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Form **990**

Change of Accounting Period Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

A	For the 20	012 calend	ar year, or tax year beginnir	ng 7/01	, 2012, and	d ending	12/31	•	2012		
В	Check if app	licable	С				D	Employer Identifi	cation Number		
	Address	s change	Inland Developmen		20-10240	04					
	Name o	hange	PO Box 757	-			E	Telephone numbe	er		
	Initial re	eturn	Heppner, OR 97836					541-571-	8695		
	Termina	ated									
	Amend	ed return					G	Gross receipts \$	546,204.		
	\vdash	tion pending	F Name and address of principal of	officer		H(a		up return for affili			
	□ …		Same As C Above			Н(ь	Are all affilia	ates included? ch a list (see insti			
$\overline{}$	Tax-exem	pt status	501(c)(3) X 501(c) (4) ◄ (insert no)	4947(a)(1) or	527	If 'No,' attac	th a list (see insti	ructions) — —		
亍	Website		<u> </u>	, (,			Group exem	ption number			
K		rganization	178	Association Other	I Year	of Formation		M State of le	gal domicile OR		
-		Summar		Association	Liear	OI T OI III ation	2004	III State of le	gar dornicile OI(
E.F.	1 Brie	efly descri	e the organization's mission	or most significant act	ivities To	aroui da	201122	and broad	thand		
	£-	-	es and services o					ced broad			
Activities & Governance	1 21		er or at rates the			V _CO_01	-cas Ta	CVIII III	2 <u>er</u> <u>7</u> r c e 2		
Tar.	27	<u>.cogeci</u>	or or ac races cm	ac are cost pro	minicive.						
Ver	2 Che	ck this bo	x ► ☐ if the organization	discontinued its operati	ons or disposed	d of more t	 han 25% o	f its net asset			
ලි	3 Nur		ing members of the govern					3	4		
∘ಶ	4 Nur	mber of in	ependent voting members of	of the governing body (F	Part VI, line 1b)			4	4		
ţį	5 Tot	al number	of individuals employed in c	alendar year 2012 (Par	t V, line 2a)			5	0		
:≦	6 Tot	al number	of volunteers (estimate if ne	ecessary)				6	0		
Ąc			d business revenue from Pa		12			7 a	0.		
·	_	unrelated	business taxable income fro	om Form 990-T, line 34				7 Б	0.		
UN 2 7 2013	_						Prior	Year	Current Year		
\lesssim	8 Cor		and grants (Part VIII, line 1			_					
∑ Ju	9 Pro		ce revenue (Part VIII, line 2				1,5	28,308.	546,192.		
&\$	10 Inv		come (Part VIII, column (A)			23.	-160,813.				
z"	11 Oth	er revenu									
1	12 Tot		- add lines 8 through 11 (r		lumn (A), line 1	2)		28,331.	385,379.		
-	IS Gra	nts and s	13,000.	2,000.							
SCANNED Expenses	14 Ber	nefits paid									
贤。	15 Sal	aries, oth	r co mpen sation, employee	begents (Part IX, colum	ın (A), lınes 5-1	0) [3	53,184.	152,288.		
浸 g	16 a Pro	fessional	undraising tees (Par Willo	lu rch (A), line 11e)				1			
Mag and	. b Tot	al fundrai:	ng expenses (Part IX, colu	ma ∰ line 25) ►							
<u> </u>	17 Oth		s (Part IX column (A), line				1 1	21,598.	376,258.		
193	18 Tot	al avoanc	s. Addunes 13-17 mist eq	water IX column (A)	luna 25)	F					
			expenses. Subtract line 18		, iiie 23)			87,782.	530,546.		
- 5 8	is rev		expenses. Subtract line to	TOTT IIIIe 12		<u> </u>		40,549.	-145,167.		
Net Assets of	20 Tol	al accata	Part X, line 16)			<u> </u>		Current Year	End of Year		
Ass	20 Tot 21 Tot		(Part X, line 26)			-	6,3	13,200.	6,168,033.		
5	21 100		• •			F		0.	0.		
	22 1461		fund balances Subtract line	e 21 from line 20			6,3	<u> 13,200.</u>	6,168,033.		
P	art II	Signatu	e Block								
Und	er penalties of	perjury, I dec	re that I have examined this return, inc er (other than officer) is based on a	luding accompanying schedules :	and statements, and t	to the best of m	y knowledge a	nd belief, it is true,	correct, and		
		I	a South thair embery is based on a	- Property	Thas any renominage						
		Signati	e of officer	edy-			Date	6-6-1	3		
Si	gn	1					_ Date				
He	ere	<u>Jer</u>	ry Healy	<u>-</u>			Preside	ent			
			print name and title					11 -15	OTINI -		
		l_ **.	·	Preparer's signature) !	ate	Che	" LJ"	PTIN		
Pa	nid	Lonni		V 2	R .	<u>5131120</u>) 1 3 self	-employed I	200419552		
	eparer	parer Firm's name Read & Bose, CPA's, PC									
Us	se Only	Firm's addr	ss 215 SE Dorion				Firn	n's EIN ► 72-	1542789		
			Pendleton, OR	97801-2552			Pho	ne no (541			
Ma	y the IRS	discuss th	s return with the preparer sl		uctions)				X Yes No		
	-		eduction Act Notice, see the			TEEA01	13L 12/18/1	2 .	Form 990 (2012)		

