

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



Return of Organization Exempt From Income Tax

OMB No. 1545-0047 2011

Open to Public

Department of the Treasury

Under 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. Inspection Internal Revenue Service For the 2011 calendar year, or tax year beginning 2011, and ending C Name of organization Capital Area Development Corporation of West Virginia, Inc. D Employer identification number Check if applicable Doing Business As Charleston Area Alliance 55-6024192 Address change Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Name change Room/suite 1116 Smith Street 304-340-4253 Initial return City or town, state or country, and ZIP + 4 Terminated Charleston, WV 25301 1,598,770 Amended return G Gross receipts \$ Application pending F Name and address of principal officer: Matthew G. Ballard, President/CEO H(a) Is this a group return for affiliates? Yes No 1116 Smith Street, Charleston, WV 25301 H(b) Are all affiliates included? Yes NoN/A **✓** 501(c) (4) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527 If "No," attach a list (see instructions) Tax-exempt status 501(c)(3) Website: ▶ www.charlestonareaalliance.org H(c) Group exemption number ▶ N/A Form of organization Corporation Trust Association ☐ Other ▶ L Year of formation 1963 M State of legal domicile wv Part I Briefly describe the organization's mission or most significant activities: Capital Area Development Corporation of WV, Inc. offers a wide range of innovative economic and community development programs to build a more vibrant community and SCAMMIED IJULACIIVIIIE & BENEFITATION prosperous economy in the greater Charleston, WV metro area. Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a). 3 38 Number of independent voting members of the governing body (Part VI, line 1b) 4 38 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 5 15 Total number of volunteers estimate in peessay 6 250 Total unrelated business revenue from Part VIII, column (0), line 12 7a 0 Net unrelated business taxable income from Form 9900, line 34 0 Current Year Contributions and grants (Part VIII, June 692,128 685,047 Program service revenue Part VIII, life 2g/N. UT 9 948,943 906,451 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 13,018 7,272 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . O n 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 1.654.089 1,598,770 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . n 0 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . O 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 842.651 814,216 16a Professional fundraising fees (Part IX, column (A), line 11e) . . . 34,500 Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 819,458 795.516 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 1,696,609 1,609,732 19 Revenue less expenses. Subtract line 18 from line 12 (42,520)(10.962)End of Year Beginning of Current Year 5,355,278 5,368,628 20 Total assets (Part X. line 16) 21 Total liabilities (Part X, line 26) . . . 1,597,360 1,621,672 22 Net assets or fund balances. Subtract line 21 from line 20 3,757,918 3,746,956 Signature Block Under penalties of penjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Date Here Matthew G. Ballard, President/CEO Type or print name and title Print/Type preparer's name Preparer's signature Paid Check I If self-employed **Preparer** Firm's name Firm's EIN ▶ Use Only Firm's address ▶ Phone no. May the IRS discuss this return with the preparer shown above? (see instructions) 🗌 Yes 🥅 No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No. 11282Y



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		✓
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	✓	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		✓
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	✓	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		✓
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		✓
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		✓
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	√	•
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IXI, 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	✓	
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		1
С	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		√
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		1
e f	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	✓ ✓	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		✓
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	✓	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		√
14 a 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	14a		√
15	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		√
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? <i>If "Yes," complete Schedule F, Parts III and IV</i>	15 16		√
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		✓
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		<u>*</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III			./
20 a		19 20a		✓
_	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		•

Part	V 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		1	_
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		✓	
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	3		1	-
		23		•	-
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		✓	_
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b			N,
С	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			_ N/
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d			$\bar{N}/$
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		✓	- <i>'</i>
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		1	-
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		1	-
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		1	-
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):				
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		1	-
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		1	-
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	1		-
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		1	-
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1	-
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1	-
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1	-
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1	_
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	1		_
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	1		-
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	35b	1		_
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			N
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R</i> , <i>Part VI</i>	37		/	_
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	37		+-	-
	19? Note. All Form 990 filers are required to complete Schedule O	38	√	<u> </u>	
		For	m 99 0	J (201°	n

orm 99	00 (2011)			Page 5
Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V	<u> </u>		. 🔽
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	3		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	0	l	
C	Did the organization comply with backup withholding rules for reportable payments to vendors and	7	1	
	reportable gaming (gambling) winnings to prize winners?	1c	1	
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 1	5	1	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	1	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	1	1
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	i –	N/
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority		\vdash	
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	}	[ļ
	account)? ,	4a		1
b	If "Yes," enter the name of the foreign country: ► N/A	10	 	-
~	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	1	1	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	 	1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	+-	-
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	 	N/
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	30	 	 ''
- Cu	organization solicit any contributions that were not tax deductible?	60	1	l
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	6a	\ <u> </u>	
	gifts were not tax deductible?	e h	1	
7	Organizations that may receive deductible contributions under section 170(c).	6b	├	
7 a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
a	and services provided to the payor?	7a	├ ──	N/
	,	<u> </u>	├ ──	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	├—	N/
С	required to file Form 8282?		İ	N/
_	·	, <u>7c</u>	├	├ ─── <u>`</u> ''
d	· · · · · · · · · · · · · · · · · · ·	7e		N/
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e 7f	├	$\frac{1}{N}$
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?	7g	├ ──	N/
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	├	N/
0	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	<u> </u>	ļ	\ _N /
_	organization, have excess business holdings at any time during the year?	8	├ ──	
9	Sponsoring organizations maintaining donor advised funds.		├	
a	Did the organization make any taxable distributions under section 4966?	9a	├	N/
_ b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	├	 -
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12	→	}	
_ b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b N//	4		
11	Section 501(c)(12) organizations. Enter:	.		
a b	Gross income from members or shareholders	7]	
J		4		
40-	· · · · · · · · · · · · · · · · · · ·	10	 	N/
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	├	
_b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b N//	4		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	12	├ ─	N/
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	├ —	├ ── [™] /
L	Note. See the instructions for additional information the organization must report on Schedule O.			
þ	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		1	
_	100	┥	ŀ	
C	Enter the amount of reserves on hand	-	├	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	1	▼

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

14b

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S. Check if Schedule O contains a response to any question in this Part VI	ee ins	tructi	ons.	
Section	on A. Governing Body and Management	<u> </u>			-
Occi	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 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 2	Enter the number of voting members included in line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	√		
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		✓	_
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		<u>✓</u>	_
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		<u>✓</u>	_
6	Did the organization have members or stockholders?	6	V		-
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	√		_
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?			✓	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7b			Ī
а	The governing body?	8a	1		J
b	Each committee with authority to act on behalf of the governing body?	8b	V		-
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	· ·		-
Section	on B. Policies (This Section B requests information about policies not required by the Internal Reven		ode.)		-
			Yes	No	-
10a	Did the organization have local chapters, branches, or affiliates?	10a		✓	_
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			n/A
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	\		_
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b	√		<u>-</u>
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	✓		_
13	Did the organization have a written whistleblower policy?	13	\		_
14 15	Did the organization have a written document retention and destruction policy?	14		✓	Ţ
а	The organization's CEO, Executive Director, or top management official	15a	1		1
b	Other officers or key employees of the organization	15b	✓		- 1
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		1	
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	Ioa		•]
	organization's exempt status with respect to such arrangements?	16b	L		Ň/A
	on C. Disclosure				_
17 18	List the states with which a copy of this Form 990 is required to be filed ► West Virginia Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	า 501(c)(3)s	only	j
19	Own website Another's website Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of and financial statements available to the public during the tax year.	f inter	rest p	olicy	,
20	State the name, physical address, and telephone number of the person who possesses the books and records organization: ▶ Debra S. James, 1116 Smith Street, Charleston, WV 25301 Phone 304-340-4253	of the	•		

Daga	•
raue	

Form 990 (2011)

