

Form 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.

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

Department of the Treasury Internal Revenue Service

A For the 2021 calendar year, or tax year beginning 01-01-2021, and ending 12-31-2021

- B Check if applicable: Address change, Name change, Initial return, Final return/terminated, Amended return, Application pending

C Name of organization: Chamber of Commerce of the USA. Doing business as. Number and street: 1615 H Street NW. City: Washington, DC 200622000

D Employer identification number: 53-0045720

E Telephone number: (202) 463-5590

G Gross receipts \$ 203

F Name and address of principal officer: Stefan Freiberg, 1615 H Street NW, Washington, DC 200622000

H(a) Is this a group return for subordinates? H(b) Are all subordinates included? H(c) Group exemption number

I Tax-exempt status: 501(c)(3), 501(c)(6), 4947(a)(1), 527

J Website: www.uschamber.com

K Form of organization: Corporation, Trust, Association, Other

L Year of formation: 1915 M State of

Part I Summary

Table with columns: Activities & Governance, Revenue, Expenses, Assets or Balances. Rows include: 1 Briefly describe the organization's mission... 2 Check this box... 3-7a Number of members, employees, volunteers, revenue... 8-12 Revenue breakdown... 13-19 Expense breakdown... 20 Total assets

Net A Fund	21 Total liabilities (Part X, line 26)	76,061,590
	22 Net assets or fund balances. Subtract line 21 from line 20	32,274,436

Part II **Signature Block**

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

Sign Here	Signature of officer	2022-11-11
	Stefan Freiberg CFO Type or print name and title	Date

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN P00395735
	Firm's name ▶ Ernst & Young US LLP			Firm's EIN ▶ 34-6565596	
	Firm's address ▶ 111 Monument Circle Ste 4000 Indianapolis, IN 46204			Phone no. (317) 681-7000	

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

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 11282Y

Form 990 (2021)

Part III **Statement of Program Service Accomplishments**

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

1 Briefly describe the organization's mission:

The Chamber of Commerce of the USA serves its members and the nation's business community by analyzing national economic and by helping legislators and national leaders to shape policies and proposals to foster the development of American business. We connect, inform, and fight for business growth and America's success. We provide our members timely policy analysis and legal ad with leaders in business and government, and equip them with tools and resources to grow and succeed. We are their ally and cha Hill, in the courts, in the state houses, and in markets around the world.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?
If "Yes," describe these changes on Schedule O.

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

4a (Code:) (Expenses \$ including grants of \$) (Revenue \$
Foreign and domestic policy experts, lobbyists, and communicators advance the issues that matter to our members by working with partners in t government, influencing public policymaking, and participating in the public debate.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$
We foster relationships with international partners to enhance competitiveness in the global marketplace and strengthen the global economy. We markets, a level playing field for American businesses, and strong, enforceable trade agreements.






















4c (Code:) (Expenses \$ including grants of \$) (Revenue \$
We work with state and local chambers and business associations in Washington and across the country to represent the breadth and diversity of Together, we build awareness of business priorities and generate grassroots advocacy to influence public policy.

4d Other program services (Describe in Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$

4e Total program service expenses ▶

Form 990 (2021)

Part IV Checklist of Required Schedules

1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions. 	2
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> 	3
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? <i>If "Yes," complete Schedule C, Part II</i>	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? <i>If "Yes," complete Schedule C, Part III</i> 	5
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? <i>If "Yes," complete Schedule D, Part I</i> 	6
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> 	7
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> 	8
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> 	9
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	10
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.	
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> 	11:
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? <i>If "Yes," complete Schedule D, Part VII</i> 	11
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i> 	11
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? <i>If "Yes," complete Schedule D, Part IX</i> 	11
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> 	11
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)? <i>If "Yes," complete Schedule D, Part X</i> 	11
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> 	12
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> 	12
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14
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? <i>If "Yes," complete Schedule F, Parts I and IV</i> 	14
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i> 	15
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i> 	16
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions. 	17
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> 	18
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> 	19
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20

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

Form 990 (2021)

Part IV Checklist of Required Schedules (continued)

- 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
- 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
- 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
- b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b
- c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c
- d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d
- 25a **Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? 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 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 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
- 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
- 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):
 - a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28a
 - b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b
 - c 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
- 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29
- 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30
- 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31
- 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
- 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
- 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
- 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?
 - 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
- 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
- 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

Part V **Statements Regarding Other IRS Filings and Tax Compliance**

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

1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	343	1c
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			

Form 990 (2021)

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

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	455	2b
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a
b If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i>			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
b If "Yes," enter the name of the foreign country: <u>IN</u> 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
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b
c 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
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).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			7a
b If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c
d If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f
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.			
a 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:			
a Initiation fees and capital contributions included on Part VIII, line 12	10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders	11a		
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12:
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?	13:
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	
	13b	
c	Enter the amount of reserves on hand	
	13c	
14a Did the organization receive any payments for indoor tanning services during the tax year?		14:
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14:
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
If "Yes," see the 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
If "Yes," complete Form 4720, Schedule O.		
17 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.		

