



See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form 990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

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

2011

Open to Public
Inspection

A For the 2011 calendar year, or tax year beginning _____, and ending _____

B Check if applicable

Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

C Name of organization
GROWTH ALLIANCE FOR GREATER
EVANSVILLE, INC.

D Employer identification number

35-1798568

Doing Business As

Number and street (or P O box if mail is not delivered to street address)

318 MAIN STREET, SUITE #500

Room/suite

City or town, state or country, and ZIP + 4

EVANSVILLE

IN 47708

812-253-1013

F Name and address of principal officer

G Gross receipts \$ 1,362,848

H(a) Is this a group return for affiliates? Yes NoH(b) Are all affiliates included? Yes No

If "No," attach a list (see instructions)

I Tax-exempt status 501(c)(3) 501(c) () (insert no) 4947(a)(1) or 527

J Website ► WWW.EVANSVILLEGAGE.COM

K Form of organization Corporation Trust Association Other ►

H(c) Group exemption number ►

L Year of formation 1988

M State of legal domicile IN

Part I Summary

1 Briefly describe the organization's mission or most significant activities:

PROMOTE BUSINESS GROWTH AND ACTIVITIES IN EVANSVILLE, INDIANA

2 Check this box ► if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a)

4 Number of independent voting members of the governing body (Part VI, line 1b)

5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)

6 Total number of volunteers (estimate if necessary)

7a Total unrelated business revenue from Part VIII, column (C), line 12

b Net unrelated business taxable income from Form 990-T, line 34

3	22
4	22
5	7
6	0
7a	0
7b	0

8 Contributions and grants (Part VIII, line 1h)

9 Program service revenue (Part VIII, line 2g)

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)

14 Benefits paid to or for members (Part IX, column (A), line 4)

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)

16a Professional fundraising fees (Part IX, column (A), line 11e)

b Total fundraising expenses (Part IX, column (D), line 25) ►

25,132

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)

18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)

19 Revenue less expenses Subtract line 18 from line 12

20 Total assets (Part X, line 16)

21 Total liabilities (Part X, line 26)

22 Net assets or fund balances Subtract line 21 from line 20

Beginning of Current Year

1,272,801

End of Year

1,242,915

468,581

345,106

804,220

897,809

G

E

N

W

S

O

B

I

T

C

P

R

U

D

A

S

E

M

Y

J

V

N

G

H

I

L

O

P

R

U

D

A

S

E

M

Y

J

V

N

G

H

I

L

O

P

R

U

D

A

S

E

M

Y

J

V

N

G

H

I

L

O

P

R

U

D

A

S

E

M

Y

J

V

N

G

H

I

L

O

P

R

U

D

A

S

E

M

Y

J

V

N

G

H

I

L

O

P

R

U

D

A

S

E

M

Y

J

V

N

G

H

I

L

O

P

R

U

D

A

S

E

M

Y

J

V

N

G

H

I

L

O

P

R

U

D

A

S

E

M

Y

J

V

N

G

H

I

L

O

P

R

U

D

A

S

E

M

Y

J

V

N

G

H

I

L

O

P

R

U

D

A

S

E

M

Y

J

V

N

G

H

I

L

O

P

R

U

D

A

S

E

M

Y

J

V

N

G

H

I

L

O

P

R

U

D

A

S

E

M

Y

J

V

N

G

H

I

L

O

P

R

U

D

A

S

E

M

Y

J

V

N

G

H

I

L

O

P

R

U

D

A

S

E

M

Y

J

V

N

G

H

I

L

O

P

R

U

D

A

S

E

M

Y

J

V

N

G

H

I

L

O

P

R

U

D

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

PROMOTE BUSINESS GROWTH AND ACTIVITIES IN EVANSVILLE, INDIANA2 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 organization's program service accomplishments for each of its three largest program services, as measured 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 \$ 1,117,919 including grants of \$) (Revenue \$) (374,567)
PROVIDE FACILITIES AND SUPPORT SERVICES TO DEVELOPING ORGANIZATIONS TO PROMOTE GROWTH IN EVANSVILLE

4b (Code) (Expenses \$ 62,757 including grants of \$) (Revenue \$) (65,615)
TO PROMOTE INVESTMENT AND INTEREST IN DOWNTOWN EVANSVILLE BY ARRANGING AND MANAGING PUBLIC EVENTS

4c (Code) (Expenses \$) (Revenue \$) ()

4d Other program services (Describe in Schedule O)

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

4e Total program service expenses ► 1,180,676

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	X
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	X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	X
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	X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	X
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	X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
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	X
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X
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	X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X
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	X
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	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	X
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, Parts II and IV	15	X
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, Parts III and IV	16	X
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	X
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	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part IV Checklist of Required Schedules (continued)

		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization 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 and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a	X
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? If "Yes," complete Schedule L, Part I	25a	X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b	X
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	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions).	28a	X
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28c	X
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? If "Yes," complete Schedule L, Part IV	29	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	30	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	31	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	32	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	33	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	34	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	35a	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35b	X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	36	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	37	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	38	X
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		

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response to any question in this Part V

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

	1a	14	Yes	No
	1b	0		

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return
 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?

2a	7		
----	---	--	--

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?
 b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O

3a			
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)?
 b If "Yes," enter the name of the foreign country ►

4a			
5a			

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?
 b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?
 c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?

5b			
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?
 b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?

6a			
6b			

7 Organizations that may receive deductible contributions under section 170(c).

a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?
 b If "Yes," did the organization notify the donor of the value of the goods or services provided?
 c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?

7d			
7e			
7f			

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?
 f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?
 g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?
 h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?

7g			
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			
9a			

9 Sponsoring organizations maintaining donor advised funds.

a Did the organization make any taxable distributions under section 4966?
 b Did the organization make a distribution to a donor, donor advisor, or related person?

