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Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

1

Briefly describe the organization's mission

TO STIMULATE AND FACILITATE A VIGOROUS REGIONAL ECONOMY, ENCOURAGING AND SUSTAINING CAPITAL INVESTMENT AND QUALITY JOB GROWTH

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes

☒ No

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

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes

☒ No

If "Yes," describe these changes on Schedule O

4

Describe the 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 \$ including grants of \$) (Revenue \$)

COORDINATES ECONOMIC DEVELOPMENT ACTIVITIES WITH OTHER BUSINESS DEVELOPMENT GROUPS BY PROVIDING STAFFING AND OTHER SUPPORT SERVICES

4b

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

SUPPORTS REGIONAL ECONOMIC DEVELOPMENT, INCLUDING SPONSORING CONFERENCES AND CAREER FAIRS

4c

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

4d

Other program services (Describe in Schedule O)

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

4e

Total program service expenses \$

Form 990 (2010)

Part IV

Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	No
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? 	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 	3	No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 	5 Yes	
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 I 	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
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 	9	No
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 	10	No
11 If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 	11a Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. 	11b	No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. 	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX. 	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. 	11e	No
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X. 	11f	No
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII 	12a Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional 	12b	No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
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, Parts I and IV	14b	No
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 U S ? If "Yes," complete Schedule F, Parts II and IV	15	No
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 U S ? If "Yes," complete Schedule F, Parts III and IV	16	No
17 Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	No
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	No
20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b	

Part IV

Checklist of Required Schedules (continued)

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? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		No
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? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> 	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25</i>	24a		No
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) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	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? <i>If "Yes," complete Schedule L, Part I</i>	25b		
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? <i>If "Yes," complete Schedule L, Part II</i> 	26		No
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? <i>If "Yes," complete Schedule L, Part III</i> 	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> 	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> 	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> 	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		No
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> ☐ Yes ☒ No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

☐

			Yes	No	
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1a	3		
		1b	0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c		
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return.	2a	59		
	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		No
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			No
	b If "Yes," enter the name of the foreign country: See instructions for 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		No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
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?			6a		No
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).			7a		
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?			7b		
b If "Yes," did the organization notify the donor of the value of the goods or services provided?			7c		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7d		
d If "Yes," indicate the number of Forms 8282 filed during the year.					
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 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 at any time during the year?			8		
9 Sponsoring organizations maintaining donor advised funds.			9a		
a Did the organization make any taxable distributions under section 4966?			9b		
b Did the organization make a distribution to a donor, donor advisor, or related person?					
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?			12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.					
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.			13a		
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?			14a		No
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.			14b		

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 to any question in this Part VI ☒

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
1b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	Yes	
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?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Does the organization have members or stockholders?	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	Yes	
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	Yes	
8b	Each committee with authority to act on behalf of the governing body?	Yes	
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		No

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

		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?		No
10b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	Yes	
11b	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		No
12b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
12c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done		
13	Does the organization have a written whistleblower policy?		No
14	Does the organization have a written document retention and destruction policy?	Yes	
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?		
15a	The organization's CEO, Executive Director, or top management official	Yes	
15b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)	Yes	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		No
16b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed▶
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. ☐ Own website ☐ Another's website ☒ Upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ LYNN KUCEJKO 1441 MAIN STREET SPRINGFIELD, MA 01103 (413) 755-1306

Part VII

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

Check if Schedule O contains a response to any question in this Part VII

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

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

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

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

☐ 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 (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) PETER STRALEY BOARD CHAIR	1.00	X		X				0	0	0
(2) PETER CLARKE BOARD VICE CHAIR	1.00	X		X				0	0	0
(3) KEVIN VANN BOARD TREASURER	1.00	X		X				0	0	0
(4) ROBERT HOLUB BOARD SECRETARY	1.00	X		X				0	0	0
(5) RONALD ABDOW DIRECTOR	1.00	X						0	0	0
(6) GEORGE ARWADY DIRECTOR	1.00	X						0	0	0
(7) MICHAEL BISSONNETTE DIRECTOR	1.00	X						0	0	0
(8) ROBERT BOLDUC DIRECTOR	1.00	X						0	0	0
(9) CHIRSTOPHER BOROWIEC DIRECTOR	1.00	X						0	0	0
(10) DOUGLAS BOWEN DIRECTOR	1.00	X						0	0	0
(11) CHARLES BOWLES DIRECTOR	1.00	X						0	0	0
(12) GEORGE BURTCH DIRECTOR	1.00	X						0	0	0
(13) THOMAS BURTON DIRECTOR	1.00	X						0	0	0
(14) ANTHONY CAPRIO DIRECTOR	1.00	X						0	0	0
(15) FRAN CATALDO JR DIRECTOR	1.00	X						0	0	0
(16) JOHN CHANDLER DIRECTOR	1.00	X						0	0	0