Form 990 (2021)

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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

Section A. Governing Body and Management

1a	Enter the number of voting members of the governing body at the end of the tax year	1a	102
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	99
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
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		3
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5
6	Did the organization have members or stockholders?		6
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
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
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?		8a
b	Each committee with authority to act on behalf of the governing body?		8b
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9

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

10a	Did the organization have local chapters, branches, or affiliates?	10:
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?	10:
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11:
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	12:

12	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12
12	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12
13	Did the organization have a written whistleblower policy?	13
14	Did the organization have a written document retention and destruction policy?	14
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?	15
15	a The organization's CEO, Executive Director, or top management official	15
15	b Other officers or key employees of the organization	15
If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
16	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16
16	b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed

18 Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records:
 ▶Stefan Freiberg 1615 H Street NW Washington, DC 200622000 (202) 463-5590

Form 990 (2021)

Part VII **Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employee 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 or 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		
(1) Thomas J Donohue See Sch O	39.00	X		X				9,221,015	0

CEO/Director	1.00									
(2) Suzanne P Clark President & CEO/Director	37.00	X		X					5,130,536	0
(3) Kenneth Wayne Cole Director	1.00	X							25,000	0
(4) Robert Jones Director	1.00	X							15,000	0
(5) Andy Abboud Director	1.00	X							0	0
(6) Robert O Agbede Director	1.00	X							0	0
(7) Mark Allen Director	1.00	X							0	0
(8) Lee R Anderson Sr Director	1.00	X							0	0
(9) Dennis Arriola Director	1.00	X							0	0
(10) Richard H Bagger Director	1.00	X							0	0
(11) Arnold Baker Director	1.00	X							0	0
(12) Gene Barr Director	1.00	X							0	0
(13) Kathy G Beckett Director	1.00	X							0	0
(14) John F Biagas Director	1.00	X							0	0
(15) Rich Bielen Director	1.00	X							0	0
(16) Jim Brady Director	1.00	X							0	0
(17) Kelly Brough Director	1.00	X							0	0

Form 990 (2021)

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)							(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)
		Individual trust or director	Institutional Tri	Officer	Key employee	Highest compe employee	Former			

		ee	state			nsated		
(18) Michelle H Browdy Director	1.00	X						0 0
(19) David G Brown Director	1.00	X						0 0
(20) Zawadi Bryant Director	1.00	X						0 0
(21) Brian A Butler Director	1.00	X						0 0
(22) James M Carroll Director	1.00	X						0 0
(23) Doug Cifu Director	1.00	X						0 0
(24) Chris Clark Director	1.00	X						0 0
(25) Rui Coelho Director	1.00	X						0 0
(26) Joseph W Craft III Director	1.00	X						0 0
(27) Bruce Culpepper Director	1.00	X						0 0
(28) Mitch Delk Director	1.00	X						0 0
(29) Brackett B Denniston III Director	1.00	X						0 0
(30) Amadou Diarra Director	1.00	X						0 0
(31) Maura W Donahue Director	1.00	X						0 0
(32) Michael L Ducker Director	1.00	X						0 0
(33) Erin Egan Director	1.00	X						0 0
(34) Shawn Fagan Director	1.00	X						0 0
(35) Terri Fariello Director	1.00	X						0 0
(36) Sean Finn Director	1.00	X						0 0
(37) Michael Flannigan Director	1.00	X						0 0
(38) Lisa Flavin Director	1.00	X						0 0
(39) Wayne A I Frederick MD Director	1.00	X						0 0
(40) Lance M Fritz Director	1.00	X						0 0
(41) Robert Funck Director	1.00	X						0 0
(42) John E Gallina Director	1.00	X						0 0
(43) Edward Gillespie Director	1.00	X						0 0

Director											
(99) Tracy G Schmidt	1.00	X								0	0
Director											
(100) Gerald L Shaheen	1.00	X		X						0	0
Treasurer/Director											
(101) Matt Shay	1.00	X								0	0
Director											
(102) Eric Silagy	1.00	X								0	0
Director											
(103) Raj Singh	1.00	X								0	0
Director											
(104) Christel Slaughter PhD	1.00	X								0	0
Director											
(105) John Stephens	1.00	X								0	0
Director											
(106) Frank Sullivan	1.00	X								0	0
Director											
(107) Traci Tapani	1.00	X								0	0
Director											
(108) David Thorne	1.00	X								0	0
Director											
(109) Ralph de la Torre	1.00	X								0	0
Director											
(110) Maxine Turner	1.00	X								0	0
Director											
(111) Joseph B Ucuzoglu	1.00	X								0	0
Director											
(112) Steve Van Andel	1.00	X								0	0
Director											
(113) Frank L VanderSloot	1.00	X								0	0
Director											
(114) Ray Wagner	1.00	X								0	0
Director											
(115) Todd Walker	1.00	X								0	0
Director											
(116) Jennifer Walton	1.00	X								0	0
Director											
(117) Gretchen Watkins	1.00	X								0	0
Director											
(118) Mark E Watson III	1.00	X								0	0
Director											
(119) Ashli R Watts	1.00	X								0	0
Director											
(120) Amy Wilson	1.00	X								0	0
Director											
(121) Mark Wilson	1.00	X								0	0
Director											
(122) Thomas J Wilson	1.00	X								0	0
Director	1.00										
(123) Heather Wingate	1.00	X								0	0
Director											
(124) Christopher C Womack	1.00	X								0	0
Director											
(125) Elanna S Yalow PhD MBA	1.00	X								0	0
Director											

