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Form **990**

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2011

Open to Public

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

Department of the Treasury Internal Revenue Service

		2011 cale	In e organization may have to use a copy of this return to satisfy state andar year, or tax year beginning , 2011, and en		equirements	, 20
_			C Name of organization Waverly Area Development Gro		D Empl	oyer identification number
$\overline{}$		applicable	Doing Business As Waverly Chamber of Commerce	oup		•
_	Address	•	Number and street (or P O box if mail is not delivered to street address) Room	/curto		1588697 hone number
	Name ch	-	118 E Bremer Ave	rsuite		352-4526
\vdash	Initial ret		City or town, state or country, and ZIP + 4		319-	.332-4326
님	Termina					010070
님	Amende		Waverly IA 50677			s receipts \$ 218879
Ш	Applicat	ion pending	F Name and address of principal officer	I		um for affiliates? Yes X No
				——————————————————————————————————————	Are all affiliates	
<u></u>		mpt status				a list (see instructions)
<u></u>	Websit				Group exempt	
			Corporation	rmation 19	85 M Sta	ite of legal domicile Iowa
۲	art I	Summ				
	1	Briefly de	escribe the organization's mission or most significant activities			
ė		Publi	c relations, tourism and economic deve	Lopmen	t in th	ne City
and		oi wa	verly Iowa			
era						
Governance	2		is box if the organization discontinued its operations or disposed of more than 2	5% of its net	1	1
	3		of voting members of the governing body (Part VI, line 1a).		3	14
es/	4		of independent voting members of the governing body (Part VI, line 1	b)	4	14
<u>~</u>	5		mber of individuals employed in calendar year 2011 (Part V, line 2a)		5	6
MARActivities	6		mber of volunteers (estimate if necessary)		6	84
₹	7a		elated business revenue from Part VIII, column (C), line 12		7a	
	b	Net unre	ated business taxable income from 50m 990-1, line 34	T	7b	
\supset			RECEIVED	or Year	Current Year	
	8		tions and grants (Part VIII, line 1h) .	146694	183993	
	9		service revenue (Part VIII, line 2g) MAR 1 8 2013 · O		0	
₩.	10		ent income (Part VIII, column (A), lines 3 4, and 7d)		3	
ก	11		/enue (Part VIII, column (A), lines 5, 6d, 8c , 9c, 10c, and 11e)		26141	
_	12		enue—add lines 8 through 11 (must equal Ran VIII) column (A), line 12)		172838	210061
	13		nd similar amounts paid (Part IX, column (A), lines 1–3)			0
	14		paid to or for members (Part IX, column (A), line 4)			0
es	15		other compensation, employee benefits (Part IX, column (A), lines 5–10)		105061	102876
Expenses	16a		onal fundraising fees (Part IX, column (A), line 11e)			0
Š	b		draising expenses (Part IX, column (D), line 25) ▶			
ш	17		penses (Part IX, column (A), lines 11a-11d, 11f-24e)		53228	
	18		penses. Add lines 13–17 (must equal Part IX, column (A), line 25)		158289	
	19	Revenue	less expenses Subtract line 18 from line 12		14549	
Net Assets or Fund Balances				Beginning	of Current Yea	
Set	20		ets (Part X, line 16)		76217	121109
et A	21		olities (Part X, line 26)		0	
			ts or fund balances Subtract line 21 from line 20		76217	121109
_	art II		ture Block			
Un	der pena	ities of perju	iry, I declare that I have examined this return, including accompanying schedules and st	atements, an	d to the best of	f my knowledge and belief, it is
	e, conec	t, and comp	lete Declaration of preparer (other than officer) is based on all information of which prep	arer has any l	knowledge 1	
0:					$\perp 500$	1/12
Sig	-	Sign	etter of the control		Date	<i>[</i>
He	re		mily Tenendot Executive Director			
		1.	e or print name and title			
Pa	id		pe preparer's name Preparer's signature	Date /	Check	PTIN
	ераге	Keit	th Oltrogge	5/9//		mployed P00556907
	e Onl		mame ► Keith Oltrogge CPA PCUVVIII	7-11		01-0852927
		Firm's a	ddress ► PO Box 310 Denver IA 50622			19-984-5292
Ма	y the IF	RS discus	s this return with the preparer shown above? (see instructions)			Yes No
			ction Act Notice, see the separate instructions			Form 990 (2044)

