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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Open to Public

OMB No 1545-0047

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

Inspection

<u>A</u>	For the	e 2009 calendar year, or tax year beginning $$ SEP 1 , $$ 2009 $$ and en	iding A	<u>UG 31, 2010</u>	
В	Check if applicable	le Please use IRS C Name of organization		D Employer identifie	cation number
	Addre	ess label or MCDDIICO TNG			
	Name	type		39-1	306894
	Initial return	See Number and street (or P.O. box if mail is not delivered to street address) Ro	om/suite	E Telephone number	
	Termi	Specific P.O. BOX 6190		715-	845-6231
	Amen return	City or town, state or country, and ZIP + 4		G Gross receipts \$	<u>571,987.</u>
	Application pendication	WAUSAU, WI 34402-0130		H(a) Is this a group re	
	pendi	F Name and address of principal officer JEFF ZRINY		for affiliates?	Yes X No
_		SAME AS C ABOVE		H(b) Are all affiliates inc	luded? Yes No
		empt status: X 501(c) (3) ◀ (insert no) 4947(a)(1) or 527			list (see instructions)
_		te: ► WWW.MCDEVCO.ORG		H(c) Group exemption	
_	art I	forganization: X Corporation Trust Association Other ► Summary	<u> L Year c</u>	of formation: 1978 N	1 State of legal domicile: WI
	1	Briefly describe the organization's mission or most significant activities. FOSTEF	R LOC	AL BUSINESS	
Governance		COMPETITIVENESS, ENTREPRENEURIAL DEVELOPME	ENT A	ND THE RECR	UITMENT OF
r ng	2	Check this box If the organization discontinued its operations or disposed	d of more	than 25% of its net as	sets.
ŏ	3	Number of voting members of the governing body (Part VI, line 1a)		3	<u> 18</u>
<u>م</u>	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	18
es	5	Total number of employees (Part V, line 2a)		. 5	0
Activities &	1	Total number of volunteers (estimate if necessary)		6	25
Act	1	Total gross unrelated business revenue from Part VIII, column (C), line 12		. 7a	114,691.
_	b	Net unrelated business taxable income from Form 990-T, line 34	. 1	7b	2,843.
		RECEIVED	7 ⊢	Prior Year	Current Year
Ģ	8	Contributions and grants (Part VIII, line III)	∤	129,293.	325,373.
Revenue	9	Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4 and 7d) AN 1 8 2011	{	231,792.	231,866.
æ	10	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	;	20,546.	14,748.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 42)	i H	381,631.	571,987.
_		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<u> </u>	301,031.	3/1,70/.
	1	Benefits paid to or for members (Part IX, column (A), line 4)	-		
v	1	Salanes, other compensation, employee benefits (Part IX, column (A), lines 5-10)			·
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)			
ē	ь	Total fundraising expenses (Part IX, column (D), line 25)			
ũ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		463,703.	513,525.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		463,703.	513,525.
	19	Revenue less expenses. Subtract line 18 from line 12		-82,072.	58,462.
Net Assets or				inning of Current Year	End of Year
Sset	20	Total assets (Part X, line 16)		11,336,049.	6,488,659.
et C	21	Total liabilities (Part X, line 26)		11,001,170.	6,095,318.
	22	Net assets or fund balances Subtract line 21 from line 20		334,879.	393,341.
~	art II	Signature Block Under penalties of perjury, I declate that I have examined this return, including accompanying schedules and st	tatamanta a	nd to the best of my knowled	no and heliaf it is true powers
ij		and complete Declaration of prefarer (other than officer) is based on all information of which preparer has any t	knowledge	ind to the best of my knowledg	ge and belief, it is tide, confect,
- 	_	Tal VI		- I dulu	
ور <u>دي</u> درنال	, . , .	Signature of officer		Date	
Z		TODD HAGEBORN			
SO ANNA SO		Type or print name and title			
Ğ		Preparer's Date			ar's identifying number
CRAI	α .	signature BRIAN SCHLAGENHAFT, CPA 01/11/	/ 1 1 self	oloyed	structions)
	parer's	Firm's name (or WIPFLI LLP yours if		EIN ►	
use	Only	self-employed), PO BOX 8010			
_		address, and ZIP + 4 WAUSAU, WI 54402-8010		Phone no. ► 7	15-845-3111
Ma	y the II	RS discuss this return with the preparer shown above? (see instructions)			X Yes No

	rt III Statement of Program Service Accomplishments	<u>-</u>
1	Briefly describe the organization's mission:	
	FOSTER LOCAL BUSINESS COMPETITIVENESS, ENTREPRENEURIAL DEVELOPMENT AND	
	THE RECRUITMENT OF OUTSIDE COMPANIES TO MARATHON COUNTY.	
2	Did the organization undertake any significant program services during the year which were not listed on	
	the prior Form 990 or 990-EZ?	0
3	If "Yes," describe these new services on Schedule O Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X N	io
•	If "Yes," describe these changes on Schedule O.	Ü
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses	
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and	
	allocations to others, the total expenses, and revenue, if any, for each program service reported.	
4a	(Code.) (Expenses \$ 121,274. including grants of \$) (Revenue \$ 117,175.	,)
	COSTS TO ADMINISTER ECONOMIC DEVELOPMENT LOANS, INCLUDING INTEREST	
	EXPENSE, LEGAL FEES, PROVISION FOR LOAN LOSSES, AND OTHER ADMINISTRATIVE FEES. REVOLVING LOAN FUND IS AN ACCESSIBLE SOURCE OF	
	FINANCING FOR PROJECTS THAT WILL CREATE AND RETAIN PRIVATE SECTOR JOBS,	
	INCREASE INCOMES, EXPAND LOCAL TAX BASE AND LEVERAGE BANK FINANCING.	
4b	(Code:) (Expenses \$ 112,000 . including grants of \$) (Revenue \$	
	MARATHON COUNTY BRANDING PROJECT WAS IMPLEMENTED IN ORDER TO CREATE AN	
	IMAGE TO APPEAL TO AND TO ENTICE VISITORS, RESIDENTS, THE CREATIVE	
	CLASS, ECONOMIC DEVELOPMENT, THE ARTS, AND A BETTER EDUCATION STYSTEM.	
	RESEARCH WAS CONDUCTED INTO THE COMMUNITY'S MOST RELEVANT AND DISTINCT CHARACTERISTICS THAT MAKE IT UNIQUE IN THE REGION. WE ARE WORKING TO	
	DETERMINE HOW TO BEST POSITION THE COMMUNITY TO NEWCOMERS.	_
		_
		_
		_
4c	(Code.) (Expenses \$ including grants of \$) (Revenue \$)
		_
4d	Other program services (Describe in Schedule O.)	
46	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ▶ \$ 233,274.	—
70	I OLGI DI CANGLINI SCI VILCE CANGLISES F 3 4JJ, 4/14 •	