9b			
10a			

10 Section 501(c)(7) organizations. Enter

a Initiation fees and capital contributions included on Part VIII, line 12
 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

10b			
11a			

11 Section 501(c)(12) organizations. Enter

a Gross income from members or shareholders
 b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)

11b			
12a			

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

12b			
13a			

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

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
 c Enter the amount of reserves on hand

13b			
13c			

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14a			
14b			

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

Section A. Governing Body and Management

1a Enter the number of voting members of the governing body at the end of the tax year
 If there are material differences in voting rights among members of the governing body, or
 if the governing body delegated broad authority to an executive committee or similar
 committee, explain in Schedule O

1a **22**

1b Enter the number of voting members included in line 1a, above, who are independent

1b **22**

2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?

2 **X**

3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?

3 **X**

4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?

4 **X**

5 Did the organization become aware during the year of a significant diversion of the organization's assets?

5 **X**

6 Did the organization have members or stockholders?

6 **X**

7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?

7a **X**

b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?

7b **X**

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:

a 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 reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O

9 **X**

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

10a Did the organization have local chapters, branches, or affiliates?

10a **X**

b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?

10b **X**

11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?

11a **X**

b Describe in Schedule O the process, if any, used by the organization to review this Form 990

12a Did the organization have a written conflict of interest policy? If "No," go to line 13

12a **X**

b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?

12b **X**

c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done

12c **X**

13 Did the organization have a written whistleblower policy?

13 **X**

14 Did 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 approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?

15a **X**

b Other officers or key employees of the organization
 If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)

15b **X**

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?

16a **X**

b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

16b **X**

Section C. Disclosure

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

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

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

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► **GROWTH ALLIANCE FOR** **318 MAIN STREET** **IN 47708** **812-401-4849**

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 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 organizations 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 (do not check more than one box, unless person is both an officer and a director/trustee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) SEE ATTACHED BOARD MEMBER LIST					
(2) NO BOARD MEMBERS ARE COMPENSATED					
(3) BOARD MEMBERS AVERAGE 1-2 HOURS/WEEK					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					

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 (do not check more than one box, unless person is both an officer and a director/trustee)				(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Former Officer or director Individual trustee	Officer Institutional trustee	Key employee Highest compensated employee	Former			
(15)								
(16)								
(17)								
(18)								
(19)								
(20)								
(21)								
(22)								
(23)								
(24)								
(25)								
1b Sub-total								
c Total from continuation sheets to Part VII, Section A								
d Total (add lines 1b and 1c)								

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 ► 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

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4		X
5		X

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. Report compensation for the calendar year ending with or within the organization's tax year

(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 of compensation from the organization ►

0

Part VIII Statement of Revenue

Contributions, Gifts, Grants and Other Similar Amounts			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
1a Federated campaigns	1a					
b Membership dues	1b					
c Fundraising events	1c					
d Related organizations	1d					
e Government grants (contributions)	1e	802,935				
f All other contributions, gifts, grants, and similar amounts not included above	1f	47,150				
g Noncash contributions included in lines 1a-1f		\$ 369,438				
h Total. Add lines 1a-1f		► 850,085				
Program Service Revenue		Busn. Code				
2a PROGRAM 1 - TENANT SERVICES			374,567	374,567		
b PROGRAM 2 - DOWNTOWN EVENTS			65,615	65,615		
c						
d						
e						
f All other program service revenue						
g Total. Add lines 2a-2f			► 440,182			
3 Investment income (including dividends, interest, and other similar amounts)		►	4,115			4,115
4 Income from investment of tax-exempt bond proceeds		►				
5 Royalties		►				
6a Gross rents	(i) Real	(ii) Personal				
b Less rental exps						
c Rental inc 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 & sales exps						
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		Busn. Code				
11a GAIN ON SPLIT INTEREST AGREEM			27,500	27,500		
b 2010 AUDIT ADJUSTMENTS			17,761	17,761		
c BOILER REBATE			10,000	10,000		
d All other revenue			13,205	13,205		
e Total. Add lines 11a-11d		►	68,466			
12 Total revenue. See instructions		►	1,362,848	508,648	0	4,115

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).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(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				
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	289,260	260,334	14,463	14,463
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	6,370	5,732	319	319
9 Other employee benefits	14,489	13,041	724	724
10 Payroll taxes	25,861	23,275	1,293	1,293
11 Fees for services (non-employees)				
a Management				
b Legal	686	549	137	
c Accounting	39,072	15,629	23,443	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion	15,300	14,535		765
13 Office expenses				
14 Information technology	45,355	42,180	2,268	907
15 Royalties				
16 Occupancy				
17 Travel	5,994	5,095	599	300
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	5,564	4,451	835	278
20 Interest	204	204		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	45,299	45,299		
23 Insurance	17,688	16,804	884	
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a BUILDING RENTAL	318,940	318,940		
b UTILITIES	127,640	121,258	6,382	
c MAINTENANCE & REPAIRS	97,186	92,327	4,859	
d EVENT HOSTING	66,060	62,757		3,303
e All other expenses	148,291	138,266	7,245	2,780
25 Total functional expenses. Add lines 1 through 24e	1,269,259	1,180,676	63,451	25,132
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest bearing	32,169	1	29,116
	2 Savings and temporary cash investments	150,304	2	249,613
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	79,217	4	33,114
	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)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	21,656
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	934,664		
	b Less accumulated depreciation	257,429	10c	677,235
	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	250,757	14	232,181
	15 Other assets See Part IV, line 11		15	
	16 Total assets. Add lines 1 through 15 (must equal line 34)	1,272,801	16	1,242,915
Liabilities	17 Accounts payable and accrued expenses	52,260	17	15,360
	18 Grants payable		18	
	19 Deferred revenue		19	
	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	252,000	24	224,000
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D			
	26 Total liabilities. Add lines 17 through 25	164,321	25	105,746
		468,581	26	345,106
	Organizations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	614,220	27	685,309
	28 Temporarily restricted net assets	190,000	28	212,500
	29 Permanently restricted net assets		29	
Net Assets or Fund Balances	Organizations that do not follow SFAS 117, check here ► <input type="checkbox"/> 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	804,220	33	897,809
	34 Total liabilities and net assets/fund balances	1,272,801	34	1,242,915