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

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

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

		, − -		-					,	<u>, </u>
		1			C)			}	[
(A)	(B)	(do o	a+ a+		ition	e than c		(D)	(E)	(F)
Name and Title	Average					is both		Reportable	Reportable	Estimated
	hours per					or/trust		compensation	compensation from	amount of
	week (describe	유교	Ins	ç	8	육	Former	from the	related organizations	other compensation
	hours for		<u> </u>	Officer	y er	p s]	organization	(W-2/1099-MISC)	from the
	related organizations	Individual trustee or director	g	'	Key employee	8 8		(W-2/1099-MISC)	1	organization and related
	in Schedule	trus	al tr) Jee	§	l			organizations
	O)	8	Institutional trustee		-	Highest compensated employee				
			Φ			₹				
(1) Patrick A. Bond	.]		Ì		Ì		1]	
Chairman	1	✓		✓	$oxed{oxed}$		L_	0	0	0
(2) Michael J. Basile						1				
Vice-Chairman	1	✓		✓	$ldsymbol{f eta}$		L	0	0	0
(3) Diana Sole Walko										
Secretary	1	✓		✓				0	0	0
(4) Virginia L. King										
Treasurer	1	✓		✓				0	0	0
(5) J. Mark Bias										
Director	1	✓				ł		0	0	0
(6) Gregory A. Burton										
Director] 1	✓		l	l		l	(o	0	0
(7) John Calvert										
Director	1	✓			1			0	0	0
(8) Hazo W. Carter, Jr.										
Director	1	✓						o	0	0
(9) John T. Copenhaver										-
Director	1 1	✓		1	[0	0	o
(10) J. Horner Davis, IV							Γ			
Director	1	✓						0	0	0
(11) Stephen P. Dexter							Γ			
Director	1	✓	İ	Ì				. 0	o	0
(12) Terrell Ellis										
Director	1	1		1	1	}	1	0	o	0
(13) Georgette George							Γ			
Director	1	✓						0	0	o
(14) Lois A. Gillenwater							T			
Director	1	✓						0	0	0
	·									

(A) Name and title	(B) Average hours per week (describe	box,	unles er and	s pe dad	more rson rect	than on the state of the state	an ee)	(D) Reportable compensation from the	(E) Reportable compensation fron related organizations		ed of ation	
	hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)		from th organiza and rela organizat	ne tion ted
(15) James L. Guidarini Director	1	1						0				0
(16) Julie Gurtis Director	1	1						0				0
(17) Tania Hotmer Director	1	<i>'</i>				_		0				0
(18) Steve Lemmerman Director	1	1						0				0
(19) Charles Loeb												
Director (20) Wayne Morgan	1	-						0		<u>'</u>		0
Director (21) Roger L. Nicholson	1	✓						0				0
Director	1	✓						0)		0
(22) Maureen O'Toole Director	1	1						0		,		0
(23) Robert Pepper Director	1	1			-			0				0
(24) Thomas S. Provost		,								Ţ		
Director (25) Jack Rossi	1	-	-							' 		0
Director	1	✓						0	(<u> </u>		0
1b Sub-total	t VII, Section	n A					>	0 122,548		+		18,346
d Total (add lines 1b and 1c)							<u>►</u>	ho received m	<u> </u>	00 of		18,346
reportable compensation from the orga												es No
3 Did the organization list any former employee on line 1a? If "Yes," complete								oloyee, or high	est compensa	ted [3	es 140 ✓
For any individual listed on line 1a, is to organization and related organization.	ne sum of re	porta	ble	con	npei	nsatio						
individual	or accrue c	 ompe	nsat	tion	fro	m any	 un	 related organiz	 zation or individ	ual	4	✓
for services rendered to the organization	n? If "Yes," (comp	lete	Sch	nedi	ıle J f	or s	such person	<u></u>		5	✓
Complete this table for your five highes compensation from the organization. R year.	t compensate	ted in	depo	end or th	ent ne c	contr	acto	ors that receive	ed more than \$ th or within the	00,00 organi	00 of zation'	s tax
(A) Name and business a	ddress			•				(B) Description of s	ervices	Con	(C)	on .
												N/A

	·	i age i
Part VII	Compensation of Officers, Directors, Trustees, Key Em	ployees, 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.

r any relate	d orga	aniz	atio	n c	ompe	nsa	ted any curren	t officer, director	, or trustee.
-			-						-
	(do not check more than one						1		(F) Estimated
hours per							compensation	compensation from	amount of
week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
1	_ ✓			L			0	0	0
-	_								
1	✓						0	0	0
		:					1		
1	✓				_	L.	0	0	0
1	_								
1	✓			ļ			0	0	0
_									
1	✓			<u> </u>			0	0	0
1	1						0	o	0
									·
1 1	✓						0	o	0
							1		
] 1	1				1		0	0	0
1 1	✓						0	o	0
									-
1 1	✓						0	o	0
							1	,	· · · · · · · · · · · · · · · · · · ·
1 1	✓					1	0	o	0
T									
1 1	✓						0	o	0
		П							
1 1	1					1	0	o	0
Ì						1			
40+			L	1	<u></u>	L	122,548	О	18,346
	(B) Average hours per week (describe hours for related organizations in Schedule O) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(B) Average hours per week (describe hours for related organizations in Schedule O) 1 1 1 1 1 1 1 1 1 1 1 1 1	(B) Average hours per week (describe hours for related organizations in Schedule O) 1	(B) Average hours per week (describe hours for related organizations in Schedule O) 1 1 1 1 1 1 1 1 1 1 1 1 1	(B) Average hours per week (describe hours for related organizations in Schedule O) 1	(B) Average hours per week (describe hours for related organizations in Schedule O) 1 1 1 1 1 1 1 1 1 1 1 1 1	(B) Average hours per week (describe hours for related organizations in Schedule O) 1 1 1 1 1 1 1 1 1 1 1 1 1	(B) Average hours per week (describe hours for related organizations in Schedule O) 1	CE Average hours per week (describe hours for related organizations in Schedule C) CO CO CO CO CO CO CO

Part	VII Section A. Officers, Directors, Trust	ees, Key E	mploy	/ees	s, ar	nd H	lighes	st C	ompensated E	mployees (ontinue	ed)		
	-	(C)												
	(A)	(B)	(do n	ot ch	Pos ieck		than c	one	(D)	(E)	1	-	F) ′	
	Name and title	Average	box,	unles	s pe	rson	ıs both	an	Reportable compensation	110001100			nated unt of	
		hours per week			_	_	or/trust	, <u> </u>	from	related	other			
		(describe	Individual trustee or director	Institutional	Officer	Key employee	ap digh	Former	the	organizatio (W-2/1099-M		•	nsation the	l
		hours for related	rect à	tutio	ĕ	- amp	est o	ब	organization (W-2/1099-MISC)		130)		ization	
		organizations	악플	nal		oloye	E				,		elated	
		in Schedule O)	ıste	trustee		9	Pen					organ	zatıons	
			"	8			Highest compensated employee		}					
/4E) Co	ntinuation Sheet			\vdash				-			-+			
(15) 00	illinuation Sheet	1												
(16)					\vdash		 	-	-					
119/									1	ļ				
(17)				t^-		\vdash						_		
X-11/		1			ļ									
(18)														
32		1												
(19)														
(20)								ļ						
			<u> </u>		<u> </u>	ļ		<u> </u>						
(21)		1					İ		ł					
			ļ	L	ļ.,	<u> </u>		_						
(22)		_			1						1			
			<u> </u>	<u> </u>	┞	ļ	ļ	<u> </u>		<u> </u>				
(23)				ì		1								
			-	┼	┼	 	 	1	ļ		-+			
(24)		_												
(05)		-	 	╀	╀	┼	<u> </u>	⊢	. 	 	-+			
(25)		-			1	ļ			}					
	Sub-total	l	J	<u>i </u>	Ь.	1	l	┢	122,548	<u> </u>	0		18	B,346
C	Total from continuation sheets to Part			•	•	•		-	122,010	<u> </u>	- 			-,
ď	Total (add lines 1b and 1c)			•	•	•		•			-+			
2	Total number of individuals (including bu							e) v	vho received m	ore than \$1	00 000) of	_	
_	reportable compensation from the organ		a to ti	100	C 110	ica	abov	c, .		1010 tilail \$1	00,000	, 0.		
	. repertuels semperature and a game									· · · · · · · · · · · · · · · · · · ·			Yes	No
3	Did the organization list any former of	fficer, direc	ctor,	or t	rust	ee,	key	emį	ployee, or higl	hest compe	nsated	1	4 35 Y	
	employee on line 1a? If "Yes," complete											3		
4	For any individual listed on line 1a, is the	e sum of re	porta	ble	cor	npe	nsatio	on a	and other com	pensation fr	om the	€	Si sir	_
	organization and related organizations	greater th	ian \$	150	,00	0? /	lf "Ye	es, "	complete Sci	hedule J fo	r suct	7	1 de 1	
	individual											4		Ĺ
5	Did any person listed on line 1a receive of	or accrue c	ompe	ensa	ation	n fro	m an	y ur	nrelated organi	zation or inc	subivit	1		
	for services rendered to the organization	? If "Yes,"	comp	lete	Sc	hed	ule J	for	such person	<i></i>	<u>· ·</u>	5		L
Section	on B. Independent Contractors													
1	Complete this table for your five highest	compensa	ted in	dep	enc	dent	cont	ract	tors that receiv	ed more tha	ın \$100	0,000 of		
	compensation from the organization Re	port compe	ensati	ion 1	for t	he o	calend	dar	year ending wi	th or within	the or	ganızatı	on's ta	ЗX
	year.							_						
	(A) Name and business add	drace							(B) Description of	services		(C) Compens	eation	
_	Name and business aud			_		_		+	Description of			Compens		
	· · · · · · · · · · · · · · · · · · ·							+-			 			
			-				-	+			 			
								+			 			
								+-						
2	Total number of independent contracti	ore finalud	ına h	ıı+ •	not	limi	t hat	<u> </u>	hose listed at	ove) who	$\vdash \vdash$		-,	
2	received more than \$100,000 of compen								nose nateu at	JOYOJ WIIO	1. The same			Ž,