1	Check if Schedule O contains a response to any question in this Part III Briefly describe the organization's mission:		
	Public relations, tourism and economic development in the City Waverly Iowa.	of	
2		☐ Yes	⊠ No
3	If "Yes," describe these new services on Schedule O Did the organization cease conducting, or make significant changes in how it conducts, any program services?	☐ Yes	⊠ No
ā	If "Yes," describe these changes on Schedule O		
4	Describe the organization's program service accomplishments for each of its three largest program services, a expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report grants and allocations to others, the total expenses, and revenue, if any, for each program service reported		
4a	(Code)(Expenses \$ 133025 including grants of \$)(Revenue \$ 25 Public relations, tourism and economic development in the City of Waverly Iowa.		·
4b	(Code) (Expenses \$including grants of \$) (Revenue \$)
			· · · · · · · · · · · · · · · · · · ·
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$)
			·
4d	Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$)		
4e	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ▶ 133025		

	0 (2011)		F	age •
Part.	Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
•	complete Schedule A	1		х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	·	х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> .	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in 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		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8		х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV			
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	9		Х
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	х	-
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII .	11c		Х
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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	11e		X
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
b	Schedule D, Parts XI, XII, and XIII Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	12a		Х
13	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
14 a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13 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		×
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		Х
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	х	
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
20 a	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?

20a

20b

Part	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		х
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		х
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		х
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		х
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		x
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b	:	
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or 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		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		х
С	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	28c		х
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29		Х
31	conservation contributions? <i>If "Yes," complete Schedule M</i> . Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N</i> ,	30		х
32	Part I	31		х
33	complete Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		х
34	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		х
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		х
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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	35a 35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
38	Part VI. Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	37		Х
	19? Note. All Form 990 filers are required to complete Schedule O	38	Х	

art	Y Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V			
4-	5 t th		Yes	No
1a b	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1a 0 1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			ĺ
•	reportable gaming (gambling) winnings to prize winners?	1c	N	_A_
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 6			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	<u> </u>
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			١
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a 3b		X
b 4a	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O At any time during the calendar year, did the organization have an interest in, or a signature or other authority	30		
ча	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			l
	account)?	4a		×
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts		ļ. i	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? .	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
c 6a	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? . Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	5c		
Va	organization solicit any contributions that were not tax deductible?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7b		
·	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			<u> </u>
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	N	A
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		X
9	Sponsoring organizations maintaining donor advised funds.	<u> </u>		
а	Did the organization make any taxable distributions under section 4966?	9a		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		Х
10	Section 501(c)(7) organizations. Enter			Ì
a b	Initiation fees and capital contributions included on Part VIII, line 12	-		
11	Section 501(c)(12) organizations. Enter:	1		Ì
a	Gross income from members or shareholders			
þ	Gross income from other sources (Do not net amounts due or paid to other sources	1. # ^ _ ^	ļ	1
	against amounts due or received from them.)	·		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	ļ	<u> </u>
b 42	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . [12b]	A CONTRACTOR	3, 193	3" + 18
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		, to bother	-
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a	Phys. Tax	1,42
b	Enter the amount of reserves the organization is required to maintain by the states in which	160		196
_	the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand	1	l	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	<u> </u>	X
_ <u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	<u> </u>	

FCILL					
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes Check if Schedule O contains a response to any question in this Part VI	in Schedule O S	ee ins	structi	
Secti	on A. Governing Body and Management				_ <u>X</u>
	on A. Governing Body and Management			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 14			
	If there are material differences in voting rights among members of the governing body, or				
	if the governing body delegated broad authority to an executive committee or similar				
	committee, explain in Schedule O				
b	Enter the number of voting members included in line 1a, above, who are independent	1b 14			
2	Did any officer, director, trustee, or key employee have a family relationship or a business re	elationship with			
	any other officer, director, trustee, or key employee?		2		Х
3	Did the organization delegate control over management duties customarily performed by or u	inder the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other	person?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 99	0 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization	n's assets? .	5		Х
6	Did the organization have members or stockholders?		6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to e	elect or appoint			
	one or more members of the governing body?	•	7a		Х
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		Х
8	Did the organization contemporaneously document the meetings held or written actions und	iertaken during			
	the year by the following				
а	The governing body?		8a	Х	_
b	Each committee with authority to act on behalf of the governing body?		8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot the organization's mailing address? If "Yes," provide the names and addresses in Schedule O				
Sacti	on B. Policies (This Section B requests information about policies not required by the		9	040	Х
Secu	on B. Policies (This Section B requests information about policies not required by the	internal Kever	ue C	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a	, 00	X
b	If "Yes," did the organization have written policies and procedures governing the activities of	such chapters	IVa		Λ
_	affiliates, and branches to ensure their operations are consistent with the organization's exemp		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before		11a		Х
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? <i>If "No," go to line 13</i>		12a		<u>X</u>
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	rise to conflicts?	12b		
C	Did the organization regularly and consistently monitor and enforce compliance with the p describe in Schedule O how this was done				
42			12c		
13 14	Did the organization have a written whistleblower policy?		13		Х
15	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review at	nd approval by	14	_	Х
	independent persons, comparability data, and contemporaneous substantiation of the deliberation	and decision?			
а	The organization's CEO, Executive Director, or top management official	aa accioio	15a		
b	Other officers or key employees of the organization	•	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		.05		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar	ar 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	*****	ı	
	participation in joint venture arrangements under applicable federal tax law, and take steps to	safeguard the	15	4	
	organization's exempt status with respect to such arrangements?		16b		
Secti	on C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed ▶				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and available for public inspection. Indicate how you made these available. Check all that apply	d 990-T (Section	501(0	c)(3)s	only
	☐ Own website ☐ Another's website ☐ Upon request				
19	Describe in Schedule O whether (and if so, how), the organization made its governing docur	mente conflict s	Finta-	.oc+ ~	داید.
	and financial statements available to the public during the tax year	nema, comiict o	ппег	esi p	OIICY
20	State the name, physical address, and telephone number of the person who possesses the bo	oke and ropords	of the		
	organization: ► Emily Neuendorf 118 E Bremer Ave Waverly I	A 50677	oi iiie		
	319-352-4526	30077	Fe	990	(2011
			LOIL	・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・	(2011