Parl	111	Statement of Program Service Accomplishments					
	5	Check if Schedule O contains a response to any question in this	Part III				
		ly describe the organization's mission.	norwing a gray a fiber out		. + ~	.1	_
		<pre>provide advanced broadband facilities and eas lacking in services altogether or at r</pre>				<u>K_ L</u>	<u></u>
	are	as lacking in services altogether of at i	aces that are cost promini	CTAG	<u></u> -		
			- 				
2	Did th	he organization undertake any significant program services during	he year which were not listed on the prior				
_		1 990 or 990-EZ?			Yes	\mathbf{x}	No
	If 'Ye	es,' describe these new services on Schedule O.				ت	
3	Did th	he organization cease conducting, or make significant changes in h	ow it conducts, any program services?		Yes	X	No
	If 'Ye	es,' describe these changes on Schedule O.		لسسا		ш	
	Section	cribe the organization's program service accomplishments for each ion 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) truits, the total expenses, and revenue, if any, for each program services.	sts are required to report the amount of gr	easure ants an	d by ex id alloca	pense ations	es s to
4 a	(Code	de.) (Expenses \$ 435,019. including gran	s of \$ 2.000) (Revenue	\$	381	5.3	79.)
70	-	land Development Corporation will provide					, , , ,
		ucational and public sectors for the advan				- -	
		formation sharing.					
	==-						
				· 			
4 b	(Code	de) (Expenses \$ including gran	s of \$) (Revenue	\$)
4 c	(Code	de) (Expenses \$ including gran	s of \$) (Revenue	\$)
4 d		er program services. (Describe in Schedule O)					
		penses \$ including grants of \$) (Revenue \$)	
	Iotal	al program service expenses • 435,019.	20010		E^	000	(2012)
BAA		TEEA0102L 08/	אוואנ		rorm	330	(2012)

20-1024004

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			Yes	No
1	Is the drganization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, 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		Х
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		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable			
	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
i	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° <i>If 'Yes,' complete Schedule D, Part VII</i>	11 Ь		Х
•	c Did the organization report an amount for investments — program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х
•	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	11 d	Х	
•	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Х
1	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		Х
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a		Х
	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 and XII is optional	12b		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		х
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		Х
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		Х
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 Ь		

Form 990 (2012) Inland Development Corporation

Part IV | Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and IL	21		х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		Х
24 a	a 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25	24a		х
ŀ	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
(Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
(d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a 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		Х
ı	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If 'Yes,' complete Schedule L, Part I</i>	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		Х
	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).	_		3.5
	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
ŀ	b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28Ь		Х
29	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	28c		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		х
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		Х
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	х	
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
ŀ	o If 'Yes' to line 35a, 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	Х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Х	
AA		Form	990 (2012)