Part VII

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(17) CAROL CHRIST DIRECTOR	1 00	X						0	0	0
(18) RICHARD COHEN DIRECTOR	1 00	X						0	0	0
(19) RICHARD COLLINS DIRECTOR	1 00	X						0	0	0
(20) TOM CREED DIRECTOR	1 00	X						0	0	0
(21) ELLEN CUMMINGS DIRECTOR	1 00	X						0	0	0
(22) CHARLES D'AMOUR DIRECTOR	1 00	X						0	0	0
(23) STEPHEN DAVIS DIRECTOR	1 00	X						0	0	0
(24) JOHN DEBARGE DIRECTOR	1 00	X						0	0	0
(25) ROLAND DESROCHERS DIRECTOR	1 00	X						0	0	0
(26) FRANCIS DIBBLE DIRECTOR	1 00	X						0	0	0
(27) EVAN DOBELLE DIRECTOR	1 00	X						0	0	0
(28) PAUL DOHERTY DIRECTOR	1 00	X						0	0	0
(29) RAYMOND EVANS DIRECTOR	1 00	X						0	0	0
(30) RICHARD FLYNN DIRECTOR	1 00	X						0	0	0
(31) JASON FREEMAN DIRECTOR	1 00	X						0	0	0
(32) EDWARD GIBSON DIRECTOR	1 00	X						0	0	0
(33) DANIEL GLANVILLE DIRECTOR	1 00	X						0	0	0
(34) DAVID GLIDDEN DIRECTOR	1 00	X						0	0	0
(35) ANDREAS GOTTMANN DIRECTOR	1 00	X						0	0	0
(36) ALFRED GRIGGS DIRECTOR	1 00	X						0	0	0
(37) THOMAS HAZEN DIRECTOR	1 00	X						0	0	0
(38) JOHN HEAPS DIRECTOR	1 00	X						0	0	0
(39) MARY CLARE HIGGINS DIRECTOR	1 00	X						0	0	0
(40) WILLIAM HOGAN JR DIRECTOR	1 00	X						0	0	0
(41) TIMOTHY HOPKINS DIRECTOR	1 00	X						0	0	0
(42) DALE JAMES DIRECTOR	1 00	X						0	0	0
(43) AARON JULIEN DIRECTOR	1 00	X						0	0	0
(44) HARLAN KENT DIRECTOR	1 00	X						0	0	0
(45) DANIEL KNAPIK DIRECTOR	1 00	X						0	0	0
(46) MARIE LAFAMME DIRECTOR	1 00	X						0	0	0
(47) DAVID LAHR DIRECTOR	1 00	X						0	0	0
(48) JAMES LAVELLE DIRECTOR	1 00	X						0	0	0
(49) CAROL LEARY DIRECTOR	1 00	X						0	0	0
(50) JOHN LIBERA DIRECTOR	1 00	X						0	0	0
(51) WILLIAM MARTIN DIRECTOR	1 00	X						0	0	0
(52) JOHN MAYBURY DIRECTOR	1 00	X						0	0	0
(53) WILLIAM MESSNER DIRECTOR	1 00	X						0	0	0
(54) STEVEN MITUS DIRECTOR	1 00	X						0	0	0
(55) DANIEL MOEN DIRECTOR	1 00	X						0	0	0
(56) JOHN MUSANTE DIRECTOR	1 00	X						0	0	0
(57) PAUL PETER NICOLAI DIRECTOR	1 00	X						0	0	0
(58) KEITH PARENT DIRECTOR	1 00	X						0	0	0
(59) LYNN PASQUERELLA DIRECTOR	1 00	X						0	0	0
(60) JOSEPH PETERS DIRECTOR	1 00	X						0	0	0
(61) PAUL PICKNELLY DIRECTOR	1 00	X						0	0	0
(62) PETER PICKNELLY JR DIRECTOR	1 00	X						0	0	0
(63) ELAINE PLUTA DIRECTOR	1 00	X						0	0	0
(64) HANK PORTEN DIRECTOR	1 00	X						0	0	0