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 organization compensated any current officer, director, or trustee

Check this box if fleither the organization no	City (Clate	(C)							t omoor, aneoto	i, or trustee
(A) Name and Title	(B) Average hours per week	box, office	unles er and	Pos neck ss pe d a d	more rson irect	e than o	n an tee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Kelly Engelken Exec Dir						!				
Waverly IA	40				Х	х		27282	0	0
(2) Emily Neuendorf Exec Dir										
Waverly IA	40				Х			9023	0	0
(3) Carol Bruxvoort Sec/Dir						ĺ			_	
Waverly IA	25	Х			Х			13614	0	0
(4) Tiffany Kudron Director Waverly IA	40]			26400		
(5) Eugene Lieb Director	40	Х			X			26492	0	0
Waverly IA	25	х		i	Х			8613	0	0
(6) Brett Matthias Bd Member	2.5	^			^		┝┈	0013	0	<u> </u>
Waverly IA	2	х						0	0	0
(7) Dan Kielman										
Waverly IA	2	х						0	0	0
(8) Darcy Knights										
Waverly IA	2	Х						0	0	0
(9) Sheila Boeckmann	_								_	
Waverly IA	2	Х		L_				0	0	0
(10)Christa Leary Waverly IA	2	x						0	0	0
(11) Travis Nuss				-						
Waverly IA	2	х						0	0	0
(12) Duff Ridgeway							1			
Waverly IA	2	х						0	0	0
(13)Steve Egli										
Waverly IA	2	x						0	0	0
(14)Cindy Hendrickson									_	
Waverly IA	2	Х						0	0	0

Part	VII Section A. Officers, Directors, Trus	stees, Key	Emple	oyee	2 5 , 2	and	High	est	Compensated	Employees (c	ontinued)
	(A) Name and title	(B) Average hours per week	box, office	unles er and	Pos neck s pe	rson	than o	an tee)	(D) Reportable compensation from	(E) Reportable compensation fr	(F) Estimated om amount of other
		(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS	
	arty Johnson	2							_		
(16)	averly IA	2	Х		ļ	-		ļ	0		0 0
(17)											
(18)											
(19)											
(20)											
(21)											
(22)											
(23)		_									
(24)		-									
(25)											
1b c	Sub-total Total from continuation sheets to Part	VII, Section	on A		<u> </u>	1	·	>	85024		0 0
d	Total (add lines 1b and 1c) . Total number of individuals (including but	t not limited	d to th	nose	e list	ed	above	e) w	85024	ore than \$100	0 0 0 000 of
	reportable compensation from the organ										
3	Did the organization list any former of employee on line 1a? If "Yes," complete							emp	oloyee, or high	nest compens	sated Yes No
4	For any individual listed on line 1a, is the organization and related organizations individual										
5	Did any person listed on line 1a receive of for services rendered to the organization									zation or indiv	
	on B. Independent Contractors										1 - 1 - 1
1	Complete this table for your five highest compensation from the organization. Repyear.										
	(A) Name and business add	Iress							(B) Description of s	ervices	(C) Compensation
NONE								-			
											
2	Total number of independent contractor received more than \$100,000 of compens	ors (includii sation from	ng bu	ıt n	ot I	lımıt tion	ed to	th	nose listed abo	ove) who	