Par	t V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any guestion in this Part V				
	Check if Schedule O contains a response to any question in this Part V			Yes	No
1 2	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a 1		165	110
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors				
	(gambling) winnings to prize winners?		1 c		X
2 a	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 0			
Ь	If at least one is reported on line 2a, did the organization file all required federal employment	ļ.	2 b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see ins	,		1	
	Did the organization have unrelated business gross income of \$1,000 or more during the year	?	_3a		X
	If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	ļ	3Ь		
	At any time during the calendar year, did the organization have an interest in, or a signature of financial account in a foreign country (such as a bank account, securities account, or other financial account, or other financial account, or other financial account.	or other authority over, a lancial account)?	4 a		Х
b	If 'Yes,' enter the name of the foreign country.				
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Fil				.,
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax	· .	5 a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelte	r transaction?	5Ь		Х
C	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5 c		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, ar solicit any contributions that were not tax deductible as charitable contributions?	d did the organization	6 a		Х
E	If 'Yes,' did the organization include with every solicitation an express statement that such conot tax deductible?	ntributions or gifts were	6 Ь		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and paservices provided to the payor?	rtly for goods and	7 a		
b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	Ì	7 b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for wh Form 8282?	ich it was required to file	7 c		
c	If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal b	enefit contract?	7 e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal bene	efit contract?	7 f		
ç	If the organization received a contribution of qualified intellectual property, did the organization as required?	n file Form 8899	7 g		
ŀ	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form 1098-C?	organization file a	7 h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting supporting organization, or a donor advised fund maintained by a sponsoring organization, habidings at any time during the year?	organizations. Did the live excess business	8		
9	Sponsoring organizations maintaining donor advised funds.				
a	Did the organization make any taxable distributions under section 4966?		9 a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9 b		
10	Section 501(c)(7) organizations. Enter.				
a	Initiation fees and capital contributions included on Part VIII, line 12	10 a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10 b			
11	Section 501(c)(12) organizations. Enter	"			
a	Gross income from members or shareholders	11 a			
Ŀ	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11 b		***************************************	
12 a	Section 4947(a)(1) non - exempt charitable trusts. Is the organization filing Form 990 in lieu of	Form 1041?	12 a		
t	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
a	Is the organization licensed to issue qualified health plans in more than one state?		13 a	1	
	Note. See the instructions for additional information the organization must report on Schedule	0.			
b	Enter the amount of reserves the organization is required to maintain by the states in				
	which the organization is licensed to issue qualified health plans	13b			
	Enter the amount of reserves on hand	13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	_	14 a		X
Ŀ	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in S	chedule O	14 b	1 I	

Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for

	a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or cha Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI	anges	ın	X
Se	ction A. Governing Body and Management			
		F	Yes	No
1	a 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.	1		
	b Enter the number of voting members included in line 1a, above, who are independent 1 b	4		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee?	2		х
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		Х
4	Did the organization make any significant changes to its governing documents			
	since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7	a 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?	7 a		Х
	b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?	7 b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following.			
	a The governing body?	8 a	Х	
	b Each committee with authority to act on behalf of the governing body?	8Ь		X
	Is there any officer, director or 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		х
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Re-	/enue	Code))
			Yes	No
10	a Did the organization have local chapters, branches, or affiliates?	10 a		Х
	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?	10 b		
	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	X	
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990 See Schedule O	<u> </u>		
	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12 a	Х	
	b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b	х	
	c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done	12 c	Х	
	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	a The organization's CEO, Executive Director, or top management official	15 a		Х
	b Other officers of key employees of the organization	15 b		Х
	If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a		Х
	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 taken steps to safeguard the organization's exempt status with respect to such arrangements?	16 b		
Se	ction C. Disclosure			
	List the states with which a copy of this Form 990 is required to be filed ►OR			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available. Check all that apply.	aılable	for pul	olic
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	the public during the tax year. See Schedule O			
20		anizatio	n	
	Inland Development Corporation PO Box 757 Heppner OR 97836 541-571-8695			