Part XI Reconciliation of Net AssetsCheck 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	1,362,848
2 Total expenses (must equal Part IX, column (A), line 25)	2	1,269,259
3 Revenue less expenses Subtract line 2 from line 1	3	93,589
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	804,220
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	897,809

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII

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?
 b Were the organization's financial statements audited by an independent accountant?
 c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain 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 separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate 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?
 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

	Yes	No
2a		<input checked="" type="checkbox"/>
2b		<input checked="" type="checkbox"/>
2c		
3a		
3b		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.

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

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization

**GROWTH ALLIANCE FOR GREATER
EVANSVILLE, INC.**

Employer identification number
35-1798568

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)
- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 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)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)
- 9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from 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 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11 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 <input type="checkbox"/> Type I	b <input type="checkbox"/> Type II	c <input type="checkbox"/> Type III—Functionally integrated	d <input type="checkbox"/> Type III—Other
-----------------------------------	------------------------------------	---	---
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 - (ii) A family member of a person described in (i) above?
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?

h Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(I) Name of supported organization	(II) EIN	(III) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (I) listed in your governing document?		(v) Did you notify the organization in col. (I) of your support?		(vi) Is the organization in col. (I) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

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

Schedule A (Form 990 or 990-EZ) 2011

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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc (see instructions)						12
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2010 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test—2011. 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		► <input type="checkbox"/>
b 33 1/3% support test—2010. 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 qualifies as a publicly supported organization		► <input type="checkbox"/>
17a 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		► <input type="checkbox"/>
b 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		► <input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		► <input type="checkbox"/>

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.
If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")	848,971	659,263	664,540	936,601	850,085	3,959,460
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	222,985	324,122	614,684	562,895	508,648	2,233,334
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization'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						
6 Total. Add lines 1 through 5	1,071,956	983,385	1,279,224	1,499,496	1,358,733	6,192,794
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	211,994	314,138	73,178	170,380		769,690
c Add lines 7a and 7b	211,994	314,138	73,178	170,380		769,690
8 Public support (Subtract line 7c from line 6.)						5,423,104

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6	1,071,956	983,385	1,279,224	1,499,496	1,358,733	6,192,794
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	27,142	15,055	17,397	4,491	4,115	68,200
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	27,142	15,055	17,397	4,491	4,115	68,200
11 Net income from unrelated business 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.)	1,099,098	998,440	1,296,621	1,503,987	1,362,848	6,260,994
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f))	15	86.62%
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	79.25%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f))	17	1%
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	1%
19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
b 33 1/3% support tests—2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions		

SCHEDULE D
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**

OMB No 1545-0047

2011Open to Public
Inspection

Name of the organization

**GROWTH ALLIANCE FOR GREATER
EVANSCVILLE, INC.**

Employer identification number

35-1798568**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 No6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can 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 education) Preservation of an historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified 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
2a	
2b	
2c	
2d	

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, and not on a historic structure listed in the National Register

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 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 No6 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 section 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 (ASC 958), 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 (ASC 958), 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 (ASC 958) 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 acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

<input type="checkbox"/> a Public exhibition	<input type="checkbox"/> d <input type="checkbox"/> Loan or exchange programs
<input type="checkbox"/> b Scholarly research	<input type="checkbox"/> e <input type="checkbox"/> Other
<input type="checkbox"/> c Preservation for future generations	

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

c Beginning balance
d Additions during the year
e Distributions during the year
f Ending balance

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV

	Amount
1c	
1d	
1e	
1f	

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 Net investment earnings, gains, and 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 current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ► %

b Permanent endowment ► %

c Temporarily restricted endowment ► %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations
(ii) related organizations

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

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

	Yes	No
3a(i)		
3a(ii)		
3b		

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		71,534		71,534
b Buildings		226,841	101,770	125,071
c Leasehold improvements		510,534	82,514	428,020
d Equipment		125,755	73,146	52,609
e Other		0	0	
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				677,234

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		

Total. (Column (b) must equal Form 990, Part X, col (B) line 12) ►

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		

Total. (Column (b) must equal Form 990, Part X, col (B) line 13) ►

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

Total. (Column (b) must equal Form 990, Part X, col (B) line 15) ►

Part X Other Liabilities. See Form 990, Part X, line 25

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) PAYABLE TO EAP FOUNDATION	97,500
(3) ACCRUED PAYROLL AND PR TAXES	5,980
(4) SECURITY DEPOSITS	2,266
(5) ACCRUED PENSION	
(6) OTHER CURRENT LIABILITIES	
(7) PREPAID RENTS	
(8) CISCO LEASE PAYABLE	
(9)	
(10)	
(11)	

Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ► 105,746

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

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

1 Total revenue (Form 990, Part VIII, column (A), line 12)	1
2 Total expenses (Form 990, Part IX, column (A), line 25)	2
3 Excess or (deficit) for the year Subtract line 2 from line 1	3
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 through 8	9
10 Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	10

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
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
3 Subtract line 2e from line 1	3
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
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1 Total expenses and losses per audited financial statements	1
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
3 Subtract line 2e from line 1	3
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
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5

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, line 2, 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.

