct supervision of efficiers, director, trustees, or key employees to a management of output or other person? 3 J X 10 Ib the organization have management of a significant diversion of the organization sases 15 cm. 1 Section 1. 5 Did the organization have members or stockholders? 6 L X 2 6 Did the organization have members or stockholders? 7 Did the organization have members or stockholders? 8 Did the organization have members or stockholders? 9 Did the organization have members or stockholders? 10 A T any operance decisions of the organization reserved to for subject to approval by) memmers. 10 Did the organization contemporanceously document the meetings held or written actions undertaken during the year by the following. 11 The governing body? 12 Did the organization contemporanceously document the meetings held or written actions undertaken during the year by the following. 12 Each committee with authority to act on behalf of the governing body? 13 Each committee with authority to act on behalf of the governing body? 14 Each committee with authority to act on behalf of the governing body? 15 Each committee with authority to act on behalf of the governing body is mineral Revenue Code. 16 In the governing body? 18 In the ere any officer, director, trustee, or key employee listed in Part VII. Section A, who cannot be resched at the organization have local chapters, branches, or affiliates? 18 In the ere organization have local chapters, branches, or affiliates? 19 In the organization	1a	Enter the number of voting members of the governing body at the end of the tax year			
be Either the number of volting members included in 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 have a family relationship or a business relationship with any other officer, director, trustee, or key employees to a management company or other person? 3 Just the organization make any segrificant changes to its governing documents since the prior Form 990 was field? 4 Just 2 Did the organization make any segrificant changes to its governing documents since the prior Form 990 was field? 4 Just 2 Did the organization have members or stockholders? 5 Did the organization have members or stockholders or other persons who had the power to elect or appoint once or more members of the poverning body? 5 Ava any governance decisions of the organization reserved to (or subject to approval by) members. 5 Did the organization have members and the poverning body? 6 Did the organization contemporaneously document the meetings held or written actions understavent cluring the year by the following: 8 The governing body? 9 Section B. Policies (This Section B requests information about process or Schooling O 9 Section B. Policies (This Section B requests information about process not Schooling O 10 The organization have written policies and procedures governing the activities of such chapters, and the organization have written policies and procedures governing the activities of such chapters, and the organization have written policies and procedures governing the activities of such chapters, and by the organization have written policies and procedures governing the governing body before filing the form? 10 In the organization have written policies and procedures governing the secur		If there are material differences in voting rights among members of the governing body, or			
b Either the number of voting members included in line 1a, above, who are independent 1b 16 2 2 2 X 2 2 Dick any officer, director, tustees, or key employees? 2 2 X 3 Dick the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 X X 5 Dick the organization make any significant changes to its governing occurrents since the prior Form 990 was flied? 4 X X 5 Dick the organization have members or stockholders? 6 X 5 X 5 X 5 Dick the organization have members or stockholders? 6 X 5 X 5 Dick the organization have members or stockholders? 6 X 5 Dick the organization have members or stockholders? 7 X 5 X 5 Dick the organization have members or stockholders? 8 Dick the organization have members or stockholders? 9 Dick the organization have members or stockholders? 10 Dick the organization have members or stockholders. 10 Dick the organization have members or stockholders? 10 Dick the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 10 Dick the organization contemporaneously document the meetings held or written actions undertaken suring the year by the following: 10 Dick the organization contemporaneously document the meetings held or written actions undertaken suring the year by the following: 10 Dick the power into body? 10 Dick the governing body body body body body body body body		if the governing body delegated broad authority to an executive committee or similar			
2 Did the organization delegate control over management duties customarily performed by or under the direct any other office, director, trustees, or key employees to a management company or other person? 3 Did the organization delegate control over management duties customarily performed by or under the direct 3 Supervision of officers, directors, of trustees, or key employees to a management company or other person? 3 Supervision of officers, directors, or trustees, or key employees to a management company or other person? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members a stockholders? 6 X 7 Did the organization have members as stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7 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? 7 Did the organization contemporarseously document the meetings held or written actions undertaken during the year by the following: 8 Did the organization contemporarseously document the meetings held or written actions undertaken during the year by the following: 9 Section B. Policies (This Section A who cannot be reached at the organization's mainting address? If Yes, provide the narmes and actigateses or Schradule O. 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code). 10a Did the organization have written policies and prosecutors governing the activities of such chapters, 11b Has the organization have written policies and prosecutors governing the activities of such chapters, 11c March 11c M		committee, explain on Schedule O.			
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Miramar-Pembroke Pines Chamber of Commerce, Inc.