Form 990 (2012) II	nland Development Corporation	20-1024004	Page :
Part VII Compen	sation of Officers, Directors, Trustees, Key Employees, High Ident Contractors	nest Compensated Employees, and	1 -
Check if S	schedule O contains a response to any question in this Part VII		L

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

- 1 a 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	zation nor any related organization compensated any current officer, director, or trustee.									
		(C)								
(A) Name and Title	(B) Average hours per week (list	offic	on (do ox, un er an	dad	checi perso irecto	more to n is botor/truste	e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W 2/1099 MISC)	(F) Estimated amount of other compensation
	any hours for related organiza tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W 2/1099-MISC)	(W 2/1099-MISC) (W 2/1099 MISC)	
_(1)_Jerry_Healy	5	ļ								
President	0	Х		X				0.	0.	0.
(2) Marv Padberg	1	ļ								
Vice President	0	X		Х		-		0.	0.	0.
(3) James Deason	- 8 -			.,				0	00.700	0
Sec/Treas	32	X		Х				0.	92,700.	0.
_(4) Richard Devin Director	1-0.3	Х						0.	0.	0.
(5) Patricia A Lauritsen	12		-					0.	U.	
General Manager	$-\frac{12}{28}$	t				х		o.	114,374.	17,792.
(6) Bruce A Munro	12_					- 11		0.	114,574.	11,132.
Network Manager	$-\frac{1}{28}$	t				Х		0.	121,634.	6,992.
									,	
							:			
(10)	 	ļ								
(11)										
<u>(12)</u>										
(13)										
(14)										

Page 8

• (A) Name and title	(B) Average hours per week	(do box offi	not o	Pos check ess pend a	sition more erson direct	than is both	one h an tee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	Es amou	(F) stimated int of other pensation
	(list any hours for related organiza tions below dotted line)	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	ormer	(W 2/1099 MISC)	(W 2/1099-MISC)	fr org an	om the anization d related anizations
(15)											
(16)								-			
(17)							_				<u>-</u>
(18)				-							
(19)											
20)			_								
21)											
(22)		1									
(23)											
(24)											
(25)		1									
1 b Sub-total	J	1	<u> </u>	1	<u> </u>		_	0.	328,708.		24,784
c Total from continuation sheets to Part VII, Section	A						۸ ۱	0.	0.		(
d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limite	d to tho	se lis	ted	abo	ve)	who	rece	0. eived more than \$	328,708. 100,000 of reportabl		24,784 ensation
from the organization ► 0									 		Yes N
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such a	or trust Individua	ee, k al	ey (emp	loye	e, or	hıg	hest compensate	d employee	3	
4 For any individual listed on line 1a, is the sum of rethe organization and related organizations greater such individual	portable than \$15	con 50,00	nper 0? <i>I</i>	nsati If 'Ye	on a	and o	the <i>lete</i>	r compensation fr Schedule J for	om	4	
5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,'	compens	sation	n fro	m a	ny ι I for	nrela	ated	organization or in	ndıvıdual	5	
Section B. Independent Contractors							•	-		1	4
1 Complete this table for your five highest compensation from the organization. Report compensation.	ted inde ensation	pend for t	lent he c	con aler	trac idar	ors t year	hat end	received more the ding with or within	an \$100,000 of the organization's t	ax year	
(A) Name and business addre	ss				_			Description (B)		((Compe	c) nsation
		_	-								
Total number of independent contractors (including	but not	lımıt	ed t	o th	ose	lister	i ah	ove) who received	d more than		
\$100,000 in compensation from the organization	0		11081							Form	