(65) DAN PRESTEGAARD DIRECTOR	1 00	X						0	0	0
(66) ROBERT PURA DIRECTOR	1 00	X						0	0	0
(67) ALRLENE PUTNAM DIRECTOR	1 00	X						0	0	0
(68) JOHN REED DIRECTOR	1 00	X						0	0	0
(69) STEVEN ROBERTS DIRECTOR	1 00	X						0	0	0
(70) PETER ROSSKOTHEN DIRECTOR	1 00	X						0	0	0
(71) IRA RUBENZAHL DIRECTOR	1 00	X						0	0	0
(72) DOMENIC SARNO DIRECTOR	1 00	X						0	0	0
(73) MARY ELLEN SCOTT DIRECTOR	1 00	X						0	0	0
(74) PAUL SCULLY DIRECTOR	1 00	X						0	0	0
(75) JOSEPH SHAW DIRECTOR	1 00	X						0	0	0
(76) DAVID SHRAIR DIRECTOR	1 00	X						0	0	0
(77) DAVID SOUTHWORTH DIRECTOR	1 00	X						0	0	0
(78) MICHAEL TAUTZNIK DIRECTOR	1 00	X						0	0	0
(79) MARK TOLOSKY DIRECTOR	1 00	X						0	0	0
(80) MICHAEL TUCKER DIRECTOR	1 00	X						0	0	0
(81) WILLIAM WAGNER DIRECTOR	1 00	X						0	0	0
(82) DONALD WILLIAMS DIRECTOR	1 00	X						0	0	0
(83) RICHARD WUERTHELE DIRECTOR	1 00	X						0	0	0
(84) DAVID PARKE DIRECTOR	1 00	X						0	0	0
(85) PAUL ACCORSI TERM ENDED 612010 DIRECTOR	1 00	X						0	0	0
(86) GREGORY CHIECO TERM ENDED 612010 DIRECTOR	1 00	X						0	0	0
(87) JOANNE CREIGHTON TERM ENDED 6110 DIRECTOR	1 00	X						0	0	0
(88) JOHN GALLUP TERM ENDED 612010 DIRECTOR	1 00	X						0	0	0
(89) MICHAEL GOLDEN TERM ENDED 612010 DIRECTOR	1 00	X						0	0	0
(90) NED LIDVALL TERM ENDED 612010 DIRECTOR	1 00	X						0	0	0
(91) LARRY LITTON TERM ENDED 612010 DIRECTOR	1 00	X						0	0	0
(92) VINCENT MCCORKLE TERM ENDED 6110 DIRECTOR	1 00	X						0	0	0
(93) DAVE PIRKLE TERM ENDED 612010 DIRECTOR	1 00	X						0	0	0
(94) W LOWELL PUTNAM TERM ENDED 6110 DIRECTOR	1 00	X						0	0	0
(95) JEFFREY ROBERTS TERM ENDED 6110 DIRECTOR	1 00	X						0	0	0
(96) CRAIG RYDIN TERM ENDED 612010 DIRECTOR	1 00	X						0	0	0
(97) LARRY SHAFFER TERM ENDED 612010 DIRECTOR	1 00	X						0	0	0
(98) JEFFREY SULLIVAN TERM ENDED 6110 DIRECTOR	1 00	X						0	0	0
(99) ALLAN BLAIR PRESIDENT/CEO	37 50			X				231,536	0	28,397
(100) MICHAEL GRANEY SENIOR VICE PRESIDENT	37 50			X	X			129,253	0	23,979
(101) LYNN KUCEJKO EDC CONTROLLER	37 50			X				91,155	0	12,270
(102) KENNETH DELUDE WMASS PRESIDENT	37 50				X			150,155	0	22,018
(103) RUSSELL DENVER ACCGS PRESIDENT	37 50				X			106,963	0	9,077
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								709,062	0	95,741
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization▶4									