Part	VIII	Statement of Revenue						
					(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
				-		revenue		512, 513, or 514
ints	1a	Federated campaigns .	1a					1
Gra	b	Membership dues	1b	115350				
ts, An	C	Fundraising events	1c				•	
Gif	d	Related organizations	1d					
JS,	е	Government grants (contributions)	1e	49504				1
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, grants,						
ibu		and similar amounts not included above	1f	19139				
d	g	Noncash contributions included in lines 1a-	-1f [.] \$					
	h	Total. Add lines 1a-1f		.>	183993			
Program Service Revenue				Business Code				
ver	2a							
Re	b							
vice	C							
Ser	d							
E	е							
gu	f	All other program service revenu	ie					
P	g	Total. Add lines 2a-2f .		. •	0	` `		
	3	Investment income (including	dıvıd	ends, interest,				
		and other similar amounts)		>	111			111
	4	Income from investment of tax-exer	mpt b	ond proceeds ►				
	5	Royalties .		▶				
		(i) Real		(ii) Personal	A	-		
	6a	Gross rents		-			•	!
	b	Less rental expenses				- 17		1
	С	Rental income or (loss)	0	0				'
	d	Net rental income or (loss)		>	0			
	7a	Gross amount from sales of (i) Securit	ies	(iı) Other	4. 2 0.	,		1
		assets other than inventory			7	* "	6	1
	b	Less cost or other basis			min to			
		and sales expenses				"Tanga		'
	С	Gain or (loss) .	0	0	nge stanto	, A	•	İ
	d	Net gain or (loss)		>	0			
		, ,			13 1 July 1957	Jr.	1	,
Щe	8a	Gross income from fundraising				, , ,	· ·	1
Λe		events (not including \$				30	_	
Re		of contributions reported on line 1	c)		See the second		, "	
ē	0	See Part IV, line 18 .	а	27242	The same is a	100	,	
Other Rever	b	Less direct expenses .	b	8818		103		,
•	С	Net income or (loss) from fundra	using	events	18424	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	9a	Gross income from gaming activi	ties.		17. 36. 4. 2.	5- E. B	****	,
		See Part IV, line 19	а				ve. 640	
	b	Less direct expenses	b					ļ <u>-</u>
	С	Net income or (loss) from gamin	g act	vities .	0			
	10a	Gross sales of inventory,	less			3.8	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	* * * * * * * * * * * * * * * * * * *
		returns and allowances	а		The state of the s	a fight party	Farm Train Salation	Min Maria Comment
	b	Less cost of goods sold .	. b		The same of the sa		些 教艺 200	37
	С	Net income or (loss) from sales of	of inv	entory .	0	32.		
		Miscellaneous Revenue		Business Code	THE STATE OF THE S	"大学"		
	11a	Miscellaneous	-	541900	7533	7533	arandomikahi Karimakhani adil Maranzara (h	The state of the s
	b							
	С							
	d	All other revenue						
	е	Total. Add lines 11a-11d		>	7533			
:	12	Total revenue. See instructions		. ▶	210061	7533		111

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)

	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	8b, 9b, and 10b of Part VIII. Grants and other assistance to governments and		expenses	general expenses	expenses
'	organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22 .				
3	Grants and other assistance to governments, organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	85024	74132	10892	
6	Compensation not included above, to disqualified	03024	74132	10032	
0	persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages .				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				L
9	Other employee benefits	7393	5175	2218	
0	Payroll taxes	10459	7321	3138	
1	Fees for services (non-employees)				
а	Management .				
b	Legal .	10-			
С	Accounting	1255		1255	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17		ή		
f	Investment management fees				
g	Other	23915	23915		
2 3	Advertising and promotion	7936	5555	2381	
3 4	Information technology	1659	1659	2301	
5	Royalties		1003		
6	Occupancy	12181	8527	3654	
7	Travel				
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	2722	2722		
0	Interest .				
1	Payments to affiliates				
2	Depreciation, depletion, and amortization .	600		600	
3	Insurance	2748	I	2748	
4	Other expenses Itemize expenses not covered		医食物管系统	事意产品	,
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column	Ext. F. P. MY	慈慈悲中		C 120 4 .
	(A) amount, list line 24e expenses on Schedule O.)	E A STEEL		16 P. 18 18 18 18 18 18 18 18 18 18 18 18 18	**************************************
а	Telephone	1727	1209	518	Salamon College Salamon Salamo
a b	Supplies	91	91	210	
C	Repairs/Maintenance	4740) — — — — — — — — — — — — — — — — — — —	4740	
ď	Dues/Subscriptions	1282	1282	7/40	
e	All other expenses Miscellaneous	1437	1437		
5	Total functional expenses. Add lines 1 through 24e	165169	133025	32144	<u> </u>
<u>.</u>	Joint costs. Complete this line only if the	100103	133023	22144	<u> </u>
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if	1			
	following SOP 98-2 (ASC 958-720)	I .			