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

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

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

- **1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, 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.

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

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

Officer this box in fictine the organization for any relati	T Organizati	1 0011	ipen			y ourror	IL OI	moor, an cotor, or t	45100.	
				(C)						
(A)	(B)	Position (do not check more than one					1	(D)	(E)	(F)
Name and title	Average	box, unless person is both an						Reportable	Reportable	Estimated amount
	hours		officer and a director/trustee)				compensation	compensation	of other	
	per week							from the organization	from related organizations	compensation from the
	(list any hours for	or Inc	Ins	요	₹e	육동	Fo	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and
	related	direc	titut	Officer	y en	ploy	Former	,		related organizations
	organizations	tor tr	nstitutional		Key employee	t cor				
	below	Individual trustee or director	trustee		9	npe				
	dotted line)	Ď	tee		Л	Highest compensated employee				
						8				
(1) Robert Goltz	40.00									
President/CEO				х	4		_	130,414	0	2,936
(2) Michael Stamm										
Director		х						0	0	0
(3) Ivan Saldias										
Director		х						0	0	0
(4) Jessica Busquets										
Director		х						0	0	0
(5) Marc Liebeskind										
Director		Х						0	0	0
(6) Tiffany Panciera										
Director		х			4		_	0	0	0
(7) Tony Gordon										
Director		х						0	0	0
(8) Steven Sarduy										
Director		х						0	0	0
(9) Stan Bostic										
Director		х						0	0	0
(10)Ismael Monroig	L									
Vice Chair-Finance		х						0	0	0_
(11)James Knapp										
Vice Chair-Governance		х						0	0	0_
(12)Leah A Carpenter										
Chair		х						0	0	0
(13)Henry Rose					T					
Immediate Past Chair		х						0	0	0
(14)Annette Alvarez					T					
Director		х						0	o	0
	·									

		6			

Part VII	Section A. Officers, Directors, Trustees	s, Key Emplo	yees,	and	Hig	hes	t Com	pen	sated Employees	(continued))			
					((C)								
	40	(5)			Pos	sition			(5)	(E)			(=)	
	(A)	(B)	(do i	not che			han one		(D)	(E) Reportable			(F)	
	Name and title	Average					s both a		Reportable			Estim	ated an	
		hours	offic	er and	d a diı	rector	r/trustee))	compensation from the	compensa from rela		cor	of other	
		per week							organization	organizat			rom the	1011
		(list any hours for	약 la	l Ins	Q#	<u>중</u>	em Hig	₽		(W-2/1099-N			nization	and
		related	dire	titut	Officer	Key employee	ploy	Former				related	d organiz	zations
		organizations	otor t	ona		탕	ree t co	ļ '						
		below	Individual trustee or director	nstitutional trustee		yee	mpe							
		dotted line)	e e	stee			Highest compensated employee							
							ed							
(15)Chris_Za	adie													
Director			Х						0		0			0
(16)Anita F	Taylor													
Director			х						0		0			0
(17)Patricia	a Archer													
President/			x		х				0		o			0
									•					
(10)														
(19)														
(20)														
		. L												
(21)						1								
<u></u> /														
(00)														
(22)														
(23)							/							
(24)														
<u> </u>														
(25)														
<u>(23)</u>														
41: 0:1:4:4								<u> </u>						
1b Subtot								•						
c Total fr	om continuation sheets to Part VII, Sec	tion A .						• •						
d Total (a	add lines 1b and 1c)							. •	130,414		0		2,	936
2 Total nu	umber of individuals (including but not limit	ed to those lis	sted ab	ove)	who	o rec	ceived	mor	e than \$100,000 of					
reportal	ble compensation from the organization													1
													Yes	No
3 Did the	organization list any former officer, director	nr trustee ke	v emnl	ovee	or e	hiah	nest co	mne	ensated					
	ee on line 1a? If "Yes," complete Schedule			-		_						3		.,,
												3		X
-	individual listed on line 1a, is the sum of r													
-	ation and related organizations greater tha													
individu	ıal											4		х
5 Did any	person listed on line 1a receive or accrue	compensatio	n from	any	unre	elate	ed orga	aniza	ation or individual					
for serv	rices rendered to the organization? If "Yes,	" complete So	chedule	e J fo	or su	ıch p	erson					5		х
	ndependent Contractors	, , , , , , ,				- ,-								
	ete this table for your five highest compens	atad indapan	dont or	ontro	otor	c the	at roco	ivod	more than \$100 00)0 of				
comper	nsation from the organization. Report comp	pensation for	the cal	enda	ar ye	ar e	nding	with	or within the organ	ization's tax	c year.			
	(A)								(B)			(C)		
	Name and business addre	ss							Description of service	es		Compens	ation	
								<u> </u>						
	umber of independent contractors (includin	-			liste	ed a	bove)	who						
receive	d more than \$100,000 of compensation from	om the organiz	zation	•	•									