Part	: VIII	Statement of Reve	enue						
		•				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts nts	1a	Federated campaigns	s	1a	0				
ara our	ь	Membership dues .		1b	0				
s, G Am	С	Fundraising events .		1c	0				
Gift lar	d	Related organizations	3	1d	77,284				
imi	е	Government grants (con		1e	245,465	:			
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, g							
ž č		and similar amounts not inc			362,298				
d tr	g	Noncash contributions include			4,557				
	h	Total. Add lines 1a-1	<u>f</u>	<u> </u>		685,047			
Program Service Revenue					Business Code				
evel	2a	Membership Dues			900099	330,706	330,706	0	0
e Re	b	Rents-Business Incub			531120	189,652	189,652	0	0
Zic.	С	Rents-Motion Industri	es		531120	174,623	174,623	0	0
Sei	d	EPI Management Fee			561000	42,000	42,000	0	0
шш	е	Economic/Comm Dev.			900099	169,470	169,470	. 0	0
rogi	f	All other program sen				0	0	0	0
	g	Total. Add lines 2a-2				906,451			
	3	Investment income						_	
		and other similar amo	-		L	7,272	7,272	0	0
	4	Income from investmen		•	· ·	0	0	0	0
	5	Royalties	(i) Real		(ii) Personal	0	0	0	0
	6a	Gross rents	(1) 11001	0	0				
	b	Less: rental expenses		0	0				
	C	Rental income or (loss)	-		0				
	ď	Net rental income or (<u>_</u>	▶	0	0	0	
	7a	Gross amount from sales of	(i) Secunti		(II) Other		<u>`</u>		
		assets other than inventory	\	0	ō				
	b	Less: cost or other basis							
		and sales expenses .		0	0				
	C	Gain or (loss)	L	0	0				
	d	Net gain or (loss) .			· · · · >	0	0	0	0
nue	8a	Gross income from fu	ındraising						
Ver		events (not including \$		0					
Other Reven		of contributions reported							
ē		See Part IV, line 18 .		. а	0				
₹	b	Less: direct expenses	3	. b	0				
_	С	Net income or (loss) f			events . >	0		0	0
	9a	Gross income from ga							
		See Part IV, line 19 .			0				
	b	Less: direct expenses			0				
	C	Net income or (loss) for	_	-	vities ▶	0	0	0	0
	10a	Gross sales of in				1			
		returns and allowance			0				
	b	Less: cost of goods s			0				
l	С	Net income or (loss) for Miscellaneous R		or inve		0	0	0	0
}	4.4	Miscellaneous R	evenue		Business Code				
	11a					0	0	0	0
	b				*	0	0	0	0
	CT	All other revenue				0	0	0	0
	d	All other revenue . Total. Add lines 11a-		•		0	0	0	0
	е 12	Total revenue. See in				1,598,770	913,723	0	0
	-					1,070,770	713,723	U	, U

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 respons t include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	0	0		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	0	0		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	0	0		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	0 141,647	99,153	21,247	21,247
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	21,247	21,217
7	· · · · · · · · · · · · · · · · · · ·	515,021	425,037	44,394	45,590
7 8	Other salaries and wages	49,461	41,093	4,126	4,242
9	Other employee benefits	51,314	42,018	4,594	4,702
10	Payroll taxes	56,773	45,693	5,487	5,593
11	Fees for services (non-employees):				
а	Management	0	0	0	0
b	Legal	2,415	0	2,415	0
C	Accounting	12,595	10,950	831	814
d	Lobbying	0			
е	Professional fundraising services. See Part IV, line 17	0			0
f	Investment management fees	0	0	0	0
g	Other	0	0	0	0
12	Advertising and promotion	350	350	0	
13	Office expenses	36,690	29,864	3,946	2,880
14	Information technology	29,090	27,112	999	979
15	Royalties	0	0	0	0
16	Occupancy	118,560	118,560	0	0
17	Travel	1,105	344	746	15
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings .	3,483	0	3,483	0
20	Interest	57,998	57,998	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization .	159,890	158,936	500	454
23	Insurance	13,006	11,236	923	847
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.)				
а	Bank and merchant fees	4,982	36	4,946	C
b	Commissions	8,761	8,761	0	0
c	Bad debt expense	34,076	14,576	19,500	G
d	Employee dues/ development/retention	12,645	10,185	1,968	492
е	All other expenses Program and Misc.	299,870	286,399	10,396	3,075
25	Total functional expenses. Add lines 1 through 24e	1,609,732	1,388,301	130,501	90,930
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 ☐ if following SOP 98-2 (ASC 958-720)				

Balance Sheet Part X (A) (B) Beginning of year End of year 1 Cash—non-interest-bearing 89,858 28.757 1 2 1,394,373 1,430,592 2 3 145,755 83,813 3 4 289,900 4 289,156 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 0 5 0 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) 0 6 Assets 0 7 72.874 52,375 7 8 8 0 9 Prepaid expenses and deferred charges . . . 2,770 9 7,960 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 6,060,049 10b 3.499,961 Less: accumulated depreciation 2.560.088 3,317,879 10c 11 Investments—publicly traded securities 11 0 Investments—other securities. See Part IV, line 11 12 4,650 12 4,650 13 Investments—program-related. See Part IV, line 11 0 13 0 14 0 14 7,583 15 0 15 0 Total assets. Add lines 1 through 15 (must equal line 34) 16 5,355,278 16 5,368,628 17 Accounts payable and accrued expenses 122,211 17 344,036 Grants payable 18 18 0 19 277,420 19 179,444 20 20 0 0 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 0 21 Payables to current and former officers, directors, trustees, key 22 employees, highest compensated employees, and disqualified persons. 22 O 0 23 Secured mortgages and notes payable to unrelated third parties . . . 1,070,248 23 945,079 24 Unsecured notes and loans payable to unrelated third parties . . . 24 0 0 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X 127,481 153,113 25 26 Total liabilities. Add lines 17 through 25 . . 1,597,360 26 1,621,672 Organizations that follow SFAS 117, check here ▶ 🗸 and complete **Fund Balances** lines 27 through 29, and lines 33 and 34. 27 3,681,651 27 3,699,774 28 76,267 28 47,182 29 ol 29 n Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. Net Assets or 30 Capital stock or trust principal, or current funds 0 30 0 31 Paid-in or capital surplus, or land, building, or equipment fund . . . ol 31 0 32 Retained earnings, endowment, accumulated income, or other funds. ol 32 0 33 3,757,918 3,746,956 33 34 Total liabilities and net assets/fund balances 5,355,278 34 5,368,628

Form 990 (2011)

·_	-	_
Page		~
rayo		_

Check if Schedule O contains a response to any question in this Part XI	1,: 1,: (3,:	598,7 609,7 (10,96 757,9	732 62)
Total expenses (must equal Part IX, column (A), line 25)	1,i (3,	609,7 (10,96 757,9	732 62) 918
Total expenses (must equal Part IX, column (A), line 25)	1,i (3,	609,7 (10,96 757,9	732 62) 918
Revenue less expenses. Subtract line 2 from line 1	3,	(10,96 757,9	62) 918
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 5 Other changes in net assets or fund balances (explain in Schedule O)	3,	757,9	918
5 Other changes in net assets or fund balances (explain in Schedule O)	3,		
6 Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,		746,9	U
, , , , , , , , , , , , , , , , , , , ,		746,9	
column (B))) 56
Part XII Financial Statements and Reporting			_
Check if Schedule O contains a response to any question in this Part XII			\checkmark
	Ye	s N	No.
1 Accounting method used to prepare the Form 990: Cash Accrual Other	Т		\Box
If the organization changed its method of accounting from a prior year or checked "Other," explain in		ł	
Schedule O.		1	
2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a	,	7	/
b Were the organization's financial statements audited by an independent accountant?	, <i> </i>		_
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.		- 1	
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were		- 1	
issued on a separate basis, consolidated basis, or both:			1
☐ 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?	<u>. l. </u>	✓	_
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 3t	<u>, </u>		N
F	rm 9 9	90 (20	011)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

2011

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service 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.