Form **990** (2009)

1 Is the organization described in section \$51(c)(3) or 4947(a)(1) (other than a private foundation)? 1		•		Yes	No
2 Is the organization required to complete Schedule B, Schedule C, Contributions? Did the organization range in direct or undered political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II Section 501(c)(3) organizations. Did the organizations is the organizations under the organizations are section 501(c)(4), 501(c)(5), 401(c)(5), 401(c)(5)	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
3 bit 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 II Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II 5 Section 501(c)(3), 501(c)(5), and 501(c)(6) organizations. Is the organization in the section 603(d) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part II 6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts where donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV 8 Did the organization report an amount in Part X, line 21, 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 Did the organization assets in Part X, line 21, 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 10 Did the organization sharp of the following questions "Yes"? If so, complete Schedule D, Part IV 11 Si the organization sharp of the following questions "Yes"? If so, complete Schedule D, Part X, line 16? If "Yes," complete Schedule D, Part X, line 16? If "Yes," complete Schedule D, Part X, line 16? If "Yes," complete Schedule D, Part X, line 16? If "Yes," complete Schedule D, Part X, line 16? If "Yes," complete Sc		If "Yes," complete Schedule A	1	X	
public office? // "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organizations engage in lobbying activities? // "Yes," complete Schedule C, Part II Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 603(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 603(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 603(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization requirement and proxy tax? // "Yes," complete Schedule C, Part III Did the organization receive or hold a conservation easement, including easements to preserve open paace, the environment, historic land areas, or historic situations of the organization maintain collections of works of art, historical treasures, or other similar assets? // "Yes," complete Schedule D, Part IV Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debit management, credit repair, or debit negotation services? // "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? // "Yes," complete Schedule D, Part VI Is the organization and an amount for land, buildings, and equipment in Part X, line 10? // "Yes," complete Schedule D, Part VI Did the organization report an amount for investments or the securities in Part X, line 10 that is 5% or more of its total assets reported in Part X, ine 16? // "Yes," complete Schedule D, Part VI Did the organization report an amount for other sestins in Part X, line 13 that is 5% or more of its total assets reported in Part X, ine 16? // "Yes," complete Schedule D, Part X, VI Did the organization report an amount for other sestins in Part X, line 15 that is 5% or more of its total assets reported in Part X, ine 16? // "Yes," complete Schedule D, Part X, VI Did the organization report an am	2	is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
4 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 603(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 603(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 603(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 603(c)(4), 501(c)(5), and 501(c)(6) organization are used to the organization subject to the section 603(c) onto a subject to the section 603(c	3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? if "Yes," complete Schedule C, Part III 6 Did the organization maintain any donor advised funds or any similar funds or accounts where 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 II 7 Did the organization did areas, or historic structure? If "Yes," complete Schedule D, Part II 8 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or dobt negotiation services? If "Yes," complete Schedule D, Part IV 9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or dobt negotiation services? If "Yes," complete Schedule D, Part IV 10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? 11 If yes, "complete Schedule D, Part VIII" is the organization report an amount for lind, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VIII is be organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII 12 Did the organization report an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part VIII 13 Did the organization oreport an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part X III 14 Did the organization oreport an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part X III 15 Did the organization is separate or consolidated financial statements for the tax year? If Yes, "complete Schedule D, Part X III 16 Did the organization is separate or other liabilities in Part X, line 15?		public office? If "Yes," complete Schedule C, Part I	3		_X_
reporting requirement and proxy tax/ If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part II 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 III Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit courseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization is part V Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Part VII, Is the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for investments - other securities 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 Did the organization report an amount for other liabilities 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 XIII Did the organization separate or consolidated financial statements for the tax year? If Yes, complete Schedule D, Part XIII Did the organization o	4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		_X_
6 Did the organization maintain any donor advised funds or accounts? If "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easiement, including easiements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Pot the organization receive or hold a conservation easiement, including easiements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Pot the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV Pot the organization report an amount in Part X, line 21, serve as a custodian for amounts not histed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Pot the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Part IV Pot the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Part VI Pot the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI Pot the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI Pot the organization report an amount for other assets 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 IV Pot Did the organization report an amount for other assets in Part X, line 15? If all its 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X Pot Did the organization report an amount for other assets in Part X, line 15? If Yes, "complete Schedule D, Part X Pot Did the organization report an amount for other labilities in Part X, line 15? If Yes, "complete Schedule D, Part X Pot Did the organization obtain a separate, indep	5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
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the environment, histonic land areas, or histonic structures? If "Yes," complete Schedule D, Part II		provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		_X_
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV Did the organization report an amount in Part X, line 21, 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 Did the organization diversity or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V II is the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V II Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for investments - other securities 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 Did the organization report an amount for other liabilities 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 VIII Did the organization report an amount for other liabilities 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 X X Did the organization separate or consolidated financial statements for the tax year include a footnote that addresses the organization separate or consolidated financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," lower part and the part X in the part X in the part X in the organization obtain separate, independent audited financial statements for the tax year? If "Yes," lower part X X Did t	7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
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9 Did the organization report an amount in Part X, line 21, 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 10 Did the organization, developed provided p	8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
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10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 1 Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII 10 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 11 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 12 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 XIII 13 Did the organization is separate or consolidated financial statements for the tax year reported in Part X, line 16? If "Yes," complete Schedule D, Part X IX, line 17 Yes," complete Schedule D, Part X IX, line 17 Yes," complete Schedule D, Part X IX, line 18 that its 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X IX I	9				
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14a Did the organization maintain an office, employees, or agents outside of the United States? b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1 and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 20 X	13		13		X
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16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 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 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 20 X	15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
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17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 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 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 20 X	16 ⁻	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
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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 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 20 X	17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
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19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 20 X	18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
complete Schedule G, Part III 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 20 X		1c and 8a? If "Yes," complete Schedule G, Part II	18		X
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H	19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
		complete Schedule G, Part III	19		
	20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H			