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

OMB No. 1545-0047

2011

**Open To Public
Inspection**

Name of the organization

**GROWTH ALLIANCE FOR GREATER
EVANSVILLE, INC.**

Employer identification number
35-1798568

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
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				
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 ► (X	1	369,438	SEE SCHEDULE O
26 Other ► (
27 Other ► (
28 Other ► (
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement			29	

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1–28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If "Yes," describe in Part II.

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

	Yes	No
30a		X
31		X
32a		X

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization

**GROWTH ALLIANCE FOR GREATER
EVANSVILLE, INC.**

Employer identification number
35-1798568

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990

FORM 990 IS RECONCILED TO AUDITED FINANCIAL STATEMENTS BEFORE FILING.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

**ORGANIZATION ANNUALLY UPDATES AND REVIEWS CONFLICTS OF INTEREST STATEMENTS
AT BOARD MEETING.**

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
TAX RETURNS ARE AVAILABLE TO THE PUBLIC AT WWW.GUIDESTAR.ORG. FINANCIAL
STATEMENTS AND OTHER INFORMATION ARE AVAILABLE TO THE PUBLIC UPON REQUEST
AT THE ORGANIZATION'S
PRINCIPAL ADDRESS.

FORM 990, PART IX, LINE 24E - OTHER EXPENSES

DESCRIPTION	AMOUNT
ASSET IMPAIRMENT	\$ 50,000
OTHER EXPENSES	\$ 24,150
CLEANING	\$ 20,527
EQUIPMENT LEASES	\$ 16,821
TELEPHONE	\$ 7,734
SUPPLIES	\$ 6,154
BAD DEBTS	\$ 5,416
OFFICE EXPENSES	\$ 5,065
DUES & SUBSCRIPTIONS	\$ 4,811
DISPOSAL SERVICE	\$ 4,110

Name of the organization

GROWTH ALLIANCE FOR GREATER

Employer identification number

35-1798568

POSTAGE & SHIPPING	\$	2,225
SECURITY SYSTEM	\$	1,278

Depreciation and Amortization
(Including Information on Listed Property)

Name(s) shown on return

GROWTH ALLIANCE FOR GREATER
EVANSVILLE, INC.Identifying number
35-1798568

Business or activity to which this form relates

INDIRECT DEPRECIATION

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	500,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000
4	Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4	
5	Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0- If married filing separately, see instructions	5	

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost	
7	Listed property Enter the amount from line 29	7		
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8		
9	Tentative deduction Enter the smaller of line 5 or line 8	9		
10	Carryover of disallowed deduction from line 13 of your 2010 Form 4562	10		
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11		
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12		
13	Carryover of disallowed deduction to 2012 Add lines 9 and 10, less line 12	13		

Note: Do not use Part II or Part III below for listed property Instead, use Part V

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	45,299

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2011	17	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts check here <input type="checkbox"/>		

Section B—Assets Placed in Service During 2011 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property		25 yrs			S/L	
h Residential rental property		27 5 yrs	MM		S/L	
i Nonresidential real property		27 5 yrs.	MM		S/L	
		39 yrs	MM		S/L	
			MM		S/L	

Section C—Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year		12 yrs			S/L	
c 40-year		40 yrs	MM		S/L	

Part IV Summary (See instructions.)

21	Listed property Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions	22	45,299
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