(126) Michael A Zarcone Director	1.00	X							0	0
(127) John Wood SVP, Gnl Cnsl/CLO & Secry	38.00			X					1,600,993	0
(128) Stan M Harrell SVP & CFO	2.00			X					1,041,306	0
(129) Stefan Freiberg CFO	38.00			X					303,743	0
(130) Agnes Warfield-Blanc EVP, Dev and Fund	2.00				X				3,190,129	0
(131) Justin Waller EVP, COO	38.00				X				1,966,601	0
(132) Myron Brilliant EVP & Head Intl	2.00				X				1,888,129	0
(133) Neil Bradley EVP & Chief Policy Officer	39.00				X				1,277,244	0
(134) Harold Kim President of ILR	40.00				X				987,283	0
(135) David T Hirschmann Pres/CEO, CCMC/GIPC/C_Tec	40.00					X			1,700,000	0
(136) Martin Durbin Pres, GEI & SVP Policy	40.00					X			1,038,629	0
(137) Michelle Russo Chief Comms Officer	40.00					X			989,218	0
(138) Thomas Quaadman EVP, CCMC, Sr Advisor to Pres/CEO	40.00					X			684,415	0
(139) John Howard SVP, Govt Affairs	40.00					X			654,585	0
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)									31,713,826	0

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 222

3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services
Wilmer Cutler Pickering Hale & Dorr LLP PO Box 7247-8760 Philidelphia, PA 19170	Legal services
McDermott Will & Emery PO Box 16765 Carol Stream, IL 60132	Legal policy consult
Greenwood Point International LLC 1054 31st Street NW Suite 316 Washington, DC 20007	Consulting
Wiley Rein LLP PO Box 800	Legal services

Insurance services

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 95

Form 990 (2021)

Part VIII **Statement of Revenue**

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

	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue
1a Federated campaigns			
1b Contributions, Gifts, Grants, and Membership dues	1,653,364		
1c Other similar fundraising events			
1d Related organizations	2,135,993		
1e Government grants (contributions)			
1f All other contributions, gifts, grants, and similar amounts not included above	190,672,087		
1g Noncash contributions included in lines 1a - 1f:\$			
h Total. Add lines 1a-1f	197,461,444		

Program Service Revenue		Business Code			
2a Sponsorships/royalties		900099	2,759,250	2,759,250	
2b Sales promotion effort		900099	548,971		548,971
2c Publication sales		511190	189,015	189,015	
2d Accreditation fees		541900	23,766	23,766	
2e Meetings		900099	20,000	20,000	
2f All other program service revenue					
g Total. Add lines 2a-2f.			3,541,002		

3 Investment income (including dividends, interest, and other similar amounts)			110,728		
4 Income from investment of tax-exempt bond proceeds					
5 Royalties					
6a Gross rents	(i) Real	(ii) Personal			
			42,090		
b Less: rental expenses			0		

c Rental income or (loss)		6c	42,090			
d Net rental income or (loss)				42,090		
			(i) Securities	(ii) Other		
7a	Gross amount from sales of assets other than inventory	7a	91,833			
b	Less: cost or other basis and sales expenses	7b	87,118			
c	Gain or (loss)	7c	4,715			
d Net gain or (loss)				4,715		
Other Revenue	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18				
	8b	Less: direct expenses				
	c Net income or (loss) from fundraising events					
Other Revenue	9a	Gross income from gaming activities. See Part IV, line 19				
	9b	Less: direct expenses				
	c Net income or (loss) from gaming activities					
Other Revenue	10a	Gross sales of inventory, less returns and allowances				
	10b	Less: cost of goods sold				
	c Net income or (loss) from sales of inventory					
Miscellaneous Revenue		Business Code				
11a	Affiliate admin charge	561000	2,713,436	2,713,436		
b	Miscellaneous revenue	900099	17,274	17,274		
c						
d	All other revenue					
e Total. Add lines 11a-11d			2,730,710			
12 Total revenue. See instructions			203,890,689	5,722,741		548,971

Form 990 (2021)

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21			
2 Grants and other assistance to domestic individuals. See Part IV, line 22			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.			