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

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

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

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

If the organization answered "Yes" to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

	ection 501(c)(4), (5), or (6) orga	anizations: Complete Part III.			
	of organization	-	_	Employer ide	ntification number
Capita	al Area Development Corpor				55-6024192
Part		e organization is exempt und			organization.
1		the organization's direct and indire			
2					N/A
3	Volunteer hours		• • • •		
Part		e organization is exempt und			
1	· · · · · · · · · · · · · · · · · · ·	excise tax incurred by the organiza			N/A
2		excise tax incurred by organizatior			
3		ed a section 4955 tax, did it file For			= =
4a					🗌 Yes 📗 No
b	If "Yes," describe in Part				
Part		e organization is exempt und			(c)(3).
1		ly expended by the filing organiz			
2					N/A
2		filing organization's funds contribution or series of the contribution of the contribu			•
3		expenditures. Add lines 1 and 2.		,)
3		experialtures. Add lines 1 and 2.			•
4		n file Form 1120-POL for this year		•)
4		•			
5		ses and employer identification nur ents. For each organization listed, o			
	the amount of political co	ontributions received that were pro-	enter the amount	delivered to a congrete r	ization's funds. Also enter
		fund or a political action committee			
				T	The information in Factor.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds If none, enter -0-	promptly and directly
					delivered to a separate political organization If
					none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

Par	t II-A Complete if the organization section 501(h)).	is exempt	under section 50	01(c)(3) and filed	i Form 5768 (ele	ction under
4 (Check ► ☐ if the filing organization bel					up member's
	name, address, EIN, expen				•	
В	Check ► ☐ if the filing organization che Limits on Lobb			roi provisions a	 	0.3.4651
	(The term "expenditures" me)	(a) Filing organization's totals	(b) Affiliated group totals
18	Total lobbying expenditures to influence	public opinion	(grass roots lobby	ring)		N/A
ı						
•	Total lobbying expenditures (add lines 1a	and 1b) .				
•	Other exempt purpose expenditures .					
•	 Total exempt purpose expenditures (add 	lines 1c and 1	ld)			
1	Lobbying nontaxable amount. Enter to columns.	he amount f	rom the following	g table in both		
	If the amount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amoun	t is:		
	Not over \$500,000	20% of the ar	mount on line 1e.			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	s 15% of the excess	over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	s 10% of the excess	over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	s 5% of the excess o	ver \$1,500,000.		
	Over \$17,000,000	\$1,000,000				
9	•	•				
ı	· 3 · · · · · ·					
į	Subtract line 1f from line 1c. If zero or les					
j	If there is an amount other than zero reporting section 4911 tax for this year?		1h or line 1i, dic			Yes No
	(Some organizations that ma	de a section (Period Under Sec 501(h) election do ctions for lines 2a	not have to com		
	Lobbying	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	Lobbying nontaxable amount					
	Lobbying ceiling amount (150% of line 2a, column (e))					
(Total lobbying expenditures					
(Grassroots nontaxable amount					
•	Grassroots ceiling amount (150% of line 2d, column (e))					
1	Grassroots lobbying expenditures					

Part	t II-B Complete if the organization is exempt under section 501(c)(3) are (election under section 501(h)).	nd has NOT file	ed I	orm	5768		<u> </u>
For e	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed	description	(a)		(b)	
	ne lobbying activity.	· I	es	No	A	moun	t
1	During the year, did the filing organization attempt to influence foreign, national, s	state or local					
	legislation, including any attempt to influence public opinion on a legislativ						
	referendum, through the use of:						
а			_				
b	, and the process of the contract of the contr	nrough 1i)?					
c			_				N/A
ď	ge a manage				-		
e •							
f		·—	\dashv				
g h	-		\dashv				
i	Other activities?			-			
j	Total. Add lines 1c through 1i	· · · · · —		-+			
2a			\dashv				
b		/\ /	\dashv	-		-	
c	No. 10 to 10						
d			寸				
Part	t III-A Complete if the organization is exempt under section 501(c)(4), s	ection 501(c)(5), c	r se	ction		
	501(c)(6).		•				
						Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members? .				1		✓
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less? .				2	✓	
3	Did the organization agree to carry over lobbying and political expenditures from the				3		✓
Part	t III-B Complete if the organization is exempt under section 501(c)(4), s 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes."	ection 501(c)(5) ered "No" OR (l), c b) l	r sed Part	ction III-A, I	ine 3	3, is
1	Dues, assessments and similar amounts from members			1			N/A
2	Section 162(e) nondeductible lobbying and political expenditures (do not incl	ude amounts o	f	- 1			
	political expenses for which the section 527(f) tax was paid).						
a			Ļ	2a			
b			Ļ	2b			
C			ļ	2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section			3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, w						
	excess does the organization agree to carryover to the reasonable estimate of nonde and political expenditure next year?		- J.				
5	and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)		-	4			
Part		· · · · ·		5			
	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; P	art I-C. line 5: Par	a II.	Δ· ar	nd Part	II-R	line
	so, complete this part for any additional information.	are 1 0, 1110 0, 1 u		, ı, aı	ia i ait	,	
N/A							
		,					
			. .				
		·					

	m 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

Name of the organization Employer identification number Capital Area Development Corporation of West Virginia, Inc. 55-6024192 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 N/A 2 Aggregate contributions to (during year) . Aggregate grants from (during year) . . 3 Aggregate value at end of year 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. ĸ 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 ☐ 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. a Total number of conservation easements . . N/A 2a **b** Total acreage restricted by conservation easements 2b 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 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 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) 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. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III 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. 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 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: Assets included in Form 990, Part X .

' Page 2	
-----------------	--

Part	Organizations Maintaining	Collections of	of Art, His	torical 1	reasures	, or Ot	her Similar As	sets (continued	丒
3	Using the organization's acquisition, collection items (check all that apply):	accession, and	other reco	rds, chec	k any of th	e follov	wing that are a s	ignıficant use of i	ts
а	Public exhibition		d		or exchang				
b	Scholarly research		е	Other	r		N/A		
C	Preservation for future generations								
4	Provide a description of the organization XIV.	tion's collection	s and expl	ain how t	hey further	the org	janization's exer	npt purpose in Pa	art
5	During the year, did the organization assets to be sold to raise funds rather								_
Port	V Escrow and Custodial Arra								_
Fair	line 9, or reported an amoun	•	•	_	janization	answe	ieu res tore	7111 330, 1 art 1v	,
12	Is the organization an agent, trustee				or contribut	ions or	other assets no	ot	—
16	included on Form 990, Part X?								0
b	If "Yes," explain the arrangement in Pa							_ 103 _ N	٠
	ii 103, explain the arrangement iii 1	are XIV and com	picto the r	ono mig t	abic.		T A	mount	
С	Beginning balance					10	-	N/	A
ď	Additions during the year					10	+		_
e	Distributions during the year					1e	-1		_
f	Ending balance					11	_		_
2a	Did the organization include an amount					4		☐ Yes ☐ N	0
	If "Yes," explain the arrangement in P		,						
Par			nization a	nswered	"Yes" to F	orm 9	90, Part IV, line	10.	_
	· · · · · · · · · · · · · · · · · · ·	(a) Current year		nor year	(c) Two year				k
1a	Beginning of year balance								٦
b	Contributions						_		
С	Net investment earnings, gains, and								\neg
	losses			N/A					
d	Grants or scholarships								
е	Other expenditures for facilities and programs								
f	Administrative expenses						-		
g	End of year balance								ヿ
2	Provide the estimated percentage of t	he current year	end balan	ce (line 1g	, column (a)) held	as:		
а	Board designated or quasi-endowmen								
b	Permanent endowment ▶	%							
С	Temporarily restricted endowment ▶	%	,)						
	The percentages in lines 2a, 2b, and 2		100%.						
3a	Are there endowment funds not in the	e possession of	the organ	ization th	at are held	and ad	lministered for th		_
	organization by:							Yes No	<u>D</u> _
	(i) unrelated organizations							3a(i) ✓	_
								3a(ii) ✓	
b	If "Yes" to 3a(ii), are the related organ							_3b ✓	_
4	Describe in Part XIV the intended uses								_
Part				art X, lin	e 10.				_
	Description of property		r other basis stment)		or other basis other)		Accumulated epreciation	(d) Book value	
1a	Land		()	382,446			382,44	16
b	Buildings		()	5,268,579		2,461,148	2,807,43	<u>31</u>
C	Leasehold improvements		(<u> </u>	0		0	_	0
d	Equipment			+	112,726		98,940	13,78	_
<u>e</u>	Other Construction in Pr			<u> </u>	296,298	L	0	296,29	_
Total.	Add lines 1a through 1e. (Column (d) n	nust equal Form	990, Part	X, columi	n (B), line 10	D(c).)	<u>▶ </u>	3,499,96	<u>31</u>