DAA

351798568 GROWTH ALLIANCE FOR GREATER
Book Asset Detail 1/01/11 - 12/31/11
FYE: 12/31/2011

11/14/2012 12:42 PM
Page 1

Asset	Property Description	Date In Service	Book Cost	Book Sec 179 Exp c	Book Sal Value	Book Prior Depreciation	Book Current Depreciation	Book End Depr	Book Net Book Value	Book Method	Book Period
Group: Building Improvs - GAGE											
178	IPI Building Equip	8/08/07	740.00	0.00	0.00	126.42	37.00	163.42	576.58	S/L	20.0
179	Elevators	8/17/07	1,174.43	0.00	0.00	195.73	58.72	254.45	919.98	S/L	20.0
180	Equipment Rack	8/30/07	474.42	0.00	0.00	131.77	39.53	171.30	303.12	S/L	12.0
181	Portable AC Unit	9/02/07	529.99	0.00	0.00	147.23	44.17	191.40	338.59	S/L	12.0
182	HVAC Work	11/09/07	8.50	0.00	0.00	1,345.83	425.00	1,770.83	6,729.17	S/L	20.0
183	HVAC Work	11/13/07	18,628.00	0.00	0.00	2,949.43	931.40	3,880.83	14,747.17	S/L	20.0
184	Blinds for Admin Ofc	12/18/07	1,395.00	0.00	0.00	424.31	139.50	563.81	831.19	S/L	10.0
185	Post Boxes for Tenants	12/20/07	1,089.00	0.00	0.00	165.62	54.45	220.07	868.93	S/L	20.0
208	Building Improvements	8/31/08	116,639.29	0.00	0.00	13,607.91	5,831.96	19,439.87	97,199.42	S/L	20.0
216	Reroof Building	5/03/09	97,20.00	0.00	0.00	8,100.00	4,860.00	12,960.00	84,240.00	S/L	20.0
217	Building Improvements	6/30/09	51,346.00	0.00	0.00	3,850.95	2,567.30	6,418.25	44,927.75	S/L	20.0
218	Renovation - 4th Floor (Chamber)	7/31/09	71,379.00	0.00	0.00	5,056.01	3,568.95	8,624.96	62,754.04	S/L	20.0
219	Phn/I net Setup Eq & Wiring	7/20/07	122,035.00	0.00	0.00	20,847.50	6,101.75	26,949.25	95,085.75	S/L	20.0
223	Elevator Regulator/Compressor..	8/27/10	8,097.08	0.00	0.00	134.95	404.85	539.80	7,557.28	S/L	20.0
224	Chiller Sensors	4/27/10	1,101.00	0.00	0.00	36.70	55.05	91.75	1,009.25	S/L	20.0
225	Improvements	10/31/10	1,022.36	0.00	0.00	8.52	51.12	59.64	962.72	S/L	20.0
226	Improv Exit and Emerg Lights	12/16/11	2,683.62	0.00c	0.00	0.00	5.59	5.59	2,678.03	S/L	20.0
227	HVAC Control Sys Improv	8/13/11	3,800.00	0.00c	0.00	0.00	203.57	203.57	3,596.43	S/L	7.0
230	Elect Improvements	12/16/11	2,700.00	0.00c	0.00	0.00	5.62	5.62	2,694.38	S/L	20.0
Building Improvs - GAGE			510,534.19		0.00c		0.00	57,128.88	25,385.53	82,514.41	428,019.78
Group: Office Equipment											
14	Kimbball International	6/15/91	10,787.00	0.00	0.00	10,787.00	0.00	10,787.00	0.00	S/L	5.0
15	Royal Office	6/15/91	1,000.00	0.00	0.00	1,000.00	0.00	1,000.00	0.00	S/L	5.0
16	Koch Furniture	6/15/91	1,065.00	0.00	0.00	1,065.00	0.00	1,065.00	0.00	S/L	5.0
19	Plaque	6/15/91	300.00	0.00	0.00	300.00	0.00	300.00	0.00	S/L	5.0
31	Pallet Jack	10/21/97	285.00	0.00	0.00	285.00	0.00	285.00	0.00	S/L	5.0
118	TV/VCR Combo	2/28/99	365.47	0.00	0.00	365.47	0.00	365.47	0.00	S/L	5.0
119	High Pressure Washer	6/02/99	582.43	0.00	0.00	582.43	0.00	582.43	0.00	S/L	5.0
125	Fax Machine	6/29/99	1,998.00	0.00	0.00	1,998.00	0.00	1,998.00	0.00	S/L	5.0
132	Fax Machine	2/22/99	1,963.00	0.00	0.00	1,963.00	0.00	1,963.00	0.00	S/L	5.0
151	HP Laser Printer	8/17/03	235.00	0.00	0.00	235.00	0.00	235.00	0.00	S/L	5.0
159	TV Mounts	2/10/04	269.52	0.00	0.00	186.41	26.95	213.36	56.16	S/L	10.0
160	Lectern and Base	2/22/04	162.41	0.00	0.00	110.97	16.24	127.21	35.20	S/L	10.0
161	AV Cart	2/24/04	125.63	0.00	0.00	85.83	12.56	98.39	27.24	S/L	10.0
162	TVs	3/23/04	638.46	0.00	0.00	430.98	63.85	494.83	143.63	S/L	10.0
163	Color Printer	8/23/04	69.97	0.00	0.00	443.33	70.00	513.33	186.64	S/L	10.0
164	Laptop - CGM	7/01/04	1,000.00	0.00	0.00	650.00	100.00	750.00	250.00	S/L	10.0
165	Desktop PC - CGM	7/01/04	1,000.00	0.00	0.00	650.00	100.00	750.00	250.00	S/L	10.0
173	Office Equipment	3/28/06	2,380.50	0.00	0.00	1,615.33	340.07	1,955.40	425.10	S/L	7.0
174	Power Point Projectors x2	4/24/07	2,120.99	0.00	0.00	1,111.00	37.79	217.29	47.21	S/L	7.0
189	Apple Computer (DEI)	3/02/04	1,651.21	0.00	0.00	1,651.21	0.00	1,651.21	0.00	S/L	5.0
190	Desktop PC - Kitty (DEI)	1/26/06	609.97	0.00	0.00	599.79	10.18	609.97	0.00	S/L	5.0
191	Desktop PC - Leona (DEI)	2/17/06	619.97	0.00	0.00	599.29	20.68	619.97	0.00	S/L	5.0
203	Elect Equip - Airshow Radio	11/28/08	9,250.00	0.00	0.00	2,752.98	1,321.43	4,074.41	5,175.59	S/L	7.0
204	Small Form Factor Computers	1/31/09	2,166.00	0.00	0.00	1,203.30	1,433.20	1,263.50	902.50	S/L	5.0