		Check if Schedule O contains a response	or no	te to any line in this	Part VIII			
					(A)	(B)	(C)	(D)
					Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under
						Tanouon rovonae	2401100010140	sections 512–514
	1a	Federated campaigns	1a					
Ωs	b	Membership dues	1b	164,187				
ra i	С	Fundraising events	1c					
S, G	d	Related organizations	1d					
Sifts ar A	e	Government grants (contributions)	1e					
ıs, (imil	f	All other contributions, gifts, grants,						
Contributions, Gifts, Grants and Other Similar Amounts		and similar amounts not included above	1f					
들	g	Noncash contributions included in						
o la		lines 1a-1f	1g	\$				
	h	Total. Add lines 1a-1f	٠.	<u> </u>	164,187			
				Business Code				
9	l	Membership Breakfast		900099	5,960	5,960		
و چَ	l	Exposition		900099	2,400	2,400		
S - enu	C	Women in Business		900099	260	260		
Program Service Revenue	d							
go.	е							
₫.	f	All other program service revenue			3,875	3,875		
	g				12,495			
	3	Investment income (including dividends, inter-						
	۱,	other similar amounts)						
	5	Royalties						
	້	(i) Real	• •					
	6a			(ii) Personal				
		Less: rental expenses 6b						
	l	Rental income or (loss) 6c						
	l	Net rental income or (loss)						
		Gross amount from (i) Securities	_	(ii) Other				
	'a	sales of assets		(1) 04151				
		other than inventory 7a						
	b							
e		and sales expenses 7b	•					
evenue	c	Gain or (loss) 7c						
Re	d	Net gain or (loss)	6.					
Other R	8a	Gross income from fundraising						
₹		events (not including \$						
		of contributions reported on line						
		1c). See Part IV, line 18	8a					
	l	Less: direct expenses	8b					
	I	Net income or (loss) from fundraising events	_	<u> </u>				
	9a	Gross income from gaming						
		activities, See Part IV, line 19	9a					
	l	Less: direct expenses	9b					
		Net income or (loss) from gaming activities	$\dot{\vdash}$	<u></u>				
	10a	Gross sales of inventory, less	100					
		returns and allowances	10a					
	l	Net income or (loss) from sales of inventory		' <u>'</u>				
	۲	recention or (1033) norm sales of inventory	• •	Business Code				
<u>s</u>	11a	Business Development		900099	4,203	4,203		
Miscellanous Revenue	I	Royalty/Affinity Income	_	900099	1,456	1,456		1
ella ven	l	Advertising	_	900099	5,717	5,717		
Re		All other revenue		900099	6,549	6,549		
Σ	e	Total. Add lines 11a-11d			17,925			
		Total revenue See instructions			104 607	20 420		

Part IX

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).
Check if Schodula O centains a response or note to any line in this Part IV

	ot include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations			д	
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	102,080	A	102,080	
8	Pension plan accruals and contributions (include	-,		,	
	section 401(k) and 403(b) employer contributions)	8,806		8,806	
9	Other employee benefits	4,014		4,014	
10	Payroll taxes	33,364		33,364	
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	76,505	6,613	69,892	
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а					
b					
С					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	224,769	6,613	218,156	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here If				
	following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

(A) (B) Beginning of year End of year 1 1 Cash - non-interest-bearing 33,991 25,151 2 2 3 Pledges and grants receivable, net 3 4 Accounts receivable, net 18,523 13,222 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 7 Notes and loans receivable, net 8 Prepaid expenses and deferred charges 9 9 5,375 4,878 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a b Less: accumulated depreciation 10b 10c 11 11 12 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 14 14 15 15 16 Total assets. Add lines 1 through 15 (must equal line 33) 16 57,889 43,251 17 10,699 17 6,123 18 18 19 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to any current or former officer, director, -iabilities trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 20,832 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 25 26 Total liabilities. Add lines 17 through 25 26 10,699 26,955 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. Net Assets or Fund Balances 27 27 28 Net assets with donor restrictions 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 29 30 Paid-in or capital surplus, or land, building, or equipment fund 30 Retained earnings, endowment, accumulated income, or other funds 31 47,190 31 16,296 32 47,190 32 16,296 33 33 43,251 57,889