4 Benefits paid to or for members			
5 Compensation of current officers, directors, trustees, and key employees	26,992,362		
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in			

Schedule B

Schedule of Contributors

(Form 990)

Department of the Treasury
Internal Revenue Service

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

Name of the organization Chamber of Commerce of the USA	Employer iden 53-0045720
--	------------------------------------

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

- 501(c)() (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization

Form 990-PF

- 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. S

General Rule

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's contributions.

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the greater of (1) 15% of the organization's total assets at the end of the year under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16, or 17, or (2) 10% of the organization's total assets at the end of the year received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the organization's total assets at the end of the year, Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$5,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received more than \$5,000 in religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990 or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Schedule B (Form 990) (2021)

Name of organization Chamber of Commerce of the USA	Employer identificati 53-0045720
--	--

Part I
Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	Type
<u>RESTRICTED</u>	<hr/> <hr/> <hr/>	\$ <u>RESTRICTED</u>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> (Complete contributic
-	<hr/> <hr/> <hr/>	\$	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> (Complete contributic
-	<hr/> <hr/> <hr/>	\$	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> (Complete contributic
-	<hr/> <hr/> <hr/>	\$	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> (Complete contributic
-	<hr/> <hr/> <hr/>	\$	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> (Complete contributic
-	<hr/> <hr/> <hr/>	\$	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> (Complete contributic
-	<hr/> <hr/> <hr/>	\$	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> (Complete contributic

Schedu

Schedule B (Form 990) (2021)

Name of organization Chamber of Commerce of the USA	Employer identification number 53-0045720
--	---

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	D
-	<div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; width: 80%;"></div> \$ _____	<div style="border-bottom: 1px solid black; width: 20px;"></div>
-	<div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; width: 80%;"></div> \$ _____	<div style="border-bottom: 1px solid black; width: 20px;"></div>
-	<div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; width: 80%;"></div> \$ _____	<div style="border-bottom: 1px solid black; width: 20px;"></div>
-	<div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; width: 80%;"></div> \$ _____	<div style="border-bottom: 1px solid black; width: 20px;"></div>
-	<div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; width: 80%;"></div> \$ _____	<div style="border-bottom: 1px solid black; width: 20px;"></div>
-	<div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; width: 80%;"></div> \$ _____	<div style="border-bottom: 1px solid black; width: 20px;"></div>

Schedu

Schedule B (Form 990) (2021)

Name of organization Chamber of Commerce of the USA	Employer identificati 53-0045720
--	--

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (11) than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line for organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or more for the year. (Enter this information once. See instructions.) ▶ \$ _____

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of
-	<div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 15px;"></div>	<div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 15px;"></div>
Transferee's name, address, and ZIP 4		(e) Transfer of gift Relationship of transferor to transferee	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Department of the Treasury Internal Revenue Service

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.

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

- 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 III, line 1 (Proxy Tax) (see separate instructions), then...

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Table with 2 columns: Name of the organization (Chamber of Commerce of the USA) and Employer identification number (53-0045720)

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. See instructions for defining "political campaign activities."
2 Political campaign activity expenditures. See instructions
3 Volunteer hours for political campaign activities. See instructions

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955
2 Enter the amount of any excise tax incurred by organization managers under section 4955
3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?
4a Was a correction made?
b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities
2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities
3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b.
4 Did the filing organization file Form 1120-POL for this year?
5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments...

Table with 5 columns: (a) Name, (b) Address, (c) EIN, (d) Amount paid from filing organization's funds, (e) Continuation of Schedule C. Rows include Republican Attorney General Association, Republican State Leadership Committee, and Republican Governors Association.

Schedule C (Form 990) 2021

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)													
b Total lobbying expenditures to influence a legislative body (direct lobbying)													
c Total lobbying expenditures (add lines 1a and 1b)													
d Other exempt purpose expenditures													
e Total exempt purpose expenditures (add lines 1c and 1d)													
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 50%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.	
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:												
Not over \$500,000	20% of the amount on line 1e.												
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.												
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.												
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.												
Over \$17,000,000	\$1,000,000.												
g Grassroots nontaxable amount (enter 25% of line 1f)													
h Subtract line 1g from line 1a. If zero or less, enter -0-													
i Subtract line 1f from line 1c. If zero or less, enter -0-													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?													

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

Lobbying Expenditures During 4-Year Averaging Period				
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021
2a Lobbying nontaxable amount				
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

Schedule C (Form 990) 2021

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)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)
	Yes No

1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:		
a	Volunteers?		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		
c	Media advertisements?		
d	Mailings to members, legislators, or the public?		
e	Publications, or published or broadcast statements?		
f	Grants to other organizations for lobbying purposes?		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		
i	Other activities?		
j	Total. Add lines 1c through 1i		
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		
b	If "Yes," enter the amount of any tax incurred under section 4912		
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

1	Were substantially all (90% or more) dues received nondeductible by members?		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 1 is answered "Yes."