	•	1	Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21_		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	ŀ		
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			.,
04-	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	04-		v
h	Schedule K If "No", go to line 25 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a		X
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24b		
	any tax-exempt bonds?	24c		
А	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	240		
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		
	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		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was	00-		v
29	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c	Х	X
29 30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29	Λ	
-	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?	00		
	If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	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, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	:		
	If "Yes," complete Schedule R, Part V, line 2	35		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		_X_
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	_		37
20	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 11 and 19?	_	, l	
	Note. All Form 990 filers are required to complete Schedule O	38	X	

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	US Information Returns Enter 0 if not applicable 1a 2			:
b	Enter the number of Forms W 2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			ł
	filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			1
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country ▶			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and			
	Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			
	Tax Shelter Transaction?	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?	6a		X
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).			
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		X
	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		X
	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f_		X
_	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		 -
_	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		├
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the			
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings	_		
9	at any time during the year?	8_		
	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	00		-
	Did the organization make a distribution to a donor, donor advisor, or related person?	9a		
10	Section 501(c)(7) organizations. Enter	9b		-
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against			
~	amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charatable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			

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

Sec	tion A. Governing Body and Management					
	•				Yes	No
1a	Enter the number of voting members of the governing body	1a	18			
b	Enter the number of voting members that are independent	1b	18			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with any other	r			
	officer, director, trustee, or key employee?			2		_X_
3	Did the organization delegate control over management duties customarily performed by or under th	e direct supervi	sion			
	of officers, directors or trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its organizational documents since the prior Fo	rm 990 was filed	d?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's asse	ts?		5		X
6	Does the organization have members or stockholders?			6	Х	
7a	Does the organization have members, stockholders, or other persons who may elect one or more me	embers of the				
	governing body?			7a	X.	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other per	rsons?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken	during the year				
	by the following:					
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ched at the				
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenue Code)				
					Yes	No
10a	Does the organization have local chapters, branches, or affiliates?			10a		_X_
b	If "Yes," does the organization have written policies and procedures governing the activities of such	chapters, affiliat	tes,			
	and branches to ensure their operations are consistent with those of the organization?			10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before f	ling the form?		11	X	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13			12a		X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that con	uld give rise				
	to conflicts?			12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? $\it lf$	"Yes," describe				
	ın Schedule O how this is done			12c		
13	Does the organization have a written whistleblower policy?			13		_X_
14	Does the organization have a written document retention and destruction policy?			14		_X_
15	Did the process for determining compensation of the following persons include a review and approve	al by independe	nt			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a		<u> </u>
þ	Other officers or key employees of the organization			15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions.)					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment with a				
	taxable entity during the year?			16a		<u> </u>
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluation to evaluate the organization of the organization of the organization adopted a written policy or procedure requiring the organization to evaluate the organization of the organi	lluate its particip	ation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the org	anızatıon's				
	exempt status with respect to such arrangements?			16b		
sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ►WI					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	Γ (501(c)(3)s only	y) avaılable	for		
	public inspection. Indicate how you make these available. Check all that apply					
	Own website Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, or	conflict of interes	st policy, ar	nd fina	ncial	
	statements available to the public			_		
20	State the name, physical address, and telephone number of the person who possesses the books a	nd records of th	ie organizat	ion 🕨	·	
	JEFF ZRINY - 715-845-6231					
	PO BOX 6190, WAUSAU, WI 54402-6190					

39-1306894

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

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

X Check this box if the organization did not compensate any current officer, director, or trustee

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. Use Schedule J-2 if additional space is needed

- 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. 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

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

(A) Name and Title	(B) Average	(C) Position						(D) Reportable	(E) Reportable	(F) Estimated
	hours	(cl	neck	allt	that	арр	ly)	compensation	compensation	amount of
	per week	e or director	stee			rsated	,	from the organization	from related organizations (W-2/1099-MISC)	other compensation from the
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		organization and related organizations
ROGER LUCE										
SECRETARY	5.00	X		X		L	L	0.	0.	0.
FRED LUNDIN	-	ŀ								
2ND VICE PRESIDENT	1.00	X		X		<u> </u>		0.	0.	0.
ROGER ZIMMERMAN	ļ					1		1		
DIRECTOR	1.00	X				<u> </u>		0.	0.	0.
BETTYE NALL	Ì									
DIRECTOR	1.00	X	_	_		<u> </u>	L	0.	0.	0.
JOHN SMALL					ŀ					
DIRECTOR	1.00	X	L		<u> </u>	<u> </u>	<u> </u>	0.	0.	0.
JIM TIPPLE					ŀ					
DIRECTOR	1.00	X		_				0.	0.	0.
AL ERICKSON										
DIRECTOR	1.00	X						0.	0.	0.
RANDY BALK	1									
TREASURER	1.00	X	ļ	X		ļ	ļ	0.	0.	0.
JOHN LAEHN	İ								_	_
DIRECTOR	1.00	X						0.	0.	0.
LANE WARE	-	ļ					ł		_	-
PRESIDENT	1.00	X		X				0.	0.	0.
SCOTT PAGENKOPF		ł						_	_	_
DIRECTOR	1.00	X			_			0.	0.	0.
DIANE POSTLER-SLATTERY								_	_	_
DIRECTOR	1.00	X		<u> </u>	ļ	<u> </u>		0.	0.	0.
LORI WEYERS								_		_
DIRECTOR	1.00	X	ļ					0.	0.	0.
RICK SOCHA										_
FIRST VICE PRESIDENT	1.00	X	_	X		<u> </u>	L	0.	0.	0.
BOB STOEHR										
DIRECTOR	1.00	X	<u> </u>	├—	<u> </u>	ـ	<u> </u>	0.	0.	0.
HOOSHANG ZEYGHAMI										
DIRECTOR	1.00	X		<u> </u>		1	<u> </u>	0.	0.	0.
STEVE IMMEL								_	_	
DIRECTOR	1.00	<u> X</u>	L	<u> </u>	L.	<u> </u>		0.	0.	0.