Part X Balance Sheet

	art X	Balance Sheet	(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	73002	1	38458
	2	Savings and temporary cash investments	872	2	80908
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
S.	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	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or			
		other basis Complete Part VI of Schedule D 10a 3000			
	b	Less accumulated depreciation . 10b 1257	2343	10c	1743
	11	Investments—publicly traded securities		11	
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11.		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	76217	16	121109
	17	Accounts payable and accrued expenses	. <u></u> .	17	
	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	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
Lia	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties .		24	.
	25	Other liabilities (including federal income tax, payables to related third		24	
		parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		.	
	26	Total liabilities. Add lines 17 through 25	0	25 26	
- sa		Organizations that follow SFAS 117, check here ► ☑ and complete lines 27 through 29, and lines 33 and 34.	* *	20	0
Š	27	Unrestricted net assets	76217		121109
ala	28	Temporarily restricted net assets	70217	27 28	121109
В Ш	29	Permanently restricted net assets		28	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34.		23	į.
ts c	30	Capital stock or trust principal, or current funds	\ and handshaman \ and handshaman \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	30	
Se	31	Paid-in or capital surplus, or land, building, or equipment fund .		31	
As	32	Retained earnings, endowment, accumulated income, or other funds		32	
et	33	Total net assets or fund balances	76217	33	121109
~	34	Total liabilities and net assets/fund balances	76217	34	121109
			, 021	U-7	Form 990 (2011)

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Page	7	-
raue		-

Part X					
	Check if Schedule O contains a response to any question in this Part XI	•			
1 1	Fotal revenue (must equal Part VIII, column (A), line 12)	1	I	210	061
	Total expenses (must equal Part IX, column (A), line 25)	2		165	169
	Revenue less expenses Subtract line 2 from line 1	3			892
	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			217
	Other changes in net assets or fund balances (explain in Schedule O)	5			
	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33,				
C	column (B))	6		121	109
Part X			•		
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
	Accounting method used to prepare the Form 990 🛛 Cash 🗌 Accrual 🔲 Other				
	f the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O	plaın	ın		1
2a V	Nere the organization's financial statements compiled or reviewed by an independent accountant?		2a	X	
	Vere the organization's financial statements audited by an independent accountant?		2b		х
c II	f "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or of the audit, review, or compilation of its financial statements and selection of an independent accou			x	
	f the organization changed either its oversight process or selection process during the tax year, ex Schedule O	plaın	ın		
	f "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the ye ssued on a separate basis, consolidated basis, or both	ar we	re		
5	Separate basis Consolidated basis Both consolidated and separate basis				
3a A	As a result of a federal award, was the organization required to undergo an audit or audits as set he Single Audit Act and OMB Circular A-133?	forth	ın 3a		×
	f "Yes," did the organization undergo the required audit or audits? If the organization did not under	rao ti		+	 ^-
	equired audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b		
			For	m 990	(2011)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.
 See separate instructions.

OMB No 1545-0047
2011
Open to Public

Inspection

Department of the Treasury Internal Revenue Service

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

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

If the organization answered "Yes" to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- · Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

t t	the organization answered "Yes" to Form 990, Part IV, line 5 (Proxy	Tax) or Fo	orm 990-EZ,	Part V, line	35c (Proxy	Tax), then
•	 Section 501(c)(4), (5), or (6) organizations. Complete Part III 					

Name	of organization			Employe	ridentification number
Ŵave	erly Area Devel	opment Group		42-05	88697
Part	I-A Complete if th	e organization is exempt und	er section 501(d	c) or is a section 5	27 organization.
1		the organization's direct and indire	ct political campa	ign activities in Part I	V
2	Political expenditures				\$
3	Volunteer hours				
Part		e organization is exempt und			
1		excise tax incurred by the organiza			• \$
2		excise tax incurred by organization	•		> \$
3	_	ed a section 4955 tax, did it file Fo	m 4720 for this ye	ear? .	Yes No
4a	Was a correction made?		•		∐ Yes ☐ No
b	If "Yes," describe in Part				
Part		e organization is exempt und			
1	activities	ly expended by the filing organiz	ation for section	527 exempt function	
•		films assessment of first and a section			\$
2	527 exempt function acti	filing organization's funds contrib	uted to other org	anizations for sectio	
3			 Enter here and		\$
•	line 17b	expenditures Add lines 1 and 2.	Enter here and	on Form 1120-POL	-, ▶ \$
4		n file Form 1120-POL for this year		•	*
5					LYes LNo
3	organization made navm	ses and employer identification nur ents. For each organization listed,	nder (EIN) of all se	ection 527 political of	ganizations to which the filing
	the amount of political co	ontributions received that were pro	mntly and directly	delivered to a separa	ate political organization, such
		fund or a political action committee			
		T			·
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	
				funds If none, enter -	0- promptly and directly
					delivered to a separate political organization. If
					none, enter -0-
(1)					
···					
(2)					
 -					
(3)					
(4)					
			7		
(5)					
(6)					
			! 		