1	Dues, assessments and similar amounts from members	1	
----------	--	----------	--

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No

21

Open Ins

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.

Department of the Treasury Internal Revenue Service

Name of the organization Chamber of Commerce of the USA

Employer identification 53-0045720

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question number, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and questions about donor/donor advisor information.

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 3 columns: Question number, Description, and Held at the End of. Rows include purpose(s) of conservation easements, total number and acreage, and monitoring details.

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

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

Table with 3 columns: Question number, Description, and Amount. Rows include questions about reporting works of art and historical treasures.

a Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____
b Assets included in Form 990, Part X ▶ \$ _____

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 52283D Schedule D (Fo

Schedule D (Form 990) 2021

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its colle
items (check all that apply):
a Public exhibition
b Scholarly research
c Preservation for future generations
d Loan or exchange programs
e Other
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in
Part XIII.
5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar
assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . . Yes

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not
included on Form 990, Part X? Yes
b If "Yes," explain the arrangement in Part XIII and complete the following table:
c Beginning balance
d Additions during the year
e Distributions during the year
f Ending balance
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . Yes
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Table with 2 columns: Description, Amount. Rows 1c, 1d, 1e, 1f.

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

Table with 6 columns: (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) F. Rows 1a-1g.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
a Board designated or quasi-endowment
b Permanent endowment
c Term endowment
The percentages on lines 2a, 2b, and 2c should equal 100%.
3a Are there endowment funds not in the possession of the organization that are held and administered for the
organization by:
(i) Unrelated organizations
(ii) Related organizations
b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?
4 Describe in Part XIII the intended uses of the organization's endowment funds.

Table with 2 columns: Description, Amount. Rows 3a(i), 3a(ii), 3b.

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

Table with 5 columns: Description of property, (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Bo. Rows 1a Land, b Buildings.

		10,700,000	10,700,000
c Leasehold improvements		904,921	904,921
d Equipment		4,837,200	4,837,200
e Other		3,083,901	3,083,901

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

Schedule D (Fo

Schedule D (Form 990) 2021

Part VII Investments - Other Securities.

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization: Chamber of Commerce of the USA Employer identification number: 53-0045720

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

Table with 6 columns: (a) Region, (b) Number of offices in the region, (c) Number of employees, agents, and independent contractors in the region, (d) Activities conducted in region (by type), (e) If activity listed in (d) is a program service, describe specific type of service(s) in the region, (f) Total expenditures for and investments in the region. Includes sub-totals and totals for 2021.

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 50082W Schedule F (Form 990) 2021

Schedule F (Form 990) 2021

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

Table with 8 columns: (a) Name of organization, (b) IRS code section and EIN (if applicable), (c) Region, (d) Purpose of grant, (e) Amount of cash grant, (f) Manner of cash disbursement, (g) Amount of noncash assistance, (h) Description of noncash assistance.

SCHEDULE G (Form 990)

Supplemental Information Regarding Fundraising or Gaming Activities

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

Department of the Treasury Internal Revenue Service

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

Name of the organization: Chamber of Commerce of the USA; Employer identification number: 53-0045720

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

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
a Mail solicitations
b Internet and email solicitations
c Phone solicitations
d In-person solicitations
e Solicitation of non-government grants
f Solicitation of government grants
g Special fundraising events
2a Did the organization have a written or oral agreement with any individual...
b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements...

Table with 5 main columns: (i) Name and address of individual or entity (fundraiser), (ii) Activity, (iii) Did fundraiser have custody or control of contributions?, (iv) Gross receipts from activity, (v) Amount paid to (or retained by) fundraiser listed in col. (i). Includes entries for Stacey R Lukens and Carol Hallett.

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

Schedule G (Form 990) 2021

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

		(a) Event #1	(b) Event #2	(c) Other events	(a)
		(event type)	(event type)	(total number)	
Revenue	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d)				▶
	11 Net income summary. Subtract line 10 from line 3, column (d)				▶

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$5,000 of gaming revenue on Form 990-EZ, line 6a.