	Check if Schedule O contains a response to any question	7	(5)		
•	•	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ANI	1 a Federated campaigns 1 a				
흥릴	b Membership dues 1 b]			
Z Z	c Fundraising events 1 c				
ַּ	d Related organizations 1 d				
	e Government grants (contributions)				
AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grants, and similar amounts not included above				
	g Noncash contributions included in Ins 1a-1f \$				
<u>щ</u>	h Total. Add lines 1a-1f				
Ē	Business Code	546 400			
PROGRAM SERVICE REVENUE	2a Broadband Services	546,192.	546,192.	· · · · · · · · · · · · · · · · · · ·	
3	<u> </u>				-
SER	d				
AM	e				
See	f All other program service revenue			<u>-</u>	
2	g Total. Add lines 2a-2f	546,192.		······································	
	Investment income (including dividends, interest and other similar amounts)	12.		***************************************	12.
	4 Income from investment of tax-exempt bond proceeds	12.			12.
	5 Royalties				
	(i) Real (ii) Personal				
•	6a Gross rents				
	b Less rental expenses.]			
	c Rental income or (loss)				
	d Net rental income or (loss)				
	7 a Gross amount from sales of assets other than inventory (i) Securities (ii) Other			•	
	b Less cost or other basis and sales expenses 160, 825				
	and sales expenses 160, 825. c Gain or (loss) -160, 825.	-			
	d Net gain or (loss) ►	-160,825.	-160,825.		
	8 a Gross income from fundraising events	100,023.	100,023.		
븰	(not including \$				
2	of contributions reported on line 1c).				
2	See Part IV, line 18.				
OTHER REVENU	b Less direct expenses b				
	c Net income or (loss) from fundraising events				
	9 a Gross income from gaming activities. See Part IV, line 19 a				
	b Less. direct expenses b				
	c Net income or (loss) from gaming activities	1			
	10 a Gross sales of inventory, less returns and allowances				
	b Less cost of goods sold b	1			
	c Net income or (loss) from sales of inventory	i			
	Miscellaneous Revenue Business Code				
	11 a	j į	Ì		
	b				<u> </u>
	с			·	
	d All other revenue				
	e Total. Add lines 11a-11d			······································	
	12 Total revenue. See instructions	385,379.	385,367.	0.	12

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) Check if Schedule O contains a response to any question in this Part IX. (A) (B) (D) Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII Management and general expenses Total expenses Program service Fundráising <u>expens</u>es expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 Grants and other assistance to individuals in the United States See Part IV, line 22 2,000 2,000 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 3 Benefits paid to or for members. Compensation of current officers, directors. trustees, and key employees 0 0 0 0. 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 0 0. Other salaries and wages 134,941 107,953 26,988 Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions) 4,565 3,652 913 Other employee benefits 12,782 10,226 2,556 Payroll taxes 10 11 Fees for services (non-employees) a Management **b** Legal 131 131 c Accounting 1.928 1,928 d Lobbying e Professional fundraising services See Part IV, line 17 f Investment management fees g Other (If line 11g amt exceeds 10% of line 25, col-872 1,528 656 umn (A) amt, list line 11g expenses on Sch O) Advertising and promotion 1.784 1,784 Office expenses 1,390 1,390 14 Information technology 15 Royalties 16 Occupancy 3,117. 137. 2,980 17 Travel 9,337 7,470 1,867 Payments of travel or entertainment 18 expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 233,204 186,563 46,641 23 15,772. 15.772Other expenses Itemize expenses not 24 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.) 38,967 38,967 a Fiber Optic Cable Expense b Truck & Vehicle Expense 31,640 31,640. 13,804 11,128 2,676 d Pole Contracts 6,499 6,499 e All other expenses 17,157 <u>12,140</u> 5,017 25 Total functional expenses Add lines 1 through 24e 530,546 435,019 95,527 0. Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. SOP 98-2 (ASC 958-720)