Section B. Independent Contractors			
1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization			
(A) Name and business address		(B) Description of services	(C) Compensation
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶0			

3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		Yes	No
		3		No
		4	Yes	
		5		No

Part VIII

Statement of Revenue

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	60,000			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f				
	g	Noncash contributions included in lines 1a-1f \$					
	h	Total. Add lines 1a-1f		60,000			
	Program Service Revenue	2a	CONTRACT REVENUE	561499	1,255,627	1,255,627	
b		WMDC CONTRACT	561499	646,857	646,857		
c		CHAMBER CONTRACT	561499	646,517	646,517		
d		MEMBERSHIP DUES	561499	572,345	572,345		
e		MUNICIPAL SERVICES REV	561499	37,500	37,500		
f		All other program service revenue		44,754	44,754		
g		Total. Add lines 2a-2f		3,203,600			
Other Revenue		3	Investment income (including dividends, interest and other similar amounts)		2,120		2,120
		4	Income from investment of tax-exempt bond proceeds . .				
	5	Royalties					
	6a	Gross Rents	(i) Real	(ii) Personal			
		b	Less rental expenses				
		c	Rental income or (loss)				
		d	Net rental income or (loss)				
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
		b	Less cost or other basis and sales expenses				
		c	Gain or (loss)				
		d	Net gain or (loss)				
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a				
		b	Less direct expenses	b			
		c	Net income or (loss) from fundraising events . .				
	9a	Gross income from gaming activities See Part IV, line 19 . .	a				
		b	Less direct expenses	b			
		c	Net income or (loss) from gaming activities . .				
	10a	Gross sales of inventory, less returns and allowances	a				
		b	Less cost of goods sold	b			
c		Net income or (loss) from sales of inventory . .					
Miscellaneous Revenue		Business Code					
11a	MISCELLANEOUS INCOME	900099	2,049			2,049	
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d		2,049				
12	Total revenue. See Instructions		3,267,769	3,203,600	0	4,169	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to 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 U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	336,628			
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	2,223,720			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	157,214			
9	Other employee benefits	182,847			
10	Payroll taxes	215,747			
a	Fees for services (non-employees) Management				
b	Legal				
c	Accounting	9,700			
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other	860			
12	Advertising and promotion	103,932			
13	Office expenses	22,236			
14	Information technology				
15	Royalties				
16	Occupancy	40,924			
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	27,729			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	20,093			
23	Insurance				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	BAD DEBT EXPENSE	30,985			
b	DUES & SUBSCRIPTIONS	13,448			
c	MAINTENANCE	5,610			
d	INSURANCE - OTHER	5,192			
e	MISCELLANEOUS	1,774			
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	3,398,639			
26	Joint costs. Check here ☐ if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			356,204	1	106,182
	2	Savings and temporary cash investments			131,405	2	428,231
	3	Pledges and grants receivable, net			27,855	3	85,202
	4	Accounts receivable, net			445,769	4	142,143
	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)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			7,461	9	12,368
	10a	Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D	10a	184,194			
	b	Less: accumulated depreciation	10b	165,560	33,239	10c	18,634
	11	Investments—publicly traded securities				11	
	12	Investments—other securities. See Part IV, line 11				12	
	13	Investments—program-related. See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11				15	
16	Total assets. Add lines 1 through 15 (must equal line 34)			1,001,933	16	792,760	
Liabilities	17	Accounts payable and accrued expenses			207,629	17	141,237
	18	Grants payable				18	
	19	Deferred revenue			42,815	19	43,149
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities. Complete Part X of Schedule D			346,879	25	334,634
	26	Total liabilities. Add lines 17 through 25			597,323	26	519,020
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			391,560	27	260,690
	28	Temporarily restricted net assets			13,050	28	13,050
	29	Permanently restricted net assets				29	
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			404,610	33	273,740
34	Total liabilities and net assets/fund balances			1,001,933	34	792,760	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,267,769
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,398,639
3	Revenue less expenses Subtract line 2 from line 1	3	-130,870
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	404,610
5	Other changes in net assets or fund balances (explain in Schedule O)	5	
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	273,740