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

9 Enter the state(s) in which the organization conducts gaming activities: _____
a Is the organization licensed to conduct gaming activities in each of these states? [

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? [

b If "Yes," explain: _____

Schedule G (Form

Schedule G (Form 990) 2021

11 Does the organization conduct gaming activities with nonmembers? [

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? [

13 Indicate the percentage of gaming activity conducted in:

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

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

Name ► -----

Address ► -----

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? [

b If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____.

c If "Yes," enter name and address of the third party:

Name ► -----

Address ► -----

16 Gaming manager information:

Name ► -----

Gaming manager compensation ► \$ -----

Description of services provided ► -----

Director/officer

Employee

Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

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

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

Return Reference

Explanation

Schedule G (Form

Schedule J (Form 990)

Compensation Information

OMB No. 1545-0047

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

2021
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
Chamber of Commerce of the USA

Employer identification number
53-0045720

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.
1b If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above?
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director.
4a Receive a severance payment or change-of-control payment?
4b Participate in, or receive payment from, a supplemental nonqualified retirement plan?
4c Participate in, or receive payment from, an equity-based compensation arrangement?
5a The organization?
5b Any related organization?
6a The organization?
6b Any related organization?
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6?
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)?
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 50053T Schedule J (Form 990) 2021

Schedule J (Form 990) 2021

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

Table with 7 columns: (A) Name and Title, (B) Breakdown of W-2, 1099-MISC compensation, and/or 1099-NEC (subdivided into Base, Bonus & incentive, and Other reportable compensation), (C) Retirement and other deferred compensation, (D) Nontaxable benefits, (E) Total compensation. Rows include Thomas J Donohue, Suzanne P Clark, Agnes Warfield-Blanc, and Justin Waller.

	(i)	(ii)	(i)	(ii)	(i)	(ii)	(i)	(ii)
EVP, COO	----- 0	----- 0	1,300,000 ----- 0	1,100 ----- 0	30,750 ----- 0	3,150 ----- 0	4 ----- -	----- -
5 Myron Brilliant EVP & Head Intl	588,129 ----- 0	----- 0	1,300,000 ----- 0	0 ----- 0	42,100 ----- 0	29,535 ----- 0	1 ----- -	----- -
6 David T Hirschmann Pres/CEO, CCMC/GIPC/C_Tec	600,000 ----- 0	----- 0	1,100,000 ----- 0	0 ----- 0	32,000 ----- 0	1,362 ----- 0	1 ----- -	----- -
7 John Wood SVP, Gnl Cnsl/CLO & Secry	406,570 ----- 0	----- 0	600,000 ----- 0	594,423 ----- 0	18,850 ----- 0	7,408 ----- 0	1 ----- -	----- -
8 Neil Bradley EVP & Chief Policy Officer	627,244 ----- 0	----- 0	650,000 ----- 0	0 ----- 0	30,450 ----- 0	27,250 ----- 0	1 ----- -	----- -
9 Martin Durbin Pres, GEI & SVP Policy	538,629 ----- 0	----- 0	500,000 ----- 0	0 ----- 0	18,850 ----- 0	29,062 ----- 0	1 ----- -	----- -
10 Harold Kim President of ILR	487,283 ----- 0	----- 0	500,000 ----- 0	0 ----- 0	30,450 ----- 0	30,238 ----- 0	1 ----- -	----- -
11 Stan M Harrell SVP & CFO	263,998 ----- 0	----- 0	210,000 ----- 0	567,308 ----- 0	4,700 ----- 0	1,926 ----- 0	1 ----- -	----- -
12 Michelle Russo Chief Comms Officer	589,218 ----- 0	----- 0	400,000 ----- 0	0 ----- 0	18,850 ----- 0	30,358 ----- 0	1 ----- -	----- -
13 Thomas Quadman EVP, CCMC, Sr Advisor to Pres/CEO	484,415 ----- 0	----- 0	200,000 ----- 0	0 ----- 0	30,450 ----- 0	33,355 ----- 0	1 ----- -	----- -
14 John Howard SVP, Govt Affairs	489,585 ----- 0	----- 0	165,000 ----- 0	0 ----- 0	30,450 ----- 0	26,127 ----- 0	1 ----- -	----- -
15 Stefan Freiberg CFO	303,743 ----- 0	----- 0	0 ----- 0	0 ----- 0	10,462 ----- 0	23,594 ----- 0	1 ----- -	----- -

Schedule L
(Form 990)

Transactions with Interested Persons

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.**
 ▶ **Attach to Form 990 or Form 990-EZ.**
 ▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Department of the Treasury
Internal Revenue Service

Name of the organization Chamber of Commerce of the USA	Employer identification 53-0045720
--	--

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only).
 Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958. ▶ \$ _____
 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ _____

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26; or if the reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?	
			To	From			Yes	No	Yes	No
Total						▶ \$				

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purp

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction
(1) Schedule B number 44	Substantial contributor	578,025	Public & legal policy consult
(2) Schedule B number 47	Substantial contributor	164,833	Public policy consulting
(3) Schedule B number 183	Substantial contributor	140,000	Public & legal policy consult