Balance Sheet

Part X

Check if Schedule O contains a response to any question in this Part X (B) End of year (A) Beginning of year Cash - non-interest-bearing 75,391 1 13,938. Savings and temporary cash investments 23,083 2 15,158. 3 Pledges and grants receivable, net 3 Accounts receivable, net 19,942 4 62,663 Loans and other receivables from current and former officers, directors, 5 trustees, key employees, and highest compensated employees. Complete Part II of Schedule L. 5 Loans and other 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). Complete Part II of Schedule L 6 7 Notes and loans receivable, net 8 Inventories for sale or use Prepaid expenses and deferred charges 9 10 a Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule $\mathsf D$ 10 a 6,556,948. 10 b **b** Less accumulated depreciation 2,500,251 10 c 4,431,668 4,056,697. Investments - publicly traded securities 11 12 12 Investments - other securities See Part IV, line 11 Investments - program-related. See Part IV, line 11 13 13 14 14 Intangible assets 15 Other assets. See Part IV, line 11 1,763,116 15 2,019,577. Total assets. Add lines 1 through 15 (must equal line 34) 16 16 6,313,200 6,168,033 Accounts payable and accrued expenses 17 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, trustees, 22 key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 25 Total liabilities. Add lines 17 through 25. 0 26 0 Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets. 27 27 6,313,200 6,168,033. Temporarily restricted net assets 28 Permanently restricted net assets 29 29 R Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds 32 32 33 Total net assets or fund balances 33 6,313,200 6,168,033. 34 Total liabilities and net assets/fund balances 6,313,200 34 6,168,033. BAA Form 990 (2012)

		0-1024	JU4	Pa	age 12
Par	t XI Reconciliation of Net Assets		-		
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		385,	<u>379.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	r.	30,	<u>546.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3	-]	L45,	167.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	6,3	313,	200.
5	Net unrealized gains (losses) on investments .	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		_	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	6,1	168,	033.
Pai	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990. Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O				
2 8	Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a	X	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie separate basis, consolidated basis, or both.	wed on a			
	X Separate basis Consolidated basis Both consolidated and separate basis				
ı	Were the organization's financial statements audited by an independent accountant?		2 b		X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both. Separate basis Onsolidated basis Both consolidated and separate basis	rate			
•	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight or review, or compilation of its financial statements and selection of an independent accountant?	f the audit	20	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.				
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Audit Act and OMB Circular A-133?	ie Single	3 a	<u> </u>	Х
ا	olf 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the roundits, explain why in Schedule O and describe any steps taken to undergo such audits	equired au	dit 3 b		
BAA			Forr	n 990	(2012)

TEEA0112L 08/09/11

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No 1545 0047

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

Inl	and Development Corporation		20-1024004
Par	Organizations Maintaining Donor A	dvised Funds or Other Similar Funds	r Accounts. Complete if
	the organization answered 'Yes'	to Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		<u>.</u>
3	Aggregate grants from (during year) .		
4	Aggregate value at end of year		<u> </u>
5	Did the organization inform all donors and don are the organization's property, subject to the		donor advised funds Yes No
6	Did the organization inform all grantees, donor for charitable purposes and not for the benefit impermissible private benefit?	s, and donor advisors in writing that grant for the donor or donor advisor, or for any other than the donor or donor advisor, or for any other than the donor of the donor advisor.	inds can be used only ser purpose conferring Yes No
Par	t It Conservation Easements. Comp	olete if the organization answered '	Yes' to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by	the organization (check all that apply)	
	Preservation of land for public use (e.g., re	ecreation or education) Preservati	on of an historically important land area
	Protection of natural habitat	Preservati	on of a certified historic structure
	Preservation of open space	_	
2	Complete lines 2a through 2d if the organization last day of the tax year.	n held a qualified conservation contribution	in the form of a conservation easement on the
			Held at the End of the Tax Year
a	Total number of conservation easements		2 a
t	Total acreage restricted by conservation easer	ments	2 b
	: Number of conservation easements on a certif	ied historic structure included in (a)	2c
c	Number of conservation easements included in structure listed in the National Register	n (c) acquired after 8/17/06, and not on a his	toric 2 d
3	Number of conservation easements modified, tax year ►	transferred, released, extinguished, or term	nated by the organization during the
4	Number of states where property subject to co	nservation easement is located ►	
5	Does the organization have a written policy recand enforcement of the conservation easemen	garding the periodic monitoring, inspection, its it holds?	nandling of violations,
6	Staff and volunteer hours devoted to monitorin	g, inspecting, and enforcing conservation e	esements during the year
7	Amount of expenses incurred in monitoring, in ►\$	specting, and enforcing conservation easem	ents during the year
8	Does each conservation easement reported or	n line 2(d) above satisfy the requirements of	section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii) ²	· ······ = (=) === · · · · · · · · · · · · · · · · ·	Yes No
9	include, if applicable, the text of the footnote to conservation easements	o the organization's financial statements tha	
Par	Organizations Maintaining Collect Complete if the organization ans	t <mark>ions of Art, Historical Treasures, or</mark> swered 'Yes' to Form 990, Part IV,	Other Similar Assets. Ine 8.
1 a	If the organization elected, as permitted under art, historical treasures, or other similar assets in Part XIII, the text of the footnote to its finan	s held for public exhibition, education, or res	venue statement and balance sheet works of earch in furtherance of public service, provide,
ŀ	 If the organization elected, as permitted under historical treasures, or other similar assets hel following amounts relating to these items 	d for public exhibition, education, or research	
	(i) Revenues included in Form 990, Part VIII,	line 1	► \$
	(ii) Assets included in Form 990, Part X		► \$
2	If the organization received or held works of a amounts required to be reported under SFAS		s for financial gain, provide the following
ä	a Revenues included in Form 990, Part VIII, line	1	> \$
	Assets included in Form 990, Part X		► \$