Form	990 (2020) Miramar-Pembroke Pines Chamber of Commerce, Inc. 5	9-1660	741	Pa	age 12
Pai	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				<u>. 🗌</u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1		194,	
2	Total expenses (must equal Part IX, column (A), line 25)	2		224,	769
3	Revenue less expenses. Subtract line 2 from line 1	3		(30,	162
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		47,	190
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8		(732
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10		16,	296
Par	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<u>. 🗌</u>
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		х
	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				
b	Were the organization's financial statements audited by an independent accountant?		2b		х
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain 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		х

3b

Form **990** (2020)

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

EEA

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number 59-1660741 Miramar-Pembroke Pines Chamber of Commerce, Inc. 01. Members or stockholder classes and rights (Part VI, line 6) Members elect individuals to the board for 3-year terms in April. 02. Member election for additional members (Part VI, line 7a) Members elect individuals to the board for 3-year terms in April 03. Governing body decisions (Part VI, line 7b) Bylaw changes are approved by membership via ballot vote 04. Local chapters, branches, affiliates (Part VI, line 10a) Each subsidiary and lead group has a governance committee. Subsidiaries are reprisented with board member positions based on the number of members in each subsidiary. 05. Form 990 governing body review (Part VI, line 11) Through the CEO & President, the form is submitted to the Finance Committee, which reports to the Executive Committee of the board. The Executive Committee reviews and presents to the entire board 06. Conflict of interest policy compliance (Part VI, line 12c) meeting of the board at the beginning of the year, during new board member training, and at monthly board meetings, every member is reminded of the policy. 07. CEO, executive director, top management comp (Part VI, line 15a) Compensation and contracts are reviewed by the Executive Committee for approval from the

Schedule O (Form 990 or 990-EZ) (2020)
Page 2

Name of the organization	Employer identification number
Miramar-Pembroke Pines Chamber of Commerce, Inc.	59-1660741
MITAMAT-FEMBLORE FINES CHAMBEL OF COMMETCE, INC.	39-1000/41
full board.	
2422 254241	
08. Other officer or key employee compensation (Part VI, line 15b	
Compensation and contracts are reviewed by the Executive Committee for appr	oval from the
<u>full</u> board.	
09. Governing documents, etc, available to public (Part VI, line 19)	
os. Governing documents, etc, available to public (rait vi, line is)	
Available on our website in the About section.	
A	
10. List of other fees for services expenses (Part IX, line 11g)	
Food & Beverages 3,580.16	
Photography (Video 2 760 01	
Photography & Video 2,769.01	
Marketing 80.00	
Supplies & Services 184.00	

SCHEDULE R (Form 990)

Department of the Treasury

Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

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

► Attach to Form 990.

Name of the organization Miramar-Pembroke Pines Chamber of Commerce, Inc. OMB No. 1545-0047

2020

Open to Public Inspection

Employer identification number

59-1660741

Part I Identification of Disregarded Entities. Comple	te if the organization a	answered "Yes"	on Form 990, Par	t IV, line 33.			
(a) Name, address, and EIN (if applicable) of disregarded entity	Prim	(b) nary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct cont entit	rolling ty
(1)							
(2)		1					
-							
(3)							
(4)							
(5)							
Part II Identification of Related Tax-Exempt Organizations du one or more related tax-exempt organizations du	ations. Complete if the iring the tax year.	e organization a	answered "Yes" on	Form 990, Part I	V, line 34 becaus	se it had	
(a) Name, address, and EIN of related organization	(b) Primary activity	(C) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Sec. 51: controlle	g) 2(b)(13) ed entity?
(1) S Florida Business Partnership LAC, 82-4008611	Promote					163	110
9001-B Pembroke Road	improvement of						
Pembroke Pines FL 33025	non-partisan govt	FL			N/A		
(2)							
(3)							
(4)							
(5)							

cnedule R (Fori	m 990) 2020										га
Part III	Identification of	Related Organizations	Taxable	as a Partners	hip. Complete if	the organizat	tion answered	d "Yes" on	Form 990, Pa	rt IV, line 3	4 ,
Part III	because it had on	e or more related organ	nizations t	reated as a pa	rtnership during	the tax year.					
	(0)	(6)	(0)	(d)	(0)	(6)	(~)	/h)	(1)	/:\	(14)