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		No
b	Were the organization's financial statements audited by an independent accountant?	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
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 separate basis, consolidated basis, or both ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separated basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
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		

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Political Campaign and Lobbying Activities

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

▶ Complete if the organization is described below.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

If the organization answered “Yes,” to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

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

If the organization answered “Yes,” to 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,” to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

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

Name of the organization ECONOMIC DEVELOPMENT COUNCIL OF WESTERN MASSACHUSETTS INC	Employer identification number 04-3237124
--	--

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	
2	Political expenditures	▶ \$ _____
3	Volunteer hours	_____

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?	☐ Yes ☐ No
4a	Was a correction made?	☐ Yes ☐ No
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 funtion 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?	☐ Yes ☐ No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization’s funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV	

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Part II-A

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

A

Check

☐

if the filing organization belongs to an affiliated group

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	(b) Affiliated Group 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><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><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></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?		☐ Yes	☐ No												

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 five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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)).

		(a)		(b)
		Yes	No	Amount
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? If "Yes," describe in Part IV			
j	Total 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).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		No
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		No
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		No

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

1	Dues, assessments and similar amounts from members	1	572,345
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	Current year	2a	36,630
b	Carryover from last year	2b	
c	Total	2c	36,630
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	36,630
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i. Also, complete this part for any additional information.

Identifier	Return Reference	Explanation
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SCHEDULE D
(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.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization ECONOMIC DEVELOPMENT COUNCIL OF WESTERN MASSACHUSETTS INC	Employer identification number 04-3237124
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Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds 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 writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	☐ Yes ☐ No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit	☐ Yes ☐ No

Part II

Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1	Purpose(s) of conservation easements held by the organization (check all that apply) ☐ Preservation of land for public use (e g , recreation or pleasure) ☐ Protection of natural habitat ☐ Preservation of open space ☐ Preservation of an historically importantly land area ☐ Preservation of a certified historic structure
2	Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____
4	Number of states where property subject to conservation easement is located ▶ _____
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶ _____
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a	If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items
b	If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
(i)	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 treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items
a	Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____
b	Assets included in Form 990, Part X ▶ \$ _____

Part III

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

3

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

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

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

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

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

☐ No

b

If "Yes," explain the arrangement in Part XIV and complete the following table

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

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

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance				
b	Contributions				
c	Investment earnings or losses				
d	Grants or scholarships				
e	Other expenditures for facilities and programs				
f	Administrative expenses				
g	End of year balance				

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶

c

Term endowment ▶

3a

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

(i)

unrelated organizations

3a(i)

☐ Yes

☐ No

(ii)

related organizations

3a(ii)

☐

☐

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

☐

☐

4

Describe in Part XIV the intended uses of the organization's endowment funds

Part VI

Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		13,838	13,692	146
d Equipment		123,463	110,181	13,282
e Other		46,893	41,687	5,206
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				18,634

Part XI

Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	3,267,769
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	3,398,639
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-130,870
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	0
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-130,870

Part XII

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	3,267,769
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	3,267,769
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	3,267,769

Part XIII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	3,398,639
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	3,398,639
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	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 should equal Form 990, Part I, line 18)	5	3,398,639

Part XIV

Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
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Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2010

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization ECONOMIC DEVELOPMENT COUNCIL OF WESTERN MASSACHUSETTS INC	Employer identification number 04-3237124
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Part I

Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		
☐ First-class or charter travel		
☐ Travel for companions		
☐ Tax idemnification and gross-up payments		
☐ Discretionary spending account		
☐ Housing allowance or residence for personal use		
☐ Payments for business use of personal residence		
☐ Health or social club dues or initiation fees		
☐ Personal services (e g , maid, chauffeur, chef)		
1b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain		
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?		
3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply		
☒ Compensation committee		
☒ Independent compensation consultant		
☐ Form 990 of other organizations		
☒ Written employment contract		
☐ Compensation survey or study		
☒ Approval by the board or compensation committee		
4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization		
a Receive a severance payment or change-of-control payment from the organization or a related organization?		No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?		No
c Participate in, or receive payment from, an equity-based compensation arrangement?		No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		
Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.		
5 For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of		
a The organization?		
b Any related organization?		
If "Yes," to line 5a or 5b, describe in Part III		
6 For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of		
a The organization?		
b Any related organization?		
If "Yes," to line 6a or 6b, describe in Part III		
7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III		
8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53.4958-4(a)(3)? If "Yes," describe in Part III		
9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?		