Schedule D (Form 990) 2012 Inla	nd Develo	oment	Corporat:	ion		20-102	4004 Page 2
Part III Organizations Maintain	ning Collecti	ons of	Art, Historic	al Tre	easures, or Otl	ner Similar Assets	(continued)
3 Using the organization's acquisiti items (check all that apply).	on, accession,	and other	er records, che	eck any	of the following	that are a significant us	e of its collection
a Dublic exhibition			d Loan	or excl	nange programs		
b Scholarly research			e U Other				
c Preservation for future gener							
4 Provide a description of the orga Part XIII			•	•	•		e in
5 During the year, did the organiza to be sold to raise funds rather th	ition solicit or re nan to be main	eceive di tained as	onations of art	, nistor ganiza	ical treasures, or tion's collection?	other similar assets	Yes No
Part IV Escrow and Custodial Arra reported an amount of	angements. Co	mplete i	f the organiza			Form 990, Part IV, line	e 9, or
						<u></u>	
1 a Is the organization an agent, trus on Form 990, Part X?			_			er assets not included	Yes No
b If 'Yes,' explain the arrangement	ın Part XIII an	d comple	ete the followin	ig table	•		
							Amount
c Beginning balance						1 c	
d Additions during the year						1 d	
 e Distributions during the year f Ending balance 						1 e	
2a Did the organization include an a	mount on Forr	n 990 P:	art X line 212				Yes No
b If 'Yes,' explain the arrangement			•	tion ha	s been provided i	n Part XIII	
2 // rec, explain the arrangement			o ii iiio oxpiaii			Tr Git 7till	L
Part V Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10.							
	(a) Current		(b) Prior yea	ar	(c) Two years	(d) Three years	(e) Four years
1 a Beginning of year balance							
b Contributions							
c Net investment earnings, gains, and losses							
d Grants or scholarships						14***	
 Other expenditures for facilities and programs 							
f Administrative expenses							
g End of year balance							
Provide the estimated percentag	e of the curren	t year er	=	e 1g, c	olumn (a)) held a	S	
a Board designated or quasi-endov			[%]				
b Permanent endowment ►	%						
c Temporarily restricted endowmer			8				
The percentages in lines 2a, 2b,	and 2c should	equal 10	00%.				
3 a Are there endowment funds not a organization by.	n the possessi	on of the	organization t	that are	e held and admin	stered for the	Yes No
(i) unrelated organizations							3a(i)
(ii) related organizations							3a(ii)
b If 'Yes' to 3a(II), are the related of	=		•				3b
4 Describe in Part XIII the intended							
Part VI Land, Buildings, and							
Description of property			or other basis estment)	(b)	Cost or other asis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land	ļ						
b Buildings	1				20,427.	1,877.	18,550.
c Leasehold improvements	ļ						
d Equipment	-	···			2,312.	924.	1,388.
e Other Total. Add lines 1a through 1e (Column	an (d) must see	ıal Earn	000 Dod V -		6,534,209.	2,497,450.	4,036,759.
BAA	ii (a) must equ	iai r Utifi	990, Γαιι Λ, C	<u> </u>	(<i>b</i>), iiie 10(<i>c</i>).)	Sahar	4,056,697. dule D (Form 990) 2012
PUV.						Sched	Juie D (FUIII 990) 2012