Part VII	Investments-Other Securities	. See Form 990, Part X, I	ine 12.	
	Description of security or category (including name of security)	(b) Book value	(c) Method of Cost or end-of-ye	
(1) Financial	I derivatives			
	held equity interests	4,650	Cost	
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)		<u> </u>		
(F)				
(G)				
(H)				
(1)		·	· · · · · · · · · · · · · · · · · · ·	
	(b) must equal Form 990, Part X, col. (B) line 12.)	4,650		
Part VIII	Investments—Program Related			
	(a) Description of investment type	(b) Book value	(c) Method o Cost or end-of-ye	
<u>(1)</u>		N/A		
(2)				
(3)				
(4)				
(5)				
(6)				
(8)				
(9)				
(10)	(b) must a mal Farm 000 Dark V and (D) line 10.)			
Part IX	(b) must equal Form 990, Part X, col. (B) line 13.) ► Other Assets. See Form 990, Part X	y V line 15	L	
Partix		a) Description		(b) Book value
		1) Besonption	· · · · · · · · · · · · · · · · · · ·	N/A
<u>(1)</u>				100
(2)				
(4)				
(5)				
(6)				-
(7)				
(8)				
(9)				
(10)				
Total. (Colu	ımn (b) must equal Form 990, Part X, co	ol. (B) line 15.)		>
Part X	Other Liabilities. See Form 990,	Part X, line 25.		
1.	(a) Description of liability	(b) Book value		
(1) Federal	income taxes	0		
(2) Notes p	ayable to related organization	153,113		
(3)				
(4)			}	
(4) (5)				
(6) (7)				
(7)				
(8) (9)	·		1	
(9)				
(10)	·		Į	
(11)			1	
Total. (Column	(b) must equal Form 990, Part X, col. (B) line 25.)	153,113		

chedu	e D (Form 990) 2011		Page 4
Part	XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial States	nents	, , , , , , , , , , , , , , , , , , , ,
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,598,770
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,609,732
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	(10,962)
4	Net unrealized gains (losses) on investments	4	0
5	Donated services and use of facilities	5	0
6	Investment expenses	6	0
7	Prior period adjustments	7_	0
8	Other (Describe in Part XIV.)	8	0
9	Total adjustments (net). Add lines 4 through 8	9	0
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	(10,962)
Part			
1	Total revenue, gains, and other support per audited financial statements	1	1,627,832
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments	의	
b	Donated services and use of facilities	의	
С	Recoveries of prior year grants	0	
d	Other (Describe in Part XIV.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	1,590,307
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	의	
b	Other (Describe in Part XIV.)		_
C	Add lines 4a and 4b		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		1,598,770
Part			
1	Total expenses and losses per audited financial statements	┝	1,609,709
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		1
a	Donated services and use of facilities		
b	The year adjustments		
C	Other losses		
d	Carlot (Boodings in Face Arty).	2e	
e	Add lines 2a through 2d	3	1,609,709
3	Subtract line 2e from line 1	_ 	1,003,703
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	0	
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a	23	
b	Charles (Beech Be in that your)	_	23
c	Add lines 4a and 4b	4c	1,609,732
5] 3	1,009,732
Comp Part V any a	Supplemental Information blete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also codditional information. 7, Lines 3a, 3b, 4: CADCO Foundation, Inc., a related 501(c)(3) organization, created as a supporting organization.	mplete	e this part to provide
	opment Corporation of WV, Inc. (CADCO) dba the Charleston Area Alliance, maintains a board-designate		
the p	urpose of future economic development projects focused on job creation and retention in CADCO's servi	ce area	a. The value of the
endo	wment fund is reported on Form 990 for the CADCO Foundation.		
Part)	(, Line 2: As of December 31, 2011, the Alliance had no uncertain tax positions that qualified for either re	cogniti	on or disclosure in

the financial statements.

Part XIV Supplemental Inform	ation (continued)		
Part XII, Line 2d: Net assets released fro	om restrictions \$37,525	·	
Part XII, Line 4b: Contributions restricte	d for future years	\$8,440	
Immaterial error in aud	it report - rental income		
was understated in a	dit report due to an incorrect		
elimination of interde	partmental rent allocation	25	
Difference due to roun	ding	(2)	
Total adjustment		\$8,463	
Part XIII, Line 4b: Immaterial error in au	dit report - rental income		
was understated in	audit report due to an incorre	ct	
elimination of inte	departmental rent allocation	\$ 25	
Difference due to rour	ding	(2)	
Total adjustment		\$ 23	
		·	
		·	

SCHEDULE J (Form 990)

Compensation Information

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

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

▶ Attach to Form 990. ▶ See separate instructions.

2011

55-6024192

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Capital Area Development Corporation of West Virginia, Inc.

Employer identification number

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

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

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

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

		10 circopy(cord (a)	(b) Drockdown of W 2 and (or 1000 MISC componention	Commonation			()	
		(b) Dreakdowii o	W-2 aliu/U 1099-IVII	oc compensation	(C) Retirement and	(D) Nontaxable		(E) Companeation
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(a)-(l)(a)	reported as deferred in prior Form 990
W. W.	(1)							
-	€							
	8							
8	€							
	8							
ო	€			*** * * * * * * * * * * * * * * * * * *				
	€							
4	(E)							
	(1)							
S	(E)							
	8							
9	<u>(E)</u>							
	(
7	(E)	Y		M				
	8							
8	(ii)							
	()							
6	E							
	(6)							
10	(ii)							
	€							
11	(ii)							
	()					0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		
12	(E)							
	(0)							
13	Ξ							
	(1)							
14	(E)							
	(0)					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
15	3							
	8	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
16	(E)							
							Sch	Schedule J (Form 990) 2011

Page 3

Page	for Part I	,											
	d 8, and		9 9 9 9 1 1 1 1 1										200 1000 A/1 - 1-4 4- 0
	6b, 7, an		2 2 2 3 3 4 3 4 4 4 4 4 4 4 4 4 4 4 4 4										ľ
	, 5b, 6a,		i 1 1 1 1 1 1										
	lb, 4c, 5a												
	o, 3, 4a, ²												
	nes 1a, 1b												
	r Part I, lii		1 1 4 4 1 1 1 1 1										
	or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part		1 1 1 1 1 1 1 1 1										
	riptions re												
	kplanatior ation.										; ; ; ; ; ; ; ; ; ; ;		
	mation, e		1 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3										
 - - -	ormation the inform y addition												
	ental Info o provide oart for an)))))))											
Schedule J (Form 990) 2011	Part III Supplemental Information Complete this part to provide the information, explanation, Also complete this part for any additional information.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1										
chedule J (Fo	Part IIII Somplete Iso comp	N/A	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0										

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

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

► Complete if the organization answered
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

(8) (9) (10)