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

Schedule C (Form 990 or 990-EZ) 2011

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Page	4

Pa	it II-A Complete if the organization section 501(h)).	on is exempt u	inder section 50	01(c)(3) and file	d Form 5768 (ele	ction under
A	Check ▶ ☐ If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)					
В	Check ▶ ☐ If the filing organization c			• • •	•	
		bying Expendit		p	(a) Filing	(b) Affiliated
	(The term "expenditures" n)	organization's totals	group totals
1	a Total lobbying expenditures to influence	e public opinion	(grass roots lobby	rina)		==-
	b Total lobbying expenditures to influence					
	c Total lobbying expenditures (add lines	•	· • · · · · · · · · · · · · · · · · · ·			
	d Other exempt purpose expenditures					
	e Total exempt purpose expenditures (ac	d lines 1c and 1	q) ,	•		
	f Lobbying nontaxable amount. Enter		•	n table in both	· · · · · · · · · · · · · · · · · · ·	
	columns	the amount in		y table iii botii		
		The lebbying	nentevable emeun	t in		
	If the amount on line 1e, column (a) or (b) in Not over \$500,000		nontaxable amoun	t is:		
			nount on line 1e			
	Over \$500,000 but not over \$1,000,000		15% of the excess			
	Over \$1,000,000 but not over \$1,500,000		10% of the excess			
	Over \$1,500,000 but not over \$17,000,000		5% of the excess o	ver \$1,500,000		
	Over \$17,000,000	\$1,000,000	-			
	g Grassroots nontaxable amount (enter 2	•				
	h Subtract line 1g from line 1a if zero or		•	•		
	i Subtract line 1f from line 1c. If zero or I	•	46		flo Form 4720	
	j If there is an amount other than zero		in or line ii, aid	the organization	file Form 4/20	☐ Yes ☐ No
	reporting section 4911 tax for this yea	<u>r</u> ?		• • •	•	
	(Some organizations that m columns below	ade a section 5 . See the instru	ctions for lines 2a	not have to com through 2f on pa		
	Lobbyir	g Expenditures	During 4-Year A	veraging Period	, · · · · · · · · · · · · · · · · · · ·	
	Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
- 2	2a Lobbying nontaxable amount					
	b Lobbying ceiling amount (150% of line 2a, column (e))		· · · · · · · · · · · · · · · · · · ·	學在了"人		
	c Total lobbying expenditures					
	d Grassroots nontaxable amount					
	e Grassroots ceiling amount (150% of line 2d, column (e))		於如為養養 為都於沒有	かん かんり あんり		
	f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2011

	(election under section 501(h)).	(a	u l		(b)	
	ach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description le lobbying activity	Yes	No	Aı	mount	:
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			-		,
а	Volunteers?					1
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h i	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?					
j	Total Add lines 1c through 1ı					
2a b	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? . If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part		1/5)	\	ction		
raiji	501(c)(6).	,,,,,, 	<i></i>		T.v.	
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	•		1		Х
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	X	
3 Part	Did the organization agree to carry over lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)	\(F\)		_ 3	<u> </u>	Х
r uit	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OF answered "Yes."				line 3	i, is
1	Dues, assessments and similar amounts from members		1		115	350
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of				
а	Current year		2a			
b	Carryover from last year		2b			
C	Total		2c			0
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby					
	and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions) .		5			0
Part	Supplemental Information					
	elete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, I o, complete this part for any additional information.	Part II		nd Part	II-B,	line
					·	
					, 	•••
						_

chedule C (Forn	hedule C (Form 990 or 990-EZ) 2011 Page 4					
Part IV.	, Supplemental Information (continued)					
•						
•••						

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions.