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(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	Share of total income	Share of end-of- year assets	Dispropo alloca	ortionate tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)		ral or aging ner?	Percentage ownership
		country)		sections 512-514)			Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												

Part IV 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	i)
	Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership	Section 5 contr enti	olled
		·							Yes	No
(1)										
(2)										
(3)										
(4)										
(5)										

(6)

Schedul	e R (Form 990) 2020 FILE CHIEF ONE 1 FILES CHARLES OF COMMETCE, THE	•		33 1000711		P	age •
Part	Transactions with Related Organizations. Complete if the organization answ	vered "Yes" on Form	990, Part IV, line 34	1, 35b, or 36.			
Note	: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No
1 D	During the tax year, did the organization engage in any of the following transactions with one or more related or	rganizations listed in Parts	II-IV?				
a F	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		x
b 0	Sift, grant, or capital contribution to related organization(s)				1b		х
c (Sift, grant, or capital contribution from related organization(s)				1c		x
d L	oans or loan guarantees to or for related organization(s)				1d		х
e L	oans or loan guarantees by related organization(s)				1e		x
f D	Dividends from related organization(s)				1f		x
	Sale of assets to related organization(s)				1g		x
	Purchase of assets from related organization(s)				1h		x
	exchange of assets with related organization(s)				1i		x
	ease of facilities, equipment, or other assets to related organization(s)				1i		x
							^
	ease of facilities, equipment, or other assets from related organization(s)				1k		х
	Performance of services or membership or fundraising solicitations for related organization(s)				11		x
					1m		х
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		x
o S	Sharing of paid employees with related organization(s)				10		х
рF	Reimbursement paid to related organization(s) for expenses				1р		x
q F	Reimbursement paid by related organization(s) for expenses				1q		x
_							
	Other transfer of cash or property to related organization(s)				1r	х	
	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 complete this line, in	1 · · · · · · · · · · · · · · · · · · ·	i	1			
	(a)	(b)	(c)	(d)			
	Name of related organization	Transaction type (a-s)	Amount involved	Method of determining	amount i	nvolved	
(1)							
(2)							
(3)							
(4)							
(4)							
(5)							

EEA Schedule R (Form 990) 2020

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)	(b)	(c)	(d)	(е		(f)	(g)	(h)	(i)	(j)		(k)
	Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)	Predominant income (related, unrelated, excluded from tax under sections 512-514)	sect 501(organi	(c)(3) zations	Share of total income	Share of end-of-year assets	alloca		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	man par	eral or aging tner?	Percentage ownership
				sections 312-314)	Yes	No			Yes	No		Yes	No	
(1)														
(2)						•								
(3)					\									
(4)				> (
(5)														
(6)														
(7)														
(8)														
(9)														
(10)														
(11)														
(12)														

Statement of Program Service Accomplishments

2020

പ്രവ

Name(s) as shown on return

Your Social Security Number

Miramar-Pembroke Pines Chamber of Commerce, Inc.

59-1660741

Form 990-Part III(a) Statement of Service Accomplishment

Statement #4

Program Service Code

Program Service Expenses

\$1719

Grants and allocations included in above expense

\$0

Program Services Revenue

\$3875

Explanation

Other programs include Net@Nite, Lunch, Business After Hour, and Pinnacle Award.



990 Overflow Statement Page 1 Name(s) as shown on return Miramar-Pembroke Pines Chamber of Commerce, Inc. 59-1660741

Program Service Expenses

Description	Amount
Food & Beverages	\$ 3,580
Photography & Video	2,769
Supplies & Services	184
Marketing	80
	Total: \$6,613

Management & General Expenses

Description	Amount
Credit Cards Fees	\$ 3,964
Licenses & Permits	399
Commission	3,375
Professional Development	199
Auto	2,750
Worker's Comp	385
Liability & DO Insurance	5,200
Dues & subscriptions	3,207
Life Insurance	<u>776</u>
Rent	17,790
Equipment Rental	7,083
Telephone	2,402
Internet	1,850
Website	<u> </u>
Database	7,136
Utilities	2 <u>,797</u>
Computer Expense	2,025
Payroll Service Expenses	1,971
Bank Service Charges	321
Office Supplies & Expenses	<u>501</u>
Meals & Entertainment	207
Repair & Maintenance	138
Postage & Delivery	12
Accounting & Tax Services	600
Advertising	1,495
Scholarship Foundation website & other expenses	1 <u>,791</u>
SFBP LAC Website & other expenses	1,243
Taxes	122
Total	1: \$ 69,892