(4) Schedule B number 247	Substantial contributor	273,857	Policy & legal services
(5) Schedule B number 375	Substantial contributor	162,021	Public & legal policy consult
(6) Schedule B number 440	Substantial contributor	150,000	Public policy consulting
(7) Schedule B number 448	Substantial contributor	690,549	Public policy & accounting
(8) Schedule B number 521	Substantial contributor	155,440	Legal policy consulting
(9) Schedule B number 529	Substantial contributor	262,500	Legal policy consulting
(10) Schedule B number 538	Substantial contributor	1,057,186	Consulting services
(11) Schedule B number 591	Substantial contributor	566,016	Public & legal policy consult
(12) Schedule B number 658	Substantial contributor	459,325	Policy & legal services
(13) Schedule B number 663	Substantial contributor	180,000	Public & legal policy consult
(14) Schedule B number 680	Substantial contributor	601,874	Legal policy consulting
(15) Schedule B number 681	Substantial contributor	220,000	Legal policy consulting
(16) Schedule B number 703	Substantial contributor	175,000	Legal policy consulting
(17) Schedule B number 745	Substantial contributor	769,178	Public & legal policy consult
(18) Schedule B number 748	Substantial contributor	893,434	Legal policy consulting
(19) Schedule B number 749	Substantial contributor	210,000	Legal policy consulting
(20) Schedule B number 794	Substantial contributor	270,025	Policy & legal services
(21) Schedule B number 810	Substantial contributor	115,000	Legal policy consulting
(22) Schedule B number 901	Substantial contributor	115,000	Legal policy consulting
(23) Schedule B number 908	Substantial contributor	229,417	Public & legal policy consult
(24) Schedule B number 972	Substantial contributor	186,755	Public & legal policy consult
(25) Schedule B number 1035	Substantial contributor	551,526	Public & legal policy consult
(26) Schedule B number 1036	Substantial contributor	425,000	public policy consulting
(27) Schedule B number 1039	Substantial contributor	695,837	Public & legal policy consult
(28) Schedule B number 1046	Substantial contributor	452,944	Public & legal policy consult
(29) Schedule B number 1155	Substantial contributor	827,894	Insurance services
(30) Schedule B number 1174	Substantial contributor	263,331	Public policy consulting
(31) Schedule B number 1280	Substantial contributor	901,231	Policy & legal services

efile Public Visual Render | **ObjectId: 202233159349302828 - Submission: 2022-11-11** | **T**

SCHEDULE O
(Form 990)

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.

Department of the Treasury
Internal Revenue Service

Name of the organization
Chamber of Commerce of the USA

Employer identific
53-0045720

Return Reference	Explanation
Form 990, Part IV Question 12	Auditing of financial statements The Chamber of Commerce of the USA is the parent organization in the audited financial statements of the Chamber of Commerce of the USA. Schedule R lists additional related organizations consolidated financial statements.
Form 990 Part V Item 1a	Number reported on 1096 Chamber of Commerce of the USA is part of a consolidated treasury function with affiliated organizations. The Chamber of Commerce of the USA handles these consolidated payments. The number in box 1099s that the Chamber of Commerce of the USA would have issued without participating in a consolidated tre:
Form 990 Part V Item 2a	Number reported on W-3 The Chamber of Commerce of the USA is part of a consolidated payroll function with affiliated organizations. The Chamber of Commerce of the USA controls the payments of wages as a section 3401(d) state the employees of affiliated entities. The number in box 2a is the number of the Chamber of Commerce of the USA reported on Form W-3 by the Chamber of Commerce of the USA.
Form 990, Part VI, Section B, line 11b	In accordance with the Audit Committee charter, the draft Form 990 was provided in advance to the Audit Committee reviewed individually with each member prior to filing. The Audit Committee performs this function pursuant to a Board of Directors. The board receives the most recently completed tax return at the next regularly scheduled meeting reviewed by an independent accounting firm.
Form 990, Part VI, Section B, line 12c	We annually notify staff of the Standards of Conduct and Ethics policy, which includes a requirement that any relationship that is reasonably expected to give rise to an actual or apparent conflict of interest be brought to the supervisor, a senior manager in the Talent Solutions department or the Office of the General Counsel. In addition, an annual written questionnaire to all members of the board of directors asking for information on potential conflicts gathered by the Chief Financial Officer. All reports of potential conflicts will be evaluated by the Chief Legal Officer, Counsel, who serves as the Chamber of Commerce of the USA's Ethics Officer, in consultation with other senior staff, as appropriate. Any conflicts of interest involving board members or staff are resolved in accordance with the Chamber of Commerce of the USA's conflicts of interest policies.
Form 990, Part VI, Section B, line 15	Part VI Question 15a The process for determining the total compensation of the President and CEO is as follows: and CEO has a written employment agreement with the Chamber of Commerce of the USA. Total compensation annually by an independent compensation consultant. The consultant prepares a compensation study primarily based on available, Forms 990 and surveys of comparable organizations with similar positions. Based on this information, total compensation is determined by the Chamber of Commerce of the USA's Compensation and Succession Committee on an annual basis. Question 15b The process for determining total compensation for the officers and key employees is as follows: for individuals reporting to the President and CEO is reviewed annually by an independent compensation consultant. The consultant prepares a compensation study primarily utilizing, as available, Forms 990 and surveys of comparable similar positions. Based on this information, total compensation is determined by the Chamber of Commerce of the USA's Compensation and Succession Committee on an annual basis. Compensation for other individuals is determined based on available data, and approved by their supervisor and the Senior Vice President, Talent Solutions USCC and USCCF.
Form 990, Part VI, Section C, line 19	The Form 990 is made available to any member of the public who requests a copy. Any requestor is forwarded to the Director of Finance of the Chamber of Commerce of the USA, who will forward a copy of the document to the requestor. The organization's governing documents, conflict of interest policy, and financial statements are not made available to the public.
Form 990, Part VII, Section A and Sch J, Part II:	Thomas J. Donohue - The compensation for Mr. Donohue included his bonus payment for 2020 activities and his bonus payment for 2021 activities, both of which were paid to him in 2021.
Form 990, Part IX, line 11g	Policy and business consultants 22431829. Temp Salaries and recruiting costs 1441502. Media consultants 87
Form 990, Part XI, line 9:	Minimum Pension Reserve Liability Adjustment 17744751. Minimum Post Retirement Reserve Liability Adjustment 17744751. Global Private Ltd Results (Separate foreign corporation) 58768. Other -549.