Section A. Officers, Directors, Tr (A)	(B)	(C)					esi	(D)	(E)			(F)	
Name and title	Average hours	(c		Pos cali		app	ıly)	Reportable compensation	Reportable compensation	·	an	timate	of
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MIS()	com fr org and	other pensa om th anizat d relat	ation ie tion ted
KEITH LANGENHAHN	1 00	v						0					
DIRECTOR TODD NICKLAUS	1.00	X				┼	H	0.		0.			0.
DIRECTOR	1.00	х		-				0.		0.			0.
<u> </u>										_			
		ļ											
		ļ 		_					· <u>-</u>	-			
		ļ											
1b Total		<u>L</u>	L	L	L	>		0.	·	0.			0.
Total number of individuals (including but in compensation from the organization.)	not limited to th	nose	liste	ed al	bov	e) wi	10 r	eceived more than \$100	,,000 in reportable				<u> </u>
3 Did the organization list any former officer	•		, ke	y en	nplo	yee,	or h	nighest compensated er	nployee on			Yes	No
line 1a? If "Yes," complete Schedule J for 4 For any individual listed on line 1a, is the s	um of reportab	le c	•					•	the organization		3		X
and related organizations greater than \$15Did any person listed on line 1a receive or	accrue compe	nsat	ion f						ices rendered to		4		X
the organization? If "Yes," complete Sched Section B. Independent Contractors	dule J for such	pers	on								5		<u> X</u>
Complete this table for your five highest countries the organization	ompensated in	depe	ende	ent c	ont	racto	ors t	that received more than	\$100,000 of comp	ensa	ation f	rom	
(A) Name and business	s address							(B) Description of s	services	С	(C ompe		on
WAUSAU-MARATHON COUNTY C PO BOX 6190, WAUSAU, WI				MC	ME:	RCI	-	MANAGEMENT			22	0.0	00.
NORTH STAR DESTINATION S 220 DISSPAYNE DRIVE, NAS	TRATEGI	ES	ΓN	3′	72	14		BRANDPRINT P (BRANDING MA	1	112,00			
						<u>-</u>		-	_		_		 _
2 Total number of independent contractors \$100,000 in compensation from the organ	_	not li	mıte	d to		se la	stec	d above) who received n	nore than				

Form 990 (2009) 39-1306894 Page 9 MCDEVCO, INC. Part VIII Statement of Revenue (D) Revenue (A) (B) (C) Related or Unrelated Total revenue excluded from exempt function business tax under sections 512, 513, or 514 revenue revenue 1 a Federated campaigns 1a b Membership dues 1b c Fundraising events 1c Related organizations 1d 198,520. e Government grants (contributions) 1e All other contributions, gifts, grants, and 126,853 similar amounts not included above 1f 110,928. g Noncash contributions included in lines 1a-1f \$ 325,373. h Total. Add lines 1a-1f Business Code 2 a REVOLVING LOAN ADMIN 522299 231,866. 117,175. 114,691. Program Service f All other program service revenue 231,866. g Total. Add lines 2a-2f Investment income (including dividends, interest, and 14,748. 14,748. other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6 a Gross Rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) \triangleright (i) Securities 7 a Gross amount from sales of (II) Other assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Revenue including \$ contributions reported on line 1c). See Part IV, line 18 Other b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Business Code Miscellaneous Revenue 11 a d All other revenue e Total. Add lines 11a-11d 571,987. 117,175 | 114,691 | 14,748. Total revenue See instructions. 12

Part IX | Statement of Functional Expenses

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

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				·
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				_
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the US				
	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				
8	Pension plan contributions (include section 401(k)				
_	and section 403(b) employer contributions)				
9	Other employee benefits				·
10	Payroll taxes			-	
11	Fees for services (non-employees):				
a	, , , , , , , , , , , , , , , , , , ,	· - · · · · · · · · · · · · · · · · · · ·			
b	Legal	7,139.		7,139.	
C	Accounting	1,133.		1,139.	
	Lobbying Professional fundraising services. See Part IV, line 17				
					
f	Investment management fees Other	113,922.	112,000.	1,922.	
9 12	Other Advertising and promotion	13,300.	114,000.	13,300.	
12 13	Office expenses	802.		802.	
13 14	Information technology	3,150.		3,150.	
14 15	Royalties	3,130.		3,130.	
16	Occupancy	24,901.		24,901.	
17	Travel	972.		972.	
18	Payments of travel or entertainment expenses	<u> </u>		3,20	
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings		·		
20	Interest	117,587.	117,587.		•
21	Payments to affiliates	=: + = = : -			
22	Depreciation, depletion, and amortization	4,310.		4,310.	
23	Insurance				
24	Other expenses Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	A DACTATE CORD A OFFICE / OFFICE	223,696.	3,687.	220,009.	-,
b	TRAINING	2,662.		2,662.	
c	DUES & SUBSCRIPTIONS	1,084.		1,084.	····
d					
е					
f	All other expenses				
25	Total functional expenses Add lines 1 through 24f	513,525.	233,274.	280,251.	0
26	Joint costs. Check here ▶ ☐ If following				
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined	Ì			
	educational campaign and fundraising solicitation			į.	