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 in 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) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) ALLAN BLAIR	(i) (ii)	225,238 0	4,500 0	1,798 0	17,365 0	11,032 0	259,933 0	 0
(2) MICHAEL GRANEY	(i) (ii)	115,653 0	10,000 0	3,600 0	9,694 0	14,285 0	153,232 0	 0
(3) KENNETH DELUDE	(i) (ii)	150,155 0	0 0	0 0	11,262 0	10,756 0	172,173 0	 0
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

Part III **Supplemental Information**

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
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Schedule L
(Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
ECONOMIC DEVELOPMENT COUNCIL OF WESTERN MASSACHUSETTS INC

Employer identification number
04-3237124

Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) 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) Description of transaction	(c) Corrected?	
			Yes	No

2 Enter the amount of tax imposed on 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, Part IV, line 26, or Form 990-EZ, Part V, line 38a

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

Part III Grants or Assistance Benefitting 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 grant or type of assistance

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	(e) Sharing of organization's revenues?	
				Yes	No
(1) PETER STRALEY BOD	PETER STRALEY IS CEO OF HEALTH NEW ENGLAND (HNE) & IS THE EDC BOARD CHAIR	402,621	HEALTH NEW ENGLAND WAS THE MEDICAL INSURANCE PROVIDER OF EDC'S EMPLOYEES		No
(2)					No

Part V

Supplemental Information
Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier	Return Reference	Explanation
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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization

ECONOMIC DEVELOPMENT COUNCIL OF WESTERN
MASSACHUSETTS INC

Employer identification number

04-3237124

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2		FRANCIS DIBBLE HAS A BUSINESS RELATIONSHIP WITH DAVID PARKE

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6		APPROVAL BY EXISTING MEMBERS IS REQUIRED BEFORE AN ENTITY CAN BECOME A CONTRIBUTOR ALL CONTRIBUTORS ARE MEMBERS OF THE GOVERNING BODY

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A		ALL MEMBERS OF THE GOVERNING BODY MAY VOTE TO ACCEPT NEW CONTRIBUTORS AND ALL CONTRIBUTORS ARE AUTOMATICALLY MEMBERS OF THE GOVERNING BODY

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B		APPROVAL BY MEMBERS OF THE GOVERNING BODY IS REQUIRED TO ACCEPT NEW CONTRIBUTORS

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		THE BOARD HAS DELEGATED REVIEW OF THE 990 TO THE MANAGEMENT AND THE COMPENSATION COMMITTEE PRIOR TO FILING A FINAL COPY IS MADE AVAILABLE TO ALL BOARD MEMBERS AT THE BOARD MEETING FOLLOWING APPROVAL BY THE COMMITTEE

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	IN DETERMINING THE COMPENSATION OF THE ORGANIZATION'S OFFICERS/KEY EMPLOYEES, THE EXECUTIVE COMMITTEE USED A COMPARABILITY STUDY OF SIMILAR SIZE EXEMPT ORGANIZATIONS IN NEW ENGLAND THE MOST RECENT YEAR A COMPENSATION CONSULTANT WAS USED TO DETERMINE SALARY WAS 2007

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 18	AVAILABLE UPON REQUEST

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	AVAILABLE UPON REQUEST

Identifier	Return Reference	Explanation
FINANCIAL STATEMENT AND REPORTING INFORMATION	PART XII LINE 2C	THE ORGANIZATION HAS NOT CHANGED ITS OVERSIGHT PROCESS OR SELECTION PROCESS DURING THE YEAR

Additional Data

Software ID:

Software Version:

EIN: 04-3237124

Name: ECONOMIC DEVELOPMENT COUNCIL OF WESTERN MASSACHUSETTS INC

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
PETER STRALEY BOARD CHAIR	1 00	X		X				0	0	0
PETER CLARKE BOARD VICE CHAIR	1 00	X		X				0	0	0
KEVIN VANN BOARD TREASURER	1 00	X		X				0	0	0
ROBERT HOLUB BOARD SECRETARY	1 00	X		X				0	0	0
RONALD ABDOW DIRECTOR	1 00	X						0	0	0
GEORGE ARWADY DIRECTOR	1 00	X						0	0	0
MICHAEL BISSONNETTE DIRECTOR	1 00	X						0	0	0
ROBERT BOLDUC DIRECTOR	1 00	X						0	0	0
CHIRSTOPHER BOROWIEC DIRECTOR	1 00	X						0	0	0
DOUGLAS BOWEN DIRECTOR	1 00	X						0	0	0
CHARLES BOWLES DIRECTOR	1 00	X						0	0	0
GEORGE BURTCH DIRECTOR	1 00	X						0	0	0
THOMAS BURTON DIRECTOR	1 00	X						0	0	0
ANTHONY CAPRIO DIRECTOR	1 00	X						0	0	0
FRAN CATALDO JR DIRECTOR	1 00	X						0	0	0
JOHN CHANDLER DIRECTOR	1 00	X						0	0	0
CAROL CHRIST DIRECTOR	1 00	X						0	0	0
RICHARD COHEN DIRECTOR	1 00	X						0	0	0
RICHARD COLLINS DIRECTOR	1 00	X						0	0	0
TOM CREED DIRECTOR	1 00	X						0	0	0
ELLEN CUMMINGS DIRECTOR	1 00	X						0	0	0
CHARLES D'AMOUR DIRECTOR	1 00	X						0	0	0
STEPHEN DAVIS DIRECTOR	1 00	X						0	0	0
JOHN DEBARGE DIRECTOR	1 00	X						0	0	0
ROLAND DESROCHERS DIRECTOR	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)							(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former				
FRANCIS DIBBLE DIRECTOR	1 00	X						0	0	0	
EVAN DOBELLE DIRECTOR	1 00	X						0	0	0	
PAUL DOHERTY DIRECTOR	1 00	X						0	0	0	
RAYMOND EVANS DIRECTOR	1 00	X						0	0	0	
RICHARD FLYNN DIRECTOR	1 00	X						0	0	0	
JASON FREEMAN DIRECTOR	1 00	X						0	0	0	
EDWARD GIBSON DIRECTOR	1 00	X						0	0	0	
DANIEL GLANVILLE DIRECTOR	1 00	X						0	0	0	
DAVID GLIDDEN DIRECTOR	1 00	X						0	0	0	
ANDREAS GOTTZMANN DIRECTOR	1 00	X						0	0	0	
ALFRED GRIGGS DIRECTOR	1 00	X						0	0	0	
THOMAS HAZEN DIRECTOR	1 00	X						0	0	0	
JOHN HEAPS DIRECTOR	1 00	X						0	0	0	
MARY CLARE HIGGINS DIRECTOR	1 00	X						0	0	0	
WILLIAM HOGAN JR DIRECTOR	1 00	X						0	0	0	
TIMOTHY HOPKINS DIRECTOR	1 00	X						0	0	0	
DALE JANES DIRECTOR	1 00	X						0	0	0	
AARON JULIEN DIRECTOR	1 00	X						0	0	0	
HARLAN KENT DIRECTOR	1 00	X						0	0	0	
DANIEL KNAPIK DIRECTOR	1 00	X						0	0	0	
MARIE LAFLAMME DIRECTOR	1 00	X						0	0	0	
DAVID LAHR DIRECTOR	1 00	X						0	0	0	
JAMES LAVELLE DIRECTOR	1 00	X						0	0	0	
CAROL LEARY DIRECTOR	1 00	X						0	0	0	
JOHN LIBERA DIRECTOR	1 00	X						0	0	0	