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

Cat. No. 51056K

**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.**
 ▶ **Attach to Form 990.**
 ▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Department of the Treasury
Internal Revenue Service

Name of the organization Chamber of Commerce of the USA	Employer identification 53-0045720
--	--

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	
(1) ChamberBiz 1615 H ST NW Washington, DC 20062 54-1960202	Small business web portal (inactive)	DC	0	0	Chamber c
(2) CC1 LLC 1615 H ST NW Washington, DC 20062 81-3401471	To enhance bilateral trade between India and USA	DE	4,770,511	0	Chamber c
(3) CC2 LLC 1615 H ST NW Washington, DC 20062 81-3413687	Holding company for Indian Company	DE	0	1,537	Chamber c
(4) Article III Films LLC 1615 H ST NW Washington, DC 20062 26-3139751	Film Production	DE	0	0	Chamber c

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because related tax-exempt organizations during the tax year.

(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))	Dir
(1) US Chamber of Commerce Foundation 1615 H St NW Washington, DC 20062 46-1561597	Promotes understanding of public affairs issues affecting business	DE	501(c)(3)	7	Chambe the USA
(2) Center for International Private Enterprise 1155 15th St NW Washington, DC 20005 52-1398742	Promotes democracy through private enterprise and market reform.	DC	501(c)(3)	7	Chambe the USA

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 50135Y **Sche**

Schedule R (Form 990) 2021

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

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

--	--	--	--	--	--	--	--	--	--

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) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets
(1)USIBC Global Private Limited Jeevan Bharti Branch New Dehli IN	To enhance bilateral trade between India and USA	IN	CC2 LLC	C	1,106,221	208,771
(2)Madison County Record 1615 H St NW Washington, DC 20062 20-1452063	Newspaper publishing	DE	Chamber of Commerce of the USA	C	66,052	69,107

Sche

Schedule R (Form 990) 2021

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

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

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 Gift, grant, or capital contribution to related organization(s)
- c Gift, grant, or capital contribution from related organization(s)
- d Loans or loan guarantees to or for related organization(s)
- e Loans or loan guarantees by related organization(s)

- f Dividends from related organization(s)
- g Sale of assets to related organization(s)
- h Purchase of assets from related organization(s)
- i Exchange of assets with related organization(s)
- j Lease of facilities, equipment, or other assets to related organization(s)

- k Lease of facilities, equipment, or other assets from related organization(s)
- l Performance of services or membership or fundraising solicitations for related organization(s)
- m Performance of services or membership or fundraising solicitations by related organization(s)
- n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o Sharing of paid employees with related organization(s)

- p Reimbursement paid to related organization(s) for expenses
- q Reimbursement paid by related organization(s) for expenses

- r Other transfer of cash or property to related organization(s)
- s Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining
(1)Center for International Private Enterprise	Q	2,188,811	Reimb for benefits costs
(2)US Chamber of Commerce Foundation	C	2,135,993	Actual expense
(3)US Chamber of Commerce Foundation	R	11,288	Calculated interest
(4)US Chamber of Commerce Foundation	N	2,330,000	Cost allocation discounted 33%
(5)US Chamber of Commerce Foundation	O	8,445,081	Actual salaries & benefit alloc
(6)US Chamber of Commerce Foundation	Q	383,436	Actual expense
(7)US Chamber of Commerce Foundation	P	537,625	Alloc amt actual cost
(8)USIBC Global Private Limited	M	1,106,221	Purchase of svcs plus 9% fee
(9)Madison County Record	B	2,592,053	Actual expense

Sche