Par	rt X	Balance Sheet			
		•	(A) Beginning of year		(B) End of year
	f	Cash - non-interest bearing		1	
	2	Savings and temporary cash investments	3,210,726.	_2_	1,200,699.
	3	Pledges and grants receivable, net		3_	
	4	Accounts receivable, net	66,257.	4	56,284.
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II			
		of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete			
		Part II of Schedule L		6	
ŧ	7	Notes and loans receivable, net	2,580,264.	7	2,580,264.
Assets	8	Inventories for sale or use		8	
Ř	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment. cost or other			· · · · · · · · · · · · · · · · · · ·
		basis. Complete Part VI of Schedule D 10a 1,138,550	<u>. </u>		
	b	Less. accumulated depreciation 10b 6,106	. 1,136,754.	10c	1,132,444.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program related See Part IV, line 11		13	
	14	Intangible assets .		14	
	15	Other assets See Part IV, line 11	4,342,048.	15	1,518,968.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	11,336,049.	16	6,488,659.
	17	Accounts payable and accrued expenses	62,325.	17	87,912.
	18	Grants payable .	0.55	18	4 050
	19	Deferred revenue	2,567.	19	1,362.
	20	Tax-exempt bond liabilities		20	
es	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees,			1
iat		highest compensated employees, and disqualified persons. Complete Part II	1		
_		of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	4 024 752	23	2 006 016
	24	Unsecured notes and loans payable to unrelated third parties	4,034,753.	24	3,886,816.
	25	Other liabilities Complete Part X of Schedule D	6,901,525.	25	2,119,228.
	26	Total liabilities. Add lines 17 through 25	11,001,170.	26	6,095,318.
		Organizations that follow SFAS 117, check here X and complete			,
ces		lines 27 through 29, and lines 33 and 34.	-2,245,385.		2 260 462
<u>a</u>	27	Unrestricted net assets	2,580,264.	27 28	-2,268,463. $2,661,804$.
Ba	28	Temporarily restricted net assets	2,300,204.	29	2,001,004.
pun	29	Permanently restricted net assets	-	_29_	
Ę.		Organizations that do not follow SFAS 117, check here and			
ō ģ	20	complete lines 30 through 34.		30	
set	30	Capital stock or trust principal, or current funds		31	
Net Assets or Fund Balances	31	Paid-in or capital surplus, or land, building, or equipment fund		32	
Net	32	Retained earnings, endowment, accumulated income, or other funds	334,879.	33	393,341.
	33	Total net assets or fund balances Total liabilities and net assets/fund balances	11,336,049.	34	6,488,659.
	34	rotal habilities and het assets/junu baldhices	1 11,000,047.	1 34	0, =00,000.

Form **990** (2009)

Form	990 (2009) MCDEVCO, INC. 39-130	6894	Pa	ge 12
Pa	rt XI Financial Statements and Reporting			
-	•		Yes	No
1	Accounting method used to prepare the Form 990			
	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	_	X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
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	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a	1 .		
	consolidated basis, separate basis, or both	İ		
	X Separate basis Consolidated basis Both consolidated and separate basis	1		
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			
	Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. Inspection

Employer identification number

		MCDEVCO	, INC.						39	<u>9-1306</u>	894	
Part I	Reason		ity Status (All organiz	ations mu	st complet	te this par	t.) See ins	tructions				
he organ	zation is not a	private foundation	because it is (For lines	1 through	11, check	only one b	ox)					
1 🔲	A church, coa	nvention of churches	s, or association of chur	ches desc	ribed in se	ction 170	(b)(1)(A)(i)).				
2	A school des	cribed in section 17	'0(b)(1)(A)(ii). (Attach Sc	hedule E.)								
з 🗀	A hospital or	a cooperative hospi	tal service organization (described	ın section	170(b)(1)	(A)(iii).					
4 🔲	A medical res	search organization (operated in conjunction	with a hos	pıtal desci	nbed in se	ction 170	(b)(1)(A)(ii	i). Enter t	he hospital	s name,	,
	city, and stat	e:										
5		on operated for the (b)(1)(A)(iv). (Comple	benefit of a college or u	niversity ov	wned or op	perated by	a governi	mental uni	t describe	ed in		
6 🗆			ent or governmental unr	t describer	d in coetic	n 470/bV:	()/ A)/ ₍₋₎					
7 🕱								r from the	gonoral r	aublio doco	abod in	
, ட	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)											
в 🗀	-		ection 170(b)(1)(A)(vi).	(Complete	Dort II)							
° =			eives (1) more than 33			rom contr	hutions m	aomharchu	n food or	d aross roc	ounto fra	
•	=	· · · · · · · · · · · · · · · · · · ·	* *							-	•	
	activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975											
	See section 509(a)(2). (Complete Part III)											
10			perated exclusively to te	et for publi	o cafoty S	San anatio	n E00/a\/	0				
11	_	•	-	•	•			•	v out the	DUIDOCOC O	f one or	
	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or											
	more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.											
	a Type I	· · ·	- ·	Typ	-		enrated		ط [Type III - C	ther	
e 🗀			it the organization is not	= -		•	-	r mora died	سا ت	•		
٠			han one or more publicly		•		•		-			
f			ten determination from t		-				λ(α)(1) 01 3	36011011 303	(a)(z).	
•		rganization, check th			10 10 10 1 y	pc i, typc	ii, or Type	, ,,,				
		•	irganization accepted ar	ay aift or co	ontribution	from any	of the follo	owing per	eone?		1	لــــا
g	_		rectly controls, either al	. •		•		• •			Yes i	No
		•	upported organization?	one or log	CUICI WILI	persons c	icscribed i	iii (ii) ai la (i	iii) DCiQVV,	11g(i)	163 1	110
	_		n described in (i) above?							11g(ii)		
		•	person described in (i)		2	•		•		11g(ii)		
h		•	about the supported or							119(11)		
"	1 TOVIGE THE I	ollowing information	about the supported of	garnzanom	(3).							
(1) Name	- (- · · · · · · · · · · · · · · · · ·	/** FIN	(iii) Type of	(iv) Is the c	rganization	(v) Did voi	i notify the	(vi) Is	the			
	of supported Inization	(ii) EIN	organization		sted in your			organizatio	on in col.	(vii) Am		
orga	meation		(described on lines 1-9 above or IRC section	governing	document?	(i) of you	support?	(i) organiz	.?	supp	JUI 1	
			(see instructions))	Yes	No	Yes	No	Yes	No			
								-				
		 										
		<u> </u>						·				
		<u> </u>										
											-	

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

Schedule A (Form 990 or 990-EZ) 2009

Schedule A (Form 990 or 990-EZ) 2009 MCDEVCO, INC. [Part II] Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I)