351798568 GROWTH ALLIANCE FOR GREATER
35-1798568
FYE: 12/31/2011

Book Asset Detail 1/01/11 - 12/31/11

11/14/2012 12:42 PM
Page 2

Asset Group: <u>Office Equipment (continued)</u>	Property Description	Date In Service	Book Cost	Book Sec 179 Exp	Book Sal Value	Book Prior Depreciation	Book Current Depreciation	Book End Depr	Book Net Book Value	Book Method	Book Period
205 AOO CS4 Master Collection	2/09/09	1,036.00	0.00	0.00	397.13	207.20	604.33	431.67	S/L	5.0	
206 Workstations for Lecterns	2/12/09	1,461.00	0.00	0.00	400.03	208.71	608.74	852.26	S/L	7.0	
207 Ice Machine	2/25/09	1,500.00	0.00	0.00	392.86	214.29	607.15	892.85	S/L	7.0	
209 CR Stand/racks/shelves-Art Council	2/07/09	1,888.02	0.00	0.00	361.87	188.80	550.67	1,337.35	S/L	10.0	
210 Comm Network Equip (4th Floor)	6/30/09	9,141.78	0.00	0.00	1,371.27	914.18	2,285.45	6,856.33	S/L	10.0	
211 Office Computers x5	4/17/09	2,595.00	0.00	0.00	865.00	519.00	1,384.00	1,211.00	S/L	5.0	
212 Office Computer	5/22/09	686.23	0.00	0.00	217.31	137.25	354.56	331.67	S/L	5.0	
213 Portable Air Conditioner (equip room)	10/15/09	529.99	0.00	0.00	94.64	75.71	170.35	359.64	S/L	7.0	
222 Portable Sound System	6/01/10	641.23	0.00	0.00	53.44	91.60	145.04	496.19	S/L	7.0	
228 DELL Inspiron 2.5 GHz	8/08/11	881.32	0.00c	0.00	0.00	66.10	66.10	815.22	S/L	5.0	
229 DELL Inspiron 1.5 GHz	8/08/11	750.75	0.00c	0.00	0.00	56.31	56.31	694.44	S/L	5.0	
Office Equipment		62,651.35	0.00c			34,631.37	5,535.10	40,166.47	22,484.88		
Group: Office Furnishings											
120 Sign for Building	8/23/99	1,000.00	0.00	0.00	1,000.00	0.00	1,000.00	0.00	S/L	7.0	
135 Sign for Building	5/10/00	255.00	0.00	0.00	255.00	0.00	255.00	0.00	S/L	7.0	
167 Office Furniture from Vectren	8/30/05	5,656.00	0.00	0.00	3,016.53	565.60	3,582.13	2,073.87	S/L	10.0	
170 Office Furniture	1/01/05	9,904.00	0.00	0.00	5,942.40	990.40	6,932.80	2,971.20	S/L	10.0	
172 Tables & Chairs	3/28/06	778.51	0.00	0.00	369.79	77.85	447.64	330.87	S/L	10.0	
175 Office Furnishings	4/01/06	2,400.00	0.00	0.00	1,140.00	240.00	1,380.00	1,020.00	S/L	10.0	
177 Conference Room Chairs x33	7/19/07	3,959.67	0.00	0.00	1,352.90	395.97	1,748.87	2,210.80	S/L	10.0	
186 Tables & Chairs (used)	12/20/07	1,540.00	0.00	0.00	669.17	220.00	889.17	650.83	S/L	7.0	
188 Equa Sled Base Chairs x8(DEI)	1/01/92	939.81	0.00	0.00	939.81	0.00	939.81	0.00	S/L	5.0	
192 Chameleon Divider	3/03/08	285.00	0.00	0.00	115.35	40.71	156.06	128.94	S/L	7.0	
193 Flat Screen TVs (x8)	3/06/08	7,009.83	0.00	0.00	2,837.30	1,001.40	3,838.70	3,171.13	S/L	7.0	
194 Office Chairs	3/10/08	549.89	0.00	0.00	155.80	54.99	210.79	339.10	S/L	10.0	
195 Conf table with chairs	5/13/08	1,113.87	0.00	0.00	297.04	111.39	408.43	705.44	S/L	10.0	
196 Conf table (x3) with chairs	5/22/08	3,375.62	0.00	0.00	872.03	337.56	1,209.59	2,166.03	S/L	10.0	
197 Conf table (x4) & chairs	6/13/08	5,831.45	0.00	0.00	1,506.47	583.15	2,089.62	3,741.83	S/L	10.0	
198 Office Furniture	6/13/08	1,883.13	0.00	0.00	694.97	269.02	963.99	919.14	S/L	7.0	
199 Adjustable tables for events (x6)	7/11/08	1,132.76	0.00	0.00	566.38	226.55	792.93	339.83	S/L	5.0	
200 Traxx System Boards (USI space)	7/31/08	3,301.00	0.00	0.00	1,139.63	471.57	1,611.20	1,689.80	S/L	7.0	
201 Desk	12/29/08	255.00	0.00	0.00	72.86	36.43	109.29	145.71	S/L	7.0	
202 Furniture for Suite 505	12/31/08	7,976.00	0.00	0.00	2,278.86	1,139.43	3,418.29	4,557.71	S/L	7.0	
214 Signage - Movable	4/17/09	3,400.85	0.00	0.00	566.81	340.09	906.90	2,493.95	S/L	10.0	
221 Conf Room Chairs	6/01/10	556.35	0.00	0.00	32.45	55.64	88.09	468.26	S/L	10.0	
Office Furnishings		63,103.74	0.00c			25,821.55	7,157.75	32,979.30	30,124.44		
Group: SBIC Buildings & Improvs											
122 Phone & Alarm System	8/09/99	1,000.00	0.00	0.00	1,000.00	0.00	1,000.00	0.00	S/L	7.0	
131 Sonitrol Security Sys-SBIC	10/29/99	2,070.00	0.00	0.00	2,070.00	0.00	2,070.00	0.00	S/L	7.0	
136 AC Units	7/30/01	10,040.00	0.00	0.00	5,523.00	502.00	6,025.00	4,015.00	S/L	20.0	
145 AC Unit	3/02/02	2,153.36	0.00	0.00	1,132.00	107.67	1,239.67	913.69	S/L	20.0	
146 Wall Renovations	8/21/02	797.92	0.00	0.00	775.00	22.92	797.92	0.00	S/L	10.0	
147 Industrial Center	1/01/99	185,643.00	0.00	0.00	79,125.00	5,891.08	85,016.08	100,626.92	S/L	40.0	
148 Industrial Center - Land	1/01/99	71,534.00	0.00	0.00	0.00	0.00	0.00	71,534.00	Land		