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)							(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former				
WILLIAM MARTIN DIRECTOR	1 00	X						0	0	0	
JOHN MAYBURY DIRECTOR	1 00	X						0	0	0	
WILLIAM MESSNER DIRECTOR	1 00	X						0	0	0	
STEVEN MITUS DIRECTOR	1 00	X						0	0	0	
DANIEL MOEN DIRECTOR	1 00	X						0	0	0	
JOHN MUSANTE DIRECTOR	1 00	X						0	0	0	
PAUL PETER NICOLAI DIRECTOR	1 00	X						0	0	0	
KEITH PARENT DIRECTOR	1 00	X						0	0	0	
LYNN PASQUERELLA DIRECTOR	1 00	X						0	0	0	
JOSEPH PETERS DIRECTOR	1 00	X						0	0	0	
PAUL PICKNELLY DIRECTOR	1 00	X						0	0	0	
PETER PICKNELLY JR DIRECTOR	1 00	X						0	0	0	
ELAINE PLUTA DIRECTOR	1 00	X						0	0	0	
HANK PORTEN DIRECTOR	1 00	X						0	0	0	
DAN PRESTEGAARD DIRECTOR	1 00	X						0	0	0	
ROBERT PURA DIRECTOR	1 00	X						0	0	0	
ALRLENE PUTNAM DIRECTOR	1 00	X						0	0	0	
JOHN REED DIRECTOR	1 00	X						0	0	0	
STEVEN ROBERTS DIRECTOR	1 00	X						0	0	0	
PETER ROSSKOTHEN DIRECTOR	1 00	X						0	0	0	
IRA RUBENZAHL DIRECTOR	1 00	X						0	0	0	
DOMENIC SARNO DIRECTOR	1 00	X						0	0	0	
MARY ELLEN SCOTT DIRECTOR	1 00	X						0	0	0	
PAUL SCULLY DIRECTOR	1 00	X						0	0	0	
JOSEPH SHAW DIRECTOR	1 00	X						0	0	0	

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
DAVID SHRAIR DIRECTOR	1 00	X						0	0	0
DAVID SOUTHWORTH DIRECTOR	1 00	X						0	0	0
MICHAEL TAUTZNIK DIRECTOR	1 00	X						0	0	0
MARK TOLOSKY DIRECTOR	1 00	X						0	0	0
MICHAEL TUCKER DIRECTOR	1 00	X						0	0	0
WILLIAM WAGNER DIRECTOR	1 00	X						0	0	0
DONALD WILLIAMS DIRECTOR	1 00	X						0	0	0
RICHARD WUERTHELE DIRECTOR	1 00	X						0	0	0
DAVID PARKE DIRECTOR	1 00	X						0	0	0
PAUL ACCORSI TERM ENDED 612010 DIRECTOR	1 00	X						0	0	0
GREGORY CHIECO TERM ENDED 612010 DIRECTOR	1 00	X						0	0	0
JOANNE CREIGHTON TERM ENDED 6110 DIRECTOR	1 00	X						0	0	0
JOHN GALLUP TERM ENDED 612010 DIRECTOR	1 00	X						0	0	0
MICHAEL GOLDEN TERM ENDED 612010 DIRECTOR	1 00	X						0	0	0
NED LIDVALL TERM ENDED 612010 DIRECTOR	1 00	X						0	0	0
LARRY LITTON TERM ENDED 612010 DIRECTOR	1 00	X						0	0	0
VINCENT MCCORKLE TERM ENDED 6110 DIRECTOR	1 00	X						0	0	0
DAVE PIRKLE TERM ENDED 612010 DIRECTOR	1 00	X						0	0	0
W LOWELL PUTNAM TERM ENDED 6110 DIRECTOR	1 00	X						0	0	0
JEFFREY ROBERTS TERM ENDED 6110 DIRECTOR	1 00	X						0	0	0
CRAIG RYDIN TERM ENDED 612010 DIRECTOR	1 00	X						0	0	0
LARRY SHAFFER TERM ENDED 612010 DIRECTOR	1 00	X						0	0	0
JEFFREY SULLIVAN TERM ENDED 6110 DIRECTOR	1 00	X						0	0	0
ALLAN BLAIR PRESIDENT/CEO	37 50			X				231,536	0	28,397
MICHAEL GRANEY SENIOR VICE PRESIDENT	37 50			X		X		129,253	0	23,979

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
LYNN KUCEJKO EDC CONTROLLER	37 50			X				91,155	0	12,270
KENNETH DELUDE WMASS PRESIDENT	37 50					X		150,155	0	22,018
RUSSELL DENVER ACCGS PRESIDENT	37 50					X		106,963	0	9,077