Employer identification number

Capital Are	a Development Corporation of Wes	t Virgini	a, Inc.					55-€	0241	92		
Part I	Excess Benefit Transactions (Complete if the organization and	section swered	501(c)(3 "Yes" o	3) and section 501(c)(n Form 990, Part IV, I	4) organız lıne 25a o	rations only). r 25b, or For	m 99	0-EZ,	Part '	V, line	. 40ხ.	
1	(a) Name of disqualified person				(b) Decem	tion of transacti	on				(c) Corr	ected?
•	(a) Name of disqualified person				(b) Descrip	tion of transacti	OH				Yes	No
(1) N/A												
(2)											_	
(3)												
(4)												
(5)				-						_		
(6)												
2 Ente	er the amount of tax imposed or er section 4958	n the o	rganizat	tion managers or dis	qualified	persons du	ring tl	he ye	ar ▶ \$			
3 Ente	er the amount of tax, if any, on line	e 2, abo	ove, reim	nbursed by the organ	ızation			1	\$			
Part II	Loans to and/or From Interest Complete if the organization and			n Form 990, Part IV, I	line 26, or	Form 990-E	Z, Pa	rt V, li	ine 38	Ва.		
(a) Nan	ne of interested person and purpose		to or from nization?	(c) Onginal principal amount	(d) Ba	alance due	(e) In d	lefault?	by bo	oroved pard or nittee?	(g) Written agreement?	
		То	From				Yes	No	Yes	No	Yes	No
(1) N/A												
(2)						-						
(3)	-			-								
(4)												
(5)						·						
(6)												
(7)					- "							
(8)												
(9)												
(10)			1									
Total .			• •	▶ \$								
Part III	Grants or Assistance Benefitir Complete if the organization and				ine 27.			-				
((a) Name of interested person	(b) Re	elationship	between interested persor organization	and the	(c) A	mount	and typ	pe of a	ssistan	ce	
(1) N/A												
(2)					•							
(3)		1										
(4)									-			
(5)		1	-									
(6)												
(7)		•			-							

Part	Business Transactions Involvi Complete if the organization ans		0, Part IV, line 28a,	28b, or 28c.	•	
	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	1 -	anng of zation's nues?
					Yes	No
	There are no reportable transactions		_			
(2)	in excess of applicable thresholds.					-
(3)	See Part V below for additional information.				_	
	information.		 			<u> </u>
(5) (6)			 			
(7)						
(8)						
(9)						
(10)						
Par	Supplemental Information Complete this part to provide ac	dditional information for re	esponses to questio	ns on Schedule L (see instruction	ns).	
The f	following directors of the organization we					
busir	ness with this organization. No transaction	ons are reported above in P	art IV because they		thresho	lds.
All tr	ansactions between the reporting organiz	zation and such unrelated e	entities were conduct	ed in the normal course of busine		,
term	s extended to the general business comm				elow.	
Di	iana Sole Walko, owner of Motion Masters	•				
Vi	rginia L. King, ownership interest in Terra	adon Communications - we	bsite management a	nd consulting services		
G	regory A. Burton, officer of Brickstreet Ins					
J.	Mark Bias, officer of BB&T - banking serv	vices				
Jo	ohn T. Copenhaver, officer of JP Morgan C	Chase Bank - banking servi	ces			
CI	harles Loeb, member of Jackson Kelly - le	egal services				
No	orman (Trip) Shumate, officer of Charlesto	on Newspapers - advertisin	g and subscription s	ervices		
Sa	ally Smith, member of Bowles Rice McDav	vid Graff and Love - legal se	ervices			
w	ayne Morgan, officer of West Virginia Am	erican Water - utilities				
Ju	ulie Gurtis, officer of United Bank - bankin	ng services				

SCHEDULE M (Form 990)

Noncash Contributions

OMB No 1545-0047 2011

Department of the Treasury Internal Revenue Service Name of the organization

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

Open To Public Inspection

Employer identification number

Capital Area Development Corporation of West Virginia, Inc. 55-6024192 Part I **Types of Property** (c) (a) (d) (b) Noncash contribution Check if Number of contributions or Method of determining amounts reported on applicable items contributed noncash contribution amounts Form 990, Part VIII, line 1g Art-Works of art 1 2 Art—Historical treasures . . . 3 Art-Fractional interests . . . Books and publications . . . Clothing and household 5 goods 6 Cars and other vehicles . . . 7 Boats and planes Intellectual property 8 Securities-Publicly traded . . 1 4,557 FMV per market quotes 9 10 Securities-Closely held stock . Securities—Partnership, LLC, 11 or trust interests Securities-Miscellaneous . . 12 Qualified conservation 13 contribution-Historic structures Qualified conservation 14 contribution-Other . . 15 Real estate - Residential . . . Real estate - Commercial . 16 Real estate—Other 17 Collectibles 18 19 Food inventory 20 Drugs and medical supplies . Taxidermy 21 Historical artifacts 22 Scientific specimens 23 Archeological artifacts . . . 24 25 26 Other ► (27 Other ▶ (28 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 Yes No 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 30a b If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any non-standard 31 31 ✓ Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a If "Yes," describe in Part II. If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, 33

describe in Part II.

rt II	Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b
	and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the
	number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Department of the Treasury Internal Revenue Service 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 Inspection

Internal Revenue Service

Name of the organization

Capital Area Development Corporation of West Virginia, Inc.

Employer identification number 55-6024192

Page 1, Part I, Line 6: Volunteers from community leaders and citizens comprise the organization's Board of Directors, advisory
committees and task forces of many economic and community development programs carried out by the organization. These volunteers
assist with planning, organizing and completing various projects. No compensation is paid to any volunteers. The organization's program
directors typically work with the following approximate numbers of volunteers.
Economic Development - 100; East End Main Street - 76; Workforce and Education - 9; Community Development - 25; Administration and
Member Services - 40; Total number of volunteers - approximately 250.
Page 2, Part III, Line 4d: Other program services include benefits and opportunities provided to member businesses such as networking
events, seminars, trade shows, referrals and marketing. Program expenses were \$279,270 including grants of \$0 and revenues of \$406,074.
Page 4, Part IV, Line 28c: Several directors of the organization are affiliated with unrelated entities doing business with the organization.
See Schedule L, Part V for a list of those directors. There were no transactions in excess of reportable thresholds.
Page 6, Part VI, Line 2: The following directors of this organization reported family or business relationships with other directors.
James Guidarini - business relationship with Steve Dexter
H. G. Shaffer, III - business relationship with J. Horner Davis, IV
Diana Sole Walko - business relationship with T. William Signorelli
Virginia L. King - business relationships with J. Mark Bias, Julie Gurtis, Wayne Morgan
Page 6, Part VI, Line 6: Over 600 area businesses are members of the reporting organization.
Page 6, Part VI, Line 7a: The voluntary board of directors of this organization is comprised of business and community leaders elected
by the membership.
Page 6, Part VI, Line 9: See attached list of Officers and Directors of the organization which includes mailing addresses for members
of the governing board.

came of the organization Capital Area Development Co	rporation of West Virginia, Inc.				Linployer id	55-6024192	,
Page 6, Part VI, Line 11a and	11b: The organization's chief	financial officer	prepared Fo	orm 990. Auth	ority to review	and approve Form	990
nas been delegated to the Bo	ard's Finance Committee, which	reviewed and a	approved the	form prior to	filing. The Bo	ard's Executive	
Committee also reviewed and	l approved Form 990 prior to filin	ng. Members of	the Board o	of Directors are	invited to co	ntact the chief	
inancial officer to obtain a co	ppy of Form 990k, which is email	ed to the indivi	dual director	r upon request			
Page 6, Part VI, Line 12c: C	onflict of interest with respect to	o officers, direc	tors and emp	ployees of the	organization a	and its affiliates is	
addressed in the organization	n's Bylaws, Accounting Manual a	and Personnel F	Policies. The	organization'	s conflict of in	terest policy is	
presented to directors and en	nployees at periodic training ses	ssions. Directo	rs and emplo	yees are char	ged with profe	essional conduct wh	nich
includes self-monitoring and	reporting of potential or perceiv	ed conflicts of i	interest. Mai	nagement and	the Board of I	Directors advise as	to
whether or not the perceived	conflict is valid. Directors are a	sked to remove	themselves	from discussi	ons or decision	ons in matters where	е
	est. The organization has also in						
signature by directors and en				*			
Page 6, Part VI, Line 15: Th	e organization's Executive Com	mittee annually	reviews the	performance (of and determi	nes compensation	of
the organization's President/	CEO. The last such review was	conducted in 20)11. In 2011,	the Executive	Committee cl	narged the Human	
Resources Committee with e	ngaging the services of an indep	endent consul	ant to reviev	v and perform	comparative a	analyses of executiv	/e
	f the independent review and co						
compensation.							
Page 6, Part VI, Line 19: Th	ne organization makes its govern	ning documents	, conflict of i	interest policy	and financial	statements availabl	e
	ither by providing copies or by i						
	3						
Page 10, Part IX, Line 24e:	All other expenses include:	(A)	(B)	(C)	(D)		
	Program Expenses	\$289,230	\$286,093	\$ 77	\$ 3,060		
	Miscellaneous Expenses	10,640	306	10,319	15		
			-		\$ 3,075		
Dogo 12 Dog VII Line 2. T	Total for line 24e	\$299,870	\$286,399	\$ 10,396		lited the consolidate	
	he organization's CFO compiled						eu
financial statements of this o	rganization and its affiliates. Fil	nance Committe	ee selects th	e audit firm an	d provides au	ait oversight.	