351798568 GROWTH ALLIANCE FOR GREATER
35-1798568
FYE: 12/31/2011

Book Asset Detail 1/01/11 - 12/31/11

11/14/2012 12:42 PM
Page 3

Asset Group: <u>SBIC Buildings & Improvs</u> (continued)	d	t	Property Description	Date In Service	Book Cost	Book Sec 179 Exp	Book Sal Value	Book Prior Depreciation	Book Current Depreciation	Book End Depr	Book Net Book Value	Book Method	Book Period
149			Heating & AC for SBIC	11/07/03	7,456.00	0.00	0.00	1,553.00	186.40	1,739.40	5,716.60	S/L	40.0
150			Roof - SBIC	1/14/03	4,198.00	0.00	0.00	978.00	104.95	1,082.95	3,115.05	S/L	40.0
152			HC Unit	3/15/03	730.23	0.00	0.00	334.00	36.51	370.51	359.72	S/L	20.0
156			Loading Dock Improvements	9/30/04	502.35	0.00	0.00	91.00	12.56	103.56	398.79	S/L	40.0
157			Circuit Work	2/14/04	505.70	0.00	0.00	102.00	12.64	114.64	391.06	S/L	40.0
158			Signs	3/26/04	178.50	0.00	0.00	94.00	11.90	105.90	72.60	S/L	15.0
166			Warehouse Space	12/16/04	8,416.00	0.00	0.00	1,461.00	210.40	1,671.40	6,744.60	S/L	40.0
168			Warehouse Space	4/08/05	842.00	0.00	0.00	140.00	21.05	161.05	680.95	S/L	40.0
169			Warehouse Space	5/06/05	607.87	0.00	0.00	100.00	15.20	115.20	492.67	S/L	40.0
215			Light Fixtures & Wiring	4/20/09	728.00	0.00	0.00	66.00	36.40	102.40	625.60	S/L	20.0
220			Lighting	10/01/10	972.00	0.00	0.00	6.00	48.60	54.60	917.40	S/L	20.0
			SBIC Buildings & Improvs		298,374.93	0.00c		94,550.00	7,220.28	101,770.28	196,604.65		
			Grand Total	934,664.21	0.00c		0.00	212,131.80	45,298.66	257,430.46	677,233.75		

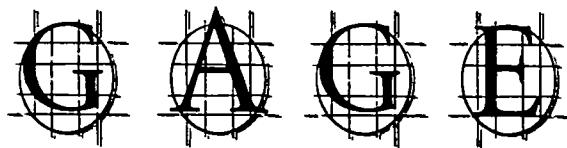
Federal Statements**Taxable Interest on Investments**

Description	Amount	Unrelated Business Code	Exclusion Code	Postal Code	Acquired after 6/30/75	US Obs (\$ or %)
INTEREST	\$ 4,115				14	
TOTAL	\$ 4,115					

Federal Statements

Form 990, Part IX, Line 24e - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
ASSET IMPAIRMENT	\$ 50,000	\$ 50,000		
OTHER EXPENSES	24,150	20,527	2,415	
CLEANING	20,527	19,501	1,026	
EQUIPMENT LEASES	16,821	15,139	1,682	
TELEPHONE	7,734	7,192	387	
SUPPLIES	6,154	5,538	308	
BAD DEBTS	5,416	5,416		
OFFICE EXPENSES	5,065	4,305	507	
DUES & SUBSCRIPTIONS	4,811	4,811		
DISPOSAL SERVICE	4,110	3,288	411	
POSTAGE & SHIPPING	2,225	1,335	445	
SECURITY SYSTEM	1,278	1,214	64	
TOTAL	\$ 148,291	\$ 138,266	\$ 7,245	\$ 2,780



growth alliance *for* greater evansville

D OF DIRECTORS 2012

Dan Arens (Vice Chair)

Retired Chairman & Co-founder of Keller
Schroeder & Associates, Inc.
1 Riverbend Court
Newburgh, IN 47630
(812) 760-4871 cell
darens@wowway.com

Brent Beeler

Former Chief Operating Officer
Berry Plastics Corporation
620 Winterwood Drive
Evansville, IN 47715
(812) 499-5270
brentbeeler@gmail.com

Mark Bernhard

Associate Provost for Outreach and Engagement
University of Southern Indiana
8600 University Blvd.
Evansville, IN 47712
(812) 228-5098
(814) 876-0238 (cell)
mcbernhard@usi.edu

Daniel Bugher

Vice President, Performance Management
Vectren Corporation
One Vectren Square, P.O. Box 209
Evansville, IN 47708
(812) 491-4185
dbugher@vectren.com

Stephani Catt

Executive Vice President-Chief Operating Officer
Uniseal, Inc.
1014 Uhlhorn St.
Evansville, IN 47710
(812) 425-1361
scatt@uniseal.com

Carrie Ellspermann (Chair)

President, Old National Wealth Management
One Main Street, P.O. Box 207
Evansville, IN 47702-0207
(812) 464-1307
Carrie.Ellspermann@oldnational.com

Nelson Ford

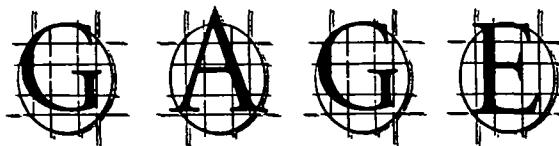
Senior Vice President-Business Banking
Executive
Fifth Third Bank
20 N.W. Third Street
4th Floor, Main Office
MD KT0043
Evansville, IN 47708-1200
(812) 456-3872
nelson.ford@53.com

Scott Gordon

Dean, Pott College of Science, Engineering, &
Education
University of Southern Indiana
8600 University Blvd.
Evansville, IN 47712
(812) 465-7137
sgordon@usi.edu

Philip Hooper

Executive Director
Department of Metropolitan Development
306 Civic Center Complex
One NW Martin Luther King, Jr. Blvd
Evansville, IN 47708
(812) 436-7825
phooper@evansvillegov.org



growth alliance *for* greater evansville

D OF DIRECTORS 2012

Doug Joest (Treasurer)

Airport Manager
Evansville Vanderburgh Airport Authority
7801 Bussing Drive
Evansville, IN 47725
(812) 421-4401
doug@evvairport.com

Ron Keeping

Retired Director of Economic Development
Vectren Corp.
3411 Eastbrooke Ct.
Newburgh, IN 47630
(812) 457-5753
rkeeping@wowway.com

Stephen Melcher

Commissioner, Vanderburgh County
901 East Idlewild Drive
Evansville, IN 47711
(812) 435-5241
(812) 909-2284 home
(812) 480-9088 cell
smelcher@vanderburghgov.org
smelcher@stephen-melcher.com

Tom Shetler, Jr.