Open to Public Inspection

Name of the organization Employer identification number Waverly Area Development Group 42-0588697 'Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) 4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No 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 Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 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 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 Total number of conservation easements 2a 2b h Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax year ▶ Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year R 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 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. 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 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	Organizations Maintaining	Collections of	Art, Hist	torical T	Treasures	, or Ot	her Similar As	sets (continued)
3	Using the organization's acquisition, a collection items (check all that apply).	accession, and o	ther recor	ds, chec	k any of th	e follov	ving that are a si	gnificant use of its
а	Public exhibition		d	☐ Loa	an or excha	nge pro	grams	
b	Scholarly research		е	☐ Oth	ner			
C	Preservation for future generation							
4	Provide a description of the organizat XIV	ion's collections	and expla	ain how t	hey further	the org	janization's exem	pt purpose in Part
5	During the year, did the organization assets to be sold to raise funds rather							r Yes No
Part								
	line 9, or reported an amoun	t on Form 990,	Part X, III	ne 21 🍈	•			
1a	Is the organization an agent, trustee, included on Form 990, Part X?	custodian or ot	her interm	ediary fo	or contribut	ions or	other assets no	t Yes No
b	If "Yes," explain the arrangement in Pa	art XIV and comp	lete the fo	llowing t	able			
							Ar	nount
C	Beginning balance					10	;	
d	Additions during the year					1d		
е	Distributions during the year	•				1e		
f	Ending balance .					1f	<u> </u>	
2a	Did the organization include an amour		art X, line	21?				☐ Yes ☐ No
b 3 Pos	If "Yes," explain the arrangement in Pa				"\\" +- F		00 Dart IV I	10
Par	Endowment Funds. Comple	(a) Current year	1		(c) Two year		90, Paπ IV, line (d) Three years back	
10	Beginning of year balance .	(a) Current year	(0) FIR	or year	(c) Two year	15 Dack	(u) Three years back	(a) Four years back
b	Contributions .			· ·		·		
C	Net investment earnings, gains, and							,
	losses							i
	Grants or scholarships	_						
е	Other expenditures for facilities and programs .							,
f	Administrative expenses .							
g	End of year balance		1			ı		
2	Provide the estimated percentage of the	ne current year er	nd balance	e (line 1g	, column (a)) held a	as.	
a	Board designated or quasi-endowmer	nt >	%					
b	Permanent endowment ►	[%]						
С	Temporarily restricted endowment ▶							
2-	The percentages in lines 2a, 2b, and 2							
Ja	Are there endowment funds not in the organization by	possession of th	ie organiz	ation tha	it are held a	and adn	ninistered for the	
	(i) unrelated organizations							Yes No
	(ii) related organizations	•	•					3a(i)
h	If "Yes" to 3a(ii), are the related organizations.			0-1				3a(ii)
4	Describe in Part XIV the intended uses	cations listed as r	equirea o	n Scheal	ule K /			3b
Part						•		
	Description of property	(a) Cost or o			or other basis	(0)	Accumulated	(d) Dook value
		(investr			other)	de	Accumulated epreciation	(d) Book value
1a	Land) ' 1 ⁽²⁾ 1	
b	Buildings							
C	Leasehold improvements .		2022		_			
d	Equipment		3000				1257	1743
e Total	Add lines 1a through 1e. (Column (d) n	nust aqual Form	000 Pad	V action	n (D) line 4	0(0)		
· Juli.	Add intes ta unough re. (Column (a) n	iusi equal Form s	ээυ, гап л	∧, coiumi	ıı (७), iine 1	υ(C))	. •	1743

Part VII	Investments—Other Securities	See Form 990, Part X,	line 12	
' (а) Description of security or category (including name of security)	(b) Book value	(c) Method of va Cost or end-of-year n	
(1) Financial	derivatives			
	neld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D) (E)				
(F)				
(G)				
(H)				
` (I)				
	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 va Cost or end-of-year r	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9) (10)				
	(b) must equal Form 990, Part X, col (B) line 13)		The Post	
Part IX	Other Assets. See Form 990, Pa	ort X line 15		
) Description		(b) Book value
(1)	· · · · · · · · · · · · · · · · · · ·		-	
(2)				
(3)				
(4)				
(5)			-	
(6)				
(7)				
_(8)				
(9)				
(10)	(A)	-1 (0) 1 45)		
	mn (b) must equal Form 990, Part X, c			L.,
Part X	Other Liabilities. See Form 990, (a) Description of liability		The state of the s	
	Income taxes	(b) Book value		* 50
(2)	income taxes			
(3)				
(4)				and the state of t
(5)			- 一个一个一个一个一个	
(6)				17. 李建宁。
(7)			The Control of the Co	
(8)				
(9)				A TOP TO THE PARTY OF THE PARTY
(10)				The same of the sa
(11)			-	
	(b) must equal Form 990, Part X, col (B) line 25)		†	
			<u> </u>	

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)