Officers

Chair

Patrick A. Bond Mountaineer Capital 107 Capitol Street, Suite 300 Charleston, WV 25301 304-347-7521 phone 304-347-0072 fax pabond@mtncap.com

Vice Chair

Michael J. Basile Spilman, Thomas & Battle P. O. Box 273 Charleston, WV 25321 304-340-3854 phone 304-340-3801 fax mbasile@spilmanlaw.com

Secretary

Diana Sole Walko MotionMasters 1 Creative Place Charleston, WV 25311 304-345-8800 phone 304-345-8809 fax dsole@motionmasters.com

Treasurer

Virginia L. King Kanawha Stone P. O. Box 503 Nitro, WV 25143 304-755-8271 phone 304-755-8274 fax virginia.king@kanawhastone.com

Directors

J. Mark Bias BB&T P. O. Box 1793 Charleston, WV 25326 304-348-7368 phone 304-341-1037 fax mbias@bbandt.com

Gregory A. Burton
BrickStreet Insurance
400 Quarrier Street
Charleston, WV 25301
304-941-1110
304-941-1160
greg.burton@brickstreet.com

John Calvert Advanced Technical Solutions P. O. Box 460 Dunbar, WV 25064 304-549-4858 phone jcalvert@atsnetworking.com

Hazo W. Carter, Jr.
West Virginia State University
P. O. Box 399
Institute, WV 25112
304-766-3112 phone
304-768-9842 fax
carterhw@wvstateu.edu

John T. Copenhaver JPMorgan Chase P.O. Box 1113 Charleston, WV 25324-1113 304-348-4413 phone 304-348-6903 fax john.t.copenhaver@chase.com

J. Hornor Davis, IV
Dingess-Rum Properties, Inc.
723 Kanawha Boulevard, 14th Floor
Charleston, WV 25301
304-414-2335 phone
304-414-2336 fax
hornor@drprop.biz

Stephen P. Dexter Thomas Memorial Hospital 4605 MacCorkle Avenue, SW South Charleston, WV 25309 304-766-3523 phone 304-414-2723 fax steve.dexter@thomaswv.org

Terrell Ellis & Associates, Inc. P.O. Box 1925 Charleston, WV 25327 304-342-6972 phone 304-342-1639 fax tbeassoc@aol.com

Georgette George Monarch Holdings, LLC P. O. Box 8615 South Charleston, WV 25303 304-744-4641 phone 304-744-4525 fax georgette@georgette.com

Lois A. Gillenwater
Pray Construction
4964 Teays Valley Road
Scott Depot, WV 25560
304-755-4944 phone
304-755-7679 fax
lgillenwater@prayconstruction.com

James L. Guidarini
Dow Chemical Company
P.O. Box 1005
Institute, WV 25112
304-747-1748 phone
304-747-1618 fax
jlguidarini@dow.com

Julie Gurtis
United Bank
P. O. Box 393
Charleston, WV 25392
304-348-8364 phone
304-348-8476 fax
Julie.Gurtis@bankwithunited.com

Tania Hotmer Appalachian Power P. O. Box 1986 Charleston, WV 25327 304-348-4132 phone 304-348-4722 fax tahotmer@aep.com

Steve Lemmerman
Charleston Marriott
200 Lee Street, East
Charleston, WV 25301
304-345-6500 phone
304-353-3720 fax
steve.lemmerman@marriott.com

Charles Loeb
Jackson Kelly
P. O. Box 553
Charleston, WV 25322
304-340-1298 phone
304-340-1080 fax
cloeb@iakcksonkelly.com

Wayne Morgan

WV American Water P.O. Box 1906 Charleston, WV 25327 304-340-2000 phone 304-340-2076 fax wayne.morgan@amwater.com

Roger L. Nicholson International Coal Group, Inc. 300 Corporate Centre Drive Scott Depot, WV 25560 304-760-2400 phone 304-760-2699 fax rnicholson@intlcoal.com

Maureen O'Toole ImageServ 2345 Chesterfield Avenue, Suite 205 Charleston, WV 25304 304-414-2222 phone 304-414-2233 fax motoole@imageserv.net Robert Pepper NGK Spark Plugs (USA), Inc. One NGK Drive Sissonville, WV 25320 304-988-0060 phone 304-988-0069 fax rpepper@ngksparkplugs.com

Thomas S. Provost Kureha PGA LLC 901 West Dupont Avenue Belle, WV 25015 304-513-0100 phone 304-513-0123 fax provost@kureha.com

Jack Rossi
Arnett & Foster
P. O. Box 2629
Charleston, WV 25329
304-346-0441 phone
304-346-8333 fax
iack.rossi@afnetwork.com

Steven M. Rubin
Blue Creek Gas Company
1700 Pennsylvania Avenue
Charleston, WV 25302
304-0141 phone
304-342-0142 fax
bluegas@att.net

John R. Ruddick Verizon 1500 MacCorkle Avenue, SE Charleston, WV 25314 304-344-7234 phone 304-344-6123 fax john.r.ruddick@verizon.com

H. G. (Chip) Shaffer III Shaffer & Shaffer 330 State Street Madison, WV 25130 304-369-0511 phone 304-369-5431 fax hshaffer@shafferlaw.net

Maribeth Anderson Chesapeake Energy 900 Pennsylvania Avenue Charleston, WV 25302 304-391-5535 phone 304-353-5093 fax maribeth.anderson@chk.com

Norman (Trip) Shumate Charleston Gazette 1001 Virginia Street, E. Charleston, WV 25301 304-348-1716 phone 304-348-1795 fax tshumate@wvgazette.com

T. William Signorelli
Security America
P. O. Box 4525
Charleston, WV 25364
304-925-4747 phone
304-925-4700 fax
billsignorelli@securityamerica.com

Sally Smith
Bowles, Rice, McDavid, Graff & Love
P. O. Box 1386
Charleston, WV 25325
304-347-1100 phone
304-343-3058 fax
ssmith@bowlesrice.com

Ex-Officio Members

David J. Hardy Kanawha County Commission P. O. Box 3627 Charleston, WV 25336 304-357-0219 phone 304-357-0788 fax davidhardy@kancocomm.com

Danny Jones
Mayor, City of Charleston
P. O. Box 271
Charleston, WV 25330
304-348-8174 phone
304-348-8034 fax
mayorjones@cityofcharleston.org

John Cavender
Chairman, Charleston Urban
Renewal Authority
P. O. Box 6190
Charleston, WV 25362
304-343-2201 phone
304-343-2243 fax
john.cavender@Cityholding.com

Frank A. Mullens, Jr.
Mayor, City of South Charleston
P. O. Box 8597
South Charleston, WV 25303
304-744-5301 phone
304-744-6587 fax
fmullens@suddenlinkmail.com

Jack W. Nuckols
WVU Institute of Technology
Kanawha County Commission Designee
103 ELab Building
Montgomery, WV 25136
304-442-3172 phone
304-442-3454 fax
jack.nuckols@mail.wvu.edu

Dick Callaway
Mayor, City of St. Albans
Lower Kanawha Valley Mayor's
Association
1499 MacCorkle Avenue
St. Albans, WV 25177
304-727-2971 phone
304-722-6555 fax
samayor@suddenlinkmail.com

Executive Committee

Chair

Patrick A. Bond Mountaineer Capital 107 Capitol Street, Suite 300 Charleston, WV 25301

Vice-Chair

Michael J. Basile Spilman, Thomas & Battle P. O. Box 273 Charleston, WV 25321

Secretary

Diana Sole Walko Motion Masters 1 Creative Place Charleston, WV 25311

Treasurer

Virginia L. King Kanawha Stone P. O. Box 503 Nitro, WV 25143

J. Mark Bias BB&T P. O. Box 1793 Charleston, WV 25326

David J. Hardy Kanawha County Commission P. O. Box 3627 Charleston, WV 25336

Danny Jones Mayor, City of Charleston P. O. Box 271 Charleston, WV 25330

Jack Rossi Arnett & Foster P. O. Box 2629 Charleston, WV 25329 John R. Ruddick Verizon 1500 MacCorkle Avenue, SE Charleston, WV 25314

T. William Signorelli Security America P. O. Box 4525 Charleston, WV 25364

Sally Smith Bowles, Rice, McDavid, Graff & Love P. O. Box 1386 Charleston, WV 25325

SCHEDULE R (Form 990)

Name of the organization

Capital Area Development Corporation of West Virginia, Inc.