Sec	tion A. Public Support				-		
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not	į					
	ınclude any "unusual grants ")	18,525.	20,125.	92,161.	129,293.	325,373.	585,477.
2	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to						
	or expended on its behalf	}					
3	The value of services or facilities	į	İ				
	furnished by a governmental unit to						
	the organization without charge	Í					
4	Total. Add lines 1 through 3	18,525.	20,125.	92,161.	129,293.	325,373.	585,477.
5	The portion of total contributions	İ			,		
	by each person (other than a	i					
	governmental unit or publicly						
	supported organization) included	1					
	on line 1 that exceeds 2% of the	i					
	amount shown on line 11,	į į					
	column (f)	ļ					275,840.
	Public support. Subtract line 5 from line 4	<u> </u>					<u>309,637.</u>
	ction B. Total Support						
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Amounts from line 4	18,525.	20,125.	92,161.	129,293.	325,373.	585,477.
8	Gross income from interest,	1					
	dividends, payments received on	ı			-		
	securities loans, rents, royalties		24 555		00 546	4.4 5.40	455 065
	and income from similar sources	83,005.	34,666.	22,300.	20,546.	14,748.	175,265.
9	Net income from unrelated business	ı				-	
	activities, whether or not the					2 042	2 042
	business is regularly carried on		-			3,843.	3,843.
10	Other income Do not include gain	ı					
	or loss from the sale of capital	1					
	assets (Explain in Part IV)						764,585.
	Total support. Add lines 7 through 10 Gross receipts from related activities,	oto (oco instructio	l			12	760,024.
	First five years. If the Form 990 is for	•	•	A fourth or fifth to	. (•	700,024.
13	organization, check this box and stop	· ·	mst, second, time	z, ioditii, oi iiitii ta	ix year as a section	11 30 1(0)(3)	▶□
Sec	ction C. Computation of Publ		centage	· · · · · · · · · · · · · · · · · · ·			<u> </u>
	Public support percentage for 2009 (I		-	olumn (f))		14	40.50 %
	Public support percentage from 2008		•			15	23.67 %
	,, ,	· ·	•	line 13, and line 1	4 is 33 1/3% or m		
	16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						
b	b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box						
	and stop here. The organization quali	ifies as a publicly s	upported organiza	ation			▶□
17a	10% -facts-and-circumstances test	t - 2009.If the orga	inization did not ch	neck a box on line	13, 16a, or 16b, a	nd line 14 is 10%	or more,
	and if the organization meets the "fac				•		
	meets the "facts-and-circumstances"			•	•	3	▶□
b	10% -facts-and-circumstances test	t - 2008. If the orga	Inization did not ch	neck a box on line	13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets th						
	organization meets the "facts-and-circ	cumstances" test	The organization q	ualifies as a public	cly supported orga	ınızatıon	▶□
18	Private foundation. If the organizatio	n did not check a t	oox on line 13, 16a	a, 16b, 17a, or 17b	, check this box a	nd see instruction	s >

Part III Support Schedule for Section A. Public Support	Organizations	Described in	Section SUS(a	N≤J (Complete only	y if you checked the bo	ox on line 9 of Part I
Calendar year (or fiscal year beginning in)	(a) 2005	(P) 2006	(a) 2007	(4) 2008	(a) 2000	(n Total
1 Gifts, grants, contributions, and	(a) 2003	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
membership fees received (Do not						
include any "unusual grants ")						
2 Gross receipts from admissions,					-	
merchandise sold or services per-						
formed, or facilities furnished in						
any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that		 				
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities		 				
furnished by a governmental unit to						
the organization without charge		1				
6 Total. Add lines 1 through 5		·			 	
7a Amounts included on lines 1, 2, and					-	
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received					1	
from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						
Section B. Total Support		·k - · · ·				
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest,						
dividends, payments received on securities loans, rents, royalties				!		
and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses	;			1		
acquired after June 30, 1975				1		
c Add lines 10a and 10b						
11 Net income from unrelated business	;			1		
activities not included in line 10b, whether or not the business is						
regularly carried on						
12 Other income Do not include gain						
or loss from the sale of capital assets (Explain in Part IV)						
13 Total support (Add lines 9, 10c, 11, and 12)		ļ				
14 First five years. If the Form 990 is for	or the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a secti	on 501(c)(3) organiz	ation,
check this box and stop here			· · · · · · · · · · · · · · · · · · ·			>
Section C. Computation of Pub	lic Support Pe	rcentage				
15 Public support percentage for 2009	(line 8, column (f) d	livided by line 13, o	olumn (f))		15	
16 Public support percentage from 200				_	16	9
Section D. Computation of Inve	stment Incom	e Percentage			·· _• ····-	
17 Investment income percentage for 2	:009 (line 10c, colur	mn (f) dıvıded by lir	ne 13, column (f))		17	
18 Investment income percentage from	2008 Schedule A,	Part III, line 17			18	
19a 33 1/3% support tests - 2009. If th	e organization did r	not check the box	on line 14, and line	e 15 is more than	33 1/3%, and line 1	17 is not
more than 33 1/3%, check this box	and stop here. The	organization quali	fies as a publicly s	supported organiz	ation	▶□
b 33 1/3% support tests - 2008. If th	e organization did r	not check a box or	line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%,	and
line 18 is not more than 33 1/3%, ch	eck this box and st	t op here. The orga	nızatıon qualıfies a	as a publicly supp	orted organization	▶□
20 Private foundation. If the organizat	on did not check a	box on line 14, 19	a or 19h check th	nis hox and see in	structions	

Schedule D

Department of the Treasury

(Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

2009
Open to Public Inspection

Name of the organization

MCDEVCO, INC.

Employer identification number 39-1306894

Pai	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a	-	e used only
	for charitable purposes and not for the benefit of the donor o		-
	impermissible private benefit?	· · · · · · · · · · · · · · · · · · ·	Yes No
Pai		janization answered "Yes" to Form 990,	Part IV, line 7
1	Purpose(s) of conservation easements held by the organization	on (check all that apply)	
	Preservation of land for public use (e.g., recreation or p		storically important land area
	Protection of natural habitat		tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ed conservation contribution in the form	of a conservation easement on the last
_	day of the tax year.		
	, ··· ··· · · · · · · · · · · · · · ·		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements	•	2b
c	Number of conservation easements on a certified historic stru	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a		2d
3	Number of conservation easements modified, transferred, rel	**	
_	year ▶	, , ,	5
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per		
_	violations, and enforcement of the conservation easements if		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		during the year
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above		
	and section 170(h)(4)(B)(ii)?	, ,	Yes No
9	In Part XIV, describe how the organization reports conservati	on easements in its revenue and expens	se statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organizat	tion's financial statements that describes	s the organization's accounting for
	conservation easements		
Pa	rt III Organizations Maintaining Collections or	f Art, Historical Treasures, or C	Other Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116, no	t to report in its revenue statement and l	balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of pi	ublic service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these		
b	If the organization elected, as permitted under SFAS 116, to	report in its revenue statement and bala	nce sheet works of art, historical treasures,
	or other similar assets held for public exhibition, education, o	or research in furtherance of public service	ce, provide the following amounts relating to
	these items.	·	
	(i) Revenues included in Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Form 990, Part X		\$
2	If the organization received or held works of art, historical tre-	asures, or other similar assets for financi	
-	the following amounts required to be reported under SFAS 1		- •
а	Revenues included in Form 990, Part VIII, line 1	•	> \$
	Assets included in Form 990, Part X		> \$
_	- · · · · · · · · ·		·· · · · —