President, County Council
4713 Weaver Road
Evansville, IN 47711
(812) 421-7750
tomjr@shetlermoving.com

Stephen Standifird

Dean, Schroeder Family School
of Business Administration
University of Evansville
1800 Lincoln Avenue
Evansville, IN 47722
(812) 488-2866
ss500@evansville.edu

Sabrina Stewart-Thomas

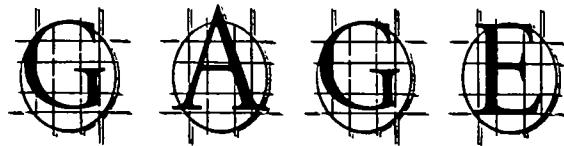
Associate
Aflac
8601 N Kentucky Ave. Suite F
Evansville, IN 47725
(812) 867-3760 office
(937) 313-9382
(812) 484-9231 cell
(812) 867-3761 fax
sabrina_stewartthomas@us.aflac.com

Alfonso Vidal

Omni Plastics, LLC
2300 Lynch Rd
Evansville, IN 47711
(812) 431-8075
alfonsovidal@att.net

Turk Walton (Secretary)

President, Evansville Auto Parts Foundation
GM, Ocean Beach Lake Cottage Rentals
13113 Browning Road
Evansville, IN 47725
(812) 499-9112 cell
twalton@evansville.net



growth alliance *for* greater evansville

D OF DIRECTORS 2012

Greg Wathen

President & CEO
Economic Development Coalition of SW Indiana
318 Main Street
Suite 400
Evansville, IN 47708
(812) 423-2020
GWathen@southwestindiana.org

Lloyd Winnecke

Mayor, City of Evansville
One N.W. Martin Luther King Jr. Blvd.
Room 302
Evansville, IN 47708
(812) 436-4962
lwinnecke@evansvillegov.org

Marvin Wright

Partner, Kemper CPA Group LLP
7200 Eagle Crest Blvd.
Evansville, IN 47715
(812) 421-8000
mwright@kcpag.com

Jerry Yezbick

Community and Member Outreach Specialist
Southwest Region Anthem Healthy Indiana Plan
7501 Eagle Crest Boulevard
Evansville, IN 47715
(812) 469-7539
(317) 201-2989 (cell)
Jerry@engagingsolutions.net

Woody Youngs

Senior Vice President
Product Acceptance & Research
P.O. Box 3126
Evansville, IN 47731
(812) 214-2055
woody.youngs@par-research.com

Form **8868**
(Rev January 2012)Department of the Treasury
Internal Revenue Service**Application for Extension of Time To File an
Exempt Organization Return**

OMB No 1545-1709

► File a separate application for each return.

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box
- If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension-check this box and complete

Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Enter filer's identifying number, see instructions

Type or print File by the due date for filing your return. See instructions	Name of exempt organization or other filer, see instructions GROWTH ALLIANCE FOR GREATER EVANSTVILLE, INC.	Employer identification number (EIN) or 35-1798568
	Number, street, and room or suite no. If a P.O. box, see instructions. 318 MAIN STREET, SUITE #500	Social security number (SSN) <input type="checkbox"/>
	City, town or post office, state, and ZIP code. For a foreign address, see instructions EVANSTVILLE IN 47708	

Enter the Return code for the return that this application is for (file a separate application for each return) **01**

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

GAGE**318 Main Street**

- The books are in the care of ► **Evansville** IN 47718

Telephone No. ► **812-401-4849**

FAX No ►

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until _____, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

► calendar year _____ or► tax year beginning _____, and ending _____

2 If the tax year entered in line 1 is for less than 12 months, check reason Initial return Final return
 Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions

3a \$

b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit

3b \$

c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions

3c \$ **Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

DAA

8868 (Rev. 1-2012)

Form 8868 (Rev. 1-2012)

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box
- Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868
- If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1)

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Enter filer's identifying number, see instructions

Type or print File by the due date for filing your return. See instructions	Name of exempt organization or other filer, see instructions GROWTH ALLIANCE FOR GREATER EVANSVILLE, INC.	Employer identification number (EIN) or 35-1798568
	Number, street, and room or suite no. If a P O box, see instructions. 318 MAIN STREET, SUITE #500	Social security number (SSN) <input type="checkbox"/>
	City, town or post office, state, and ZIP code. For a foreign address, see instructions EVANSVILLE IN 47708	

Enter the Return code for the return that this application is for (file a separate application for each return)

01

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 1041-A	
Form 990-BL	02	Form 4720	08
Form 990-EZ	01	Form 5227	09
Form 990-PF	04	Form 6069	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 8870	11
Form 990-T (trust other than above)	06		12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**GAGE****318 Main Street, Suite #500****IN 47708**

- The books are in the care of ► **Evansville**
- Telephone No. ► **FAX No. ►**
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box ► If it is for part of the group, check this box ► and attach a list with the names and EINs of all members the extension is for

4 I request an additional 3-month extension of time until **11/15/12**5 For calendar year **2011**, or other tax year beginning , and ending 6 If the tax year entered in line 5 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

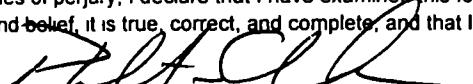
7 State in detail why you need the extension

Taxpayer needs additional time to gather information necessary to file a complete and accurate return.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	8a	\$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	8c	\$

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature ► Title ► **CPA**Date ► **08/14/12**Form **8868** (Rev. 1-2012)