Part I

Š	
reas	Z
흄	e Se
to to	ž
g g	a R
Sepa Sepa	ntem

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

Related Organizations and Unrelated Partnerships

Ş
nctio
instr
separate
See 8
990
For
2
듄

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

•	
_	
_	9
0	200
Ø	ć
	П

OMB No 1545-0047

Employer Identification number Inspection

55-6024192

(g) Section 512(b)(13) controlled entity? (f)
Direct controlling
entity Schedule R (Form 990) 2011 Ŷ Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) Yes (f)
Direct controlling
entity (e) End-of-year assets N/A N/A 11a type I N/A N/A N/A Public chanty status (if section 501(c)(3)) (d) Total income (d) Exempt Code section 501(c)(3) 501(c)(6) 501(c)(6) (c)
Legal domicile (state or foreign country) Cat. No 50135Y (c)
Legal domicile (state
or foreign country) (b) Primary activity **Economic Development WV Economic Development WV** Economic Development WV (b) Pnmary activity For Paperwork Reduction Act Notice, see the Instructions for Form 990. 55-0680725 55-0714069 23-7061206 (a) Name, address, and EIN of disregarded entity (a) Name, address, and EIN of related organization (3) Interregional Chamber of Commerce, Inc. 1116 Smith Street, Charleston, WV 25301 1116 Smith Street, Charleston, WV 25301 1116 Smith Street, Charleston, WV 25301 (2) Enterprise Properties, Inc. (1) CADCO Foundation, Inc. Part II (1) N/A 2 **© £** 9 9 € 9 9 더

(k) Percentage (h) Percentage ownership ownership Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) (g) Share of end-of-year assets (i) General or ŝ managing partner? Yes Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) (f) Share of total income (e)
Type of entrly
(C corp., S corp,
or trust) (g) (h)
Share of end-of- Dsproportionate ŝ allocations? Yes year assets (d)
Direct controlling
entity (f) Share of total income (c) Legal domicile (state or foreign country) (e)
Predominant
income (related,
unrelated,
excluded from
tax under
sections 512-514) Primary activity (d)
(Direct controlling entity (c)
Legal
domicile
(state or
foreign (a) Name, address, and EIN of related organization (b) Primary activity N N related organization (a) Name, address, and Part IV Part III (1) N/A (1) N/A (<u>)</u> 0 2 ල 2 ପ **£** 3 9 4 9 9

Schedule R (Form 990) 2011

Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.) Schedule R (Form 990) 2011

Part V Transactio

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.			Yes	S
1 Dunng the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	ed organizations listed i	n Parts II⊣V?		
			1a	>
b Gift, grant, or capital contribution to related organization(s)			- 1 p	>
c Gift, grant, or capital contribution from related organization(s)			. 1c <	
d Loans or loan guarantees to or for related organization(s)			P	\
e Loans or loan guarantees by related organization(s)			16 🗸	
f Sale of assets to related organization(s)			+	>
g Purchase of assets from related organization(s)			19	
h Exchange of assets with related organization(s)			1	
i Lease of facilities, equipment, or other assets to related organization(s)		· · · · · · ·	>	
i Lease of facilities, equipment, or other assets from related organization(s)			=	\ \
k Performance of services or membership or fundraising solicitations for related organization(s)		· · · · · · · · · · · · · · · · · · ·	>	-
l Performance of services or membership or fundraising solicitations by related organization(s)			=	 >
_			- m	
n Sharing of paid employees with related organization(s)			- 11 ·	
Reimbursement paid to related organization(s) for expenses			-	7,
			- -	- >
			, 1q ,	
.				
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	ine, including covered r	elationships and trans	saction threshold	S.
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved	guir
CADCO Foundation, Inc. (1)	U	77,284	77,284 See Part VII	
CADCO Foundation, Inc.	83	19,147	See Part VII	
Interregional Chamber of Commerce, Inc.	· -	5,430	5,430 See Part VII	
CADCO Foundation, Inc., Enterprise Properties, Inc. and Interregional Chamber of Commerce, Inc. (4)	k, m, n	43,095	43,095 See Part VII	
CADCO Foundation, Inc., Enterprise Properties, Inc. and Interregional Chamber of Commerce, Inc. (5)	ρ, r	8,346	8,346 See Part VII	
(9)				
		Schec	Schedule R (Form 990) 2011	201

Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.) Part VI Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) (b) (c) (d) (e) (f)	(q)	(2)	Ð	(9)	(£)		3	1	6	3
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	Predominant income (related,	Are all partners section	Snare of total income	Share of end-of-year	Disproportionate allocations?	amount in box 20	General or managing	Percentage ownership
		country)	unrelated, excluded from tax under	organizations?				of Schedule K-1 (Form 1065)	partner?	
			section 512-514)	Yes			Yes No		Yes No	
(1) N/A										
(2)										
(6)										
(4)										
(5)										
(9)										
(7)										
(8)										
(6)										
(10)										
(11)										
(12)										
(13)				_						
(14)										
(15)	}									
(16)										
								Sche	dule R (For	Schedule R (Form 990) 2011

Part VII Supplemental Information Complete this part to provide additional information for responses to questions on Schedule R (see instructions).
Part V, Line 2(1): The reporting organization received grants from the CADCO Foundation to support operation of the organization's
business incubator building. Total grants received in 2011 were \$77,284.
Part V, Line 2(2): The reporting organization owes two separate notes payable to the CADCO Foundation. These funds were borrowed
from the Foundation's board-designated endowment for the purpose of real estate improvements to the business incubator building owned
and operated by the reporting organization. Funds are repaid monthly, based on amortization schedules computed with competitive fixed
interest rates in effect at the time of loan. Monthly repayments replenish the Foundation's endowment account. In 2011, the CADCO
Foundation advanced an additional \$52,025 for major build out of the business incubator's unfinished fourth floor. Construction is
scheduled for completion mid-2012, at which time a plan will be developed to repay construction funds advanced by the Foundation. At
12/31/11, total notes payable to the CADCO Foundation, including new construction advances were \$153, 113. Total payments to the CADCO
Foundation on prior notes payable were \$32,878 in 2011.
Part V, Line 2(3): The reporting organization receives monthly rental income from its related organization, the Interregional Chamber of
Commerce, for reimbursement of occupancy costs related to Chamber activities. Total rents received from the Chamber in 2011 were
\$5,430.
Part V, Line 2(4): The reporting organization receives nominal membership dues of \$365 each from its related organizations - CADCO
Foundation, Enterprise Properties and the Interregional Chamber of Commerce. All administrative and management functions of the
related organizations are performed by staff of the reporting organization without charge to CADCO Foundation, at cost to the Chamber
and for an annual management fee of \$42,000 to Enterprise Properties.
Part V, Line 2(5): As with many related organizations managed by shared staff and utilizing shared resources, CADCO Foundation,
Enterprise Properties and the Interregional Chamber of Commerce use intercompany due to/due from accounts with the reporting
organization to capture transfers and other transactions during the normal course of recordkeeping. The net increase in the Foundation's
payable to the reporting organization in 2011 was \$4,759. The net decrease in Enterprise Properties' payable to the reporting organization
in 2011 was \$197. The net decrease in the Chamber's receivable from the reporting organization in 2011 was \$3,785.