	dule D (Form 990) 2009 MCDEVCO								06894	
Par	t III Organizations Maintaining C	ollections of A	rt, Hist	orical Tr	easures, o	or Oth	er Simi	lar Asse	ts (contin	ued)
3	Using the organization's acquisition, accession	on, and other record	ds, check	any of the	following that	it are a s	ignifican	t use of its	collection	items
	(check all that apply)									
а	Public exhibition	c			hange progra	ams				
b	Scholarly research	e	, []	Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how th	ey further t	he organızatı	on's exe	mpt purp	oose in Par	t XIV	
5	During the year, did the organization solicit of	r receive donations	of art, his	storical trea	sures, or oth	er sımıla	r assets		_	
	to be sold to raise funds rather than to be ma								Yes	No_
Par	t IV Escrow and Custodial Arrang		ete if org	anızatıon ar	nswered "Ye	s" to For	m 990, F	art IV, line	9, or	
	reported an amount on Form 990, Par	t X, line 21								
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for o	contribution	s or other as	sets not	included	<u> </u>	_	
	on Form 990, Part X?								」Yes	L No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing t	able.				,		
							<u> </u>	<u> </u>	Amount	
	Beginning balance						1c			
d	Additions during the year						1d	ļ		
е	Distributions during the year						1e	-		
f	Ending balance						1f		_	
	Did the organization include an amount on Fo	orm 990, Part X, line	217					. L	」 Yes	LJ No
	If "Yes," explain the arrangement in Part XIV									
Par	t V Endowment Funds. Complete if				1				.	
		(a) Current year	(b) P	rior year	(c) Two yea	rs back	(d) Three	years back	(e) Four y	ears back
1a	Beginning of year balance							· · · · · ·		
b	Contributions									
С	Net investment earnings, gains, and losses									
	Grants or scholarships							 		
е	Other expenditures for facilities							,		
	and programs .									
f	Administrative expenses		-							
g	End of year balance		<u> </u>							
2	Provide the estimated percentage of the year	r end balance held a								
а	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
C		%					.			
за	Are there endowment funds not in the posse	ssion of the organiz	ation tha	it are neid a	na aaministe	erea for t	ne organ	ization	L.	/ N-
	by									es No
	(i) unrelated organizations							•	3a(i)	-
_	(ii) related organizations	hatad oo roomrad s	an Cabad	lula D2					3a(ii)	
	If "Yes" to 3a(ii), are the related organizations							•	3b	l
4 Par	T VI Investments - Land, Building				Part Y line	10				
rai		(a) Cost or o						tod	(d) Pools	
	Description of investment	basis (investi			or other (other)		ccumula preciatio		(d) Book	value
	Land	1,117,		54013			p. 0010110		1,117	000
	Land	1,11/	000.						<u> </u>	,000.
	Buildings				<u>-</u>					
	Leasehold improvements			າ	1,550.		6 1	106.	15	,444.
	Equipment Other				<u> </u>		0,.			, , , , , ,
	. Add lines 1a through 1e (Column (d) must e	gual Form 990. Port	X colum	on (R) line 1	10(c))				1,132	444
·vial		godin onni ooo, i all		(U), mic 1	U1U//					

Schedule D (Form 990) 2009 MCDEVCO, II	NC.		39	-1306894	Page 3
Part VII Investments - Other Securities. S	ee Form 990, Part X, line	12			
(a) Description of security or category (including name of security)	(b) Book value	Cos	(c) Method of valua st or end-of-year mark		
Financial derivatives					-
Closely-held equity interests					
Other					
				•	
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)	<u> </u>		·	 	
Part VIII Investments - Program Related.	See Form 990, Part X, line	e 13		· · · · · · · · · · · · · · · · · · ·	
(a) Description of investment type	(b) Book value	Con	(c) Method of valua		
			st or end-of-year mar	Tet value	
	 				
					
	 			 	
				•	
	 		· · · · ·	•	
			•		
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)					
Part IX Other Assets. See Form 990, Part X, line					
) Description			(b) Book va	
PROGRAM RELATED LOAN RECEIVAL	3 나도			1,518	<u>,968.</u>
	*				
			·		
Total. (Column (b) must equal Form 990, Part X, col (B) lin			•	1,518	<u>,968.</u>
Part X Other Liabilities. See Form 990, Part X	, line 25.	41.5			
1 (a) Description of liability		(b) Amount			
Federal income taxes		0 110 000			
DUE TO MUNICIPALITIES		2,119,228.			
			•		
	·				
Total. (Column (b) must equal Form 990, Part X, col (B) lin	ne 25) .	2,119,228.			

2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for

	edule D (Form 990) 2009 MCDEVCO, INC.				06894 Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 t	o Audited Fina	ncial St	atements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		571,987.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		513,525.
3	Excess or (deficit) for the year Subtract line 2 from line 1		3		58,462.
4	Net unrealized gains (losses) on investments		4		
5	Donated services and use of facilities		5		
6	Investment expenses		6		
7	Pnor period adjustments		7		
8	Other (Describe in Part XIV)		8	_	
9	Total adjustments (net) Add lines 4 through 8		9		0.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 a	and 9	10		58,462.
Pa	rt XII Reconciliation of Revenue per Audited Financial Statem	ents With Reve	enue pe	r Return	
1	Total revenue, gains, and other support per audited financial statements			1	571,987.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			1 1	
а	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
е	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	571,987.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
С	Add lines 4a and 4b			4c	0.
_5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	571,987.
Pa	rt XIII Reconciliation of Expenses per Audited Financial Stater	nents With Exp	enses p	er Return	
1	Total expenses and losses per audited financial statements			1	513,525.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Pnor year adjustments .	2b			
С	Other losses	2c			
d	Other (Describe in Part XIV)	2d	- <i></i>		
е	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	513,525.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			j	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV.)	4b			
C	Add lines 4a and 4b			4c	0.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	<u>513,525.</u>
Pa	rt XIV Supplemental Information				
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part	III, lines 1a and 4, F	art IV, line	es 1b and 2b,	Part V, line 4, Part
X, lın	e 2; Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b Also con	nplete this part to pi	ovide any	additional info	ormation
	•				
					
		•			
					

SCHEDULE M (Form 990)

Noncash Contributions

► Complete if the organizations answered "Yes" on Form

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

990, Part IV, lines 29 or 30.