D	1
Page	•

cneaui	6 D (Form 990) 2011			Page -
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. Comb		10	
Part	XII. Reconciliation of Revenue per Audited Financial State	ments With Reven	ue per Return	
1	Total revenue, gains, and other support per audited financial statemen	nts	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	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			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV)	4b		
С	Add lines 4a and 4b	•	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, I		. 5	
Part.		ements With Expe	nses 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			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
C	Other losses	2c		
d	Other (Describe in Part XIV)	2d		
е	Add lines 2a through 2d .	,	2e	
3	Subtract line 2e from line 1	1 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		ł	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV)	4b		
C	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I,	, line 18 <u>)</u>	5	
Part				
Part V	lete this part to provide the descriptions required for Part II, lines 3, 5, a (, line 4, Part X, line 2; Part XI, line 8, Part XII, lines 2d and 4b; and Part X () diditional information			

chedule D (For	hedule D (Form 990) 2011 Page 5					
Part XIV	Supplemental Information (continued)					
•						
		~~~~~~				
		•				

## SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. Employer Identification number Name of the organization 42-0588697 Waverly Area Development Group Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17 Part I Form 990-EZ filers are not required to complete this part Indicate whether the organization raised funds through any of the following activities. Check all that apply e Solicitation of non-government grants Mail solicitations ☐ Solicitation of government grants Internet and email solicitations Special fundraising events Phone solicitations In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (v) Amount paid to (vI) Amount paid to (III) Did fundraiser have (i) Name and address of individual (or retained by) (iv) Gross receipts (or retained by) (II) Activity custody or control of contributions? fundraiser listed in col (i) from activity or entity (fundraiser) organization Yes No 1 2 3 10 Total List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

Schedule G (Form 990 or 990-EZ) 2011 Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with

		gross receipts greater that	n \$5,000	•		
			(a) Event #1 Golf outing (event type)	(b) Event #2 Wine Tasting (event type)	(c) Other events Christmas Greetings on Mai	(d) Total events (add col (a) through col (c))
Revenue	1 2	Gross receipts Less Charitable	14650	5342	7250	27242
	3	contributions . Gross income (line 1 minus line 2)	14650	5342	7250	<u>0</u> 27242
	4	Cash prizes .				0
	5	Noncash prizes				0
uses	6	Rent/facility costs				0
Direct Expenses	7	Food and beverages .		522		522
Direct	8	Entertainment .				0
	9	Other direct expenses	5509	284	2503	. 8296
	10 11	Direct expense summary Ad Net income summary Combi	ne line 3, column (d), ai	nd line 10	<b>&gt; &gt;</b>	( 8818) 18424
Pa	rt III	Gaming. Complete if the than \$15,000 on Form 99		ed "Yes" to Form 990	), Part IV, line 19, or re	eported more
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Re	1	Gross revenue				
ses	2	Cash prizes .				
Direct Expenses	3	Noncash prizes .				
Direct	4	Rent/facility costs .				· "
	5	Other direct expenses				
	6	Volunteer labor	☐ Yes % ☐ No	☐ Yes % ☐ No	☐ Yes % ☐ No	
	7	Direct expense summary Ad	d lines 2 through 5 in co	olumn (d)	•	( )
	8	Net gaming income summary	Combine line 1, colum	nn d, and line 7		
	a is	nter the state(s) in which the or the organization licensed to op 'No," explain:	- · •	in each of these states?		. Yes No
10		ere any of the organization's ga 'Yes," explain.	amıng licenses revoked			☐ Yes ☐ No

Schedu	ile G (Form 990 or 990-EZ) 2011		Page <b>3</b>					
11	Does the organization operate gaming activities with nonmembers?	☐ Yes	☐ No					
12	'Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity	_	_					
43	formed to administer charitable gaming?	Yes	☐ No					
13	Indicate the percentage of gaming activity operated in		%					
a b	The organization's facility An outside facility  13a  13b	+	/ _%					
14	Enter the name and address of the person who prepares the organization's gaming/special events books and	J						
	records							
	Name ►							
	Address ►		<b></b> -					
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue? .							
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the							
	amount of gaming revenue retained by the third party > \$							
C	TAUST III							
	Name ▶							
	Address ▶							
16	Gaming manager information							
	Name ▶							
	Gaming manager compensation ▶ \$							
	Description of services provided							
	☐ Director/officer ☐ Employee ☐ Independent contractor							
17	Mandatory distributions							
',	Is the organization required under state law to make charitable distributions from the gaming proceeds to							
	retain the state gaming license?	☐ Yes	□No					
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$							
Part		line 2b, omplete ti	nis					
			<b>-</b>					

#### SCHEDULE O (Form 990 or 990-EZ)

## Supplemental Information to Form 990 or 990-EZ

2011

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.

Open to Public

OMB No 1545-0047

Employer identification number Name of the organization 42-0588697 Waverly Area Development Group Part IV, Section B, Line 11b - The Executive Director reviews the Form 990. Part VI, Section C, Line 19 - The documents are available upon request at the organization's office. Part VI, Section B, Line 15 - Staff are reviewed by the executive committee with the full Board approving the salary amounts.