Attach to Form 990.

Employer identification number MCDEVCO, INC. 39-1306894

Pai	rt I Types of Property						
		(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d Method of d reven	etermining	
1	Art - Works of art						
2	Art - Historical treasures						
3	Art - Fractional interests						
4	Books and publications						
5	Clothing and household goods						
6	Cars and other vehicles						
7	Boats and planes						
8	Intellectual property						
9	Securities · Publicly traded				<u> </u>		
10	Securities · Closely held stock				· · · · · · · · · · · · · · · · · · ·		
11	Securities · Partnership, LLC, or						
	trust interests						
12	Securities · Miscellaneous		,				
13	Qualified conservation contribution -						
	Historic structures						
14	Qualified conservation contribution - Other						
15	Real estate - Residential						
16	Real estate - Commercial						
17	Real estate - Other						
18	Collectibles .						
19	Food inventory						
20	Drugs and medical supplies						
21	Taxidermy						
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts						
25	Other \blacktriangleright (INTEREST FORG)	X	1	110,928.			
26	Other ()						
27	Other ()	-			ļ <u></u>		
28_	Other (L					
29	Number of Forms 8283 received by the organiz						
	for which the organization completed Form 82	83, Part IV, D	Donee Acknowled	gment 29	 	1	<u> </u>
	5 " ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '					Yes	s No
30a	During the year, did the organization receive by						ŀ
	at least three years from the date of the initial of	contribution,	and which is not	required to be used for exer	npt purposes for		v
	the entire holding period?					30a	<u> </u>
	If "Yes," describe the arrangement in Part II.	a alian that re	auros the review	of any and atandard contrib	vutione?		v
31 20-	Does the organization have a gift acceptance p					31	X
sza	Does the organization hire or use third parties	or related of	yanızadons to soll	uit, process, or seil noncast	ı	225	v
L	contributions? If "Yes," describe in Part II.	•				32a	<u> </u>
33	If the organization did not report revenues in c	Olumn (c) for	r a type of property	v for which column (a) is ch	acked		
~	describe in Part II	o.a.iii (c) 101	a type of property	y to writer column (a) is chi	Joneu,		
	accorde in r air ii						

SCHEDULE O (Form 990)

Supplemental Information to Form 990

Department of the Treasury

Internal Revenue Service

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

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

OMB No 1545-0047 Open to Public Inspection

Name	ofthe	organiza	ition

REPRESENTATIVE.

MCDEVCO, INC.

Employer identification number 39-1306894

OUTSIDE COMPANIES TO MARATHON COUNTY. FORM 990, PART VI, SECTION A. LINE 6: OUALIFICATIONS - ANY PERSON. ASSOCIATION, CORPORATION, PARTNERSHIP, FOUNDATION, GOVERNMENT BODY, OR ESTATE SHALL BECOME AND CONTINUE AS A MEMBER OF THE CORPORATION UPON PAYMENT OF SUCH ANNUAL DUES, AS MAY BE ESTABLISHED FROM TIME TO TIME BY THE BOARD OF DIRECTORS AND AS ARE IN EFFECT FOR THE THEN CURRENT FISCAL YEAR. MEMBERSHIP IN THE CORPORATION SHALL TERMINATE AS OF THE LAST DAY OF EACH CALENDAR YEAR UNLESS THE MEMBER ELECTS, ON OR BEFORE SUCH LAST DAY TO EXTEND SUCH MEMBERSHIP BY PAYMENT OF SUCH DUES AS ARE IN EFFECT FOR THE NEXT CALENDAR YEAR. MEMBERSHIP IN "GOOD STANDING" SHALL BE DETERMINED ACCORDING TO RULES AND PROCEDURES ESTABLISHED BY THE BOARD OF DIRECTORS. VOTING MEMBERS - ASSOCIATIONS, CORPORATIONS, PARTNERSHIPS, FOUNDATIONS, GOVERNMENT BODIES AND ESTATES SHALL DETERMINE THE INDIVIDUAL WITHIN THEIR RESPECTIVE ENTITIES WHO SHALL BE DESIGNATED AS THEIR VOTING MEMBERS. NOTICE, PROXY, QUORUM AND/OR VOTING REQUIREMENTS IN THESE BYLAWS SHALL NOT BE INVALID BECAUSE OF MEMBERS' FAILURE TO NOTIFY THE CORPORATION OF DESIGNATED VOTING MEMBERS. FORM 990, PART VI, SECTION A, LINE 7A: EACH MEMBER SHALL BE ENTITLED TO ONE (1) VOTE IN EACH MATTER SUBMITTED TO A VOTE OF THE MEMBERS.

OF ANY CORPORATE OR INSTITUTIONAL MEMBERS SHALL BE CAST BY ITS DESIGNATED

SCHEDULE 0 (Form 990)

Supplemental Information to Form 990

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization MCDEVCO , INC .	Employer identification number 39-1306894
BUT ALSO DO NOT ACT ON BEHALF OF THE BOARD OF THE DIRECTO	RS, THEY REPORT TO
THE BOARD OF DIRECTORS. NONE OF THE COMMITTEES ACT ON BE	HALF OF THE BOARD
OF DIRECTORS.	
FORM 990, PART VI, SECTION B, LINE 11: THE BOARD OF DIRECTOR APPROVES THE FORM 990.	-
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION M	AKES ITS
GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO REQUEST.	THE PUBLIC UPON
FORM 990, PAGE 12, PART XI, LINE 2C THE PROCESS HAS NOT CHANGED FROM PRIOR YEAR.	
FORM 990, PAGE 6, PART VI, LINE 12A, 12B, 12C, 13, 14	
WRITTEN CONFLICT OF INTEREST POLICY, WRITTEN WHISTLEBLOWE	R POLICY AND
WRITTEN DOCUMENT RETENTION AND DESTRUCTION POLICY ARE IN BEING IMPLEMENTED.	THE PROCESS OF
DEING IMPDEMENTED.	