Schedule D (Form 990) 2012 Inland Developmen		20-102	4004 Page 3
Part VII Investments - Other Securities. See Fo		12. N/A	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation. end-of-year market v	
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			-
(D)			
(D) (E)	"		
(F)			- -
<u>``</u> (G)			
(H)			
(1)			
Total (Column (b) must equal Form 990, Part X, column (B) line 12.)			
Part VIII Investments - Program Related. See	Form 990 Part Y	line 13. N/A	
(a) Description of investment type	(b) Book value		0-1-
(a) Description of investment type	(b) Book value	(c) Method of valuation end-of-year market v	
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total (Column (b) must equal Form 990, Part X, column (B) line 13)			
Part IX Other Assets. See Form 990, Part X,			
	escription		(b) Book value
(1) Investment in Windwave (Capital S	tock)		1,000.
(2) Investment in Windwave (Due From)			2,018,577.
(3)		1	
(4)			**
(5)	****		
(6)			
(7)			
(8)			
(9)			_
(10)		-1	
Total. (Column (b) must equal Form 990, Part X, column (b)	3), line 15).	>	2,019,577.
Part X Other Liabilities. See Form 990, Part	X. line 25.		
(a) Description of liability	(b) Book value		
(1) Federal income taxes			
(2)	-		
(3)			
(4)			
(5)		 	
(6)			
(7)		 	
			
(8)		 	
(9)		 	
(10)			
(11)			
Total (Column (b) must equal Form 990, Part X, column (B) line 25)	<u> </u>		
2. FIN 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote	to the organization's financial	statements that reports the organization's liability fo	or uncertain tax positions
under FIN 48 (ASC 740) Check here if the text of the footnote has been prov	TEEA33031 13/03/19		ulo D (Form 000) 2010

Schedule D (Form 990) 2012 Inland Development Corporation	20	-1024004 Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements	With Revenue per Return	N/A
Total revenue, gains, and other support per audited financial statements.		1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12.		
a Net unrealized gains on investments	2 a	
b Donated services and use of facilities	2 b	
c Recoveries of prior year grants	2 c	
d Other (Describe in Part XIII)	2 d	
e Add lines 2a through 2d		2 e
3 Subtract line 2e from line 1		3
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1.		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIII.)	4 b	1 1
c Add lines 4a and 4b		4 c
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12).		5
Part XII Reconciliation of Expenses per Audited Financial Statements	With Expenses per Retu	irn N/A
Total expenses and losses per audited financial statements	•	1
2 Amounts included on line 1 but not on Form 990, Part IX, line 25.		
a Donated services and use of facilities	2a	
b Prior year adjustments	2 b]
c Other losses	2 c	1
d Other (Describe in Part XIII.)	2 d	7
e Add lines 2a through 2d		2 e
3 Subtract line 2e from line 1		3
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b	4 a]]
b Other (Describe in Part XIII)	4 b]
c Add lines 4a and 4b		4c
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5
Part XIII Supplemental Information		
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Pa line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also compared to the compared to t	plete this part to provide any a	additional information
BAA		Schedule D (Form 990) 2012

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545 0047

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

Name of the organization	Employer identification number
Inland Development Corporation	20-1024004
Form 990, Part VI, Line 11b - Form 990 Review Process	·
The Board of Directors reviews the 990 prior to filing.	·
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available	·
All governing documents are available upon request.	
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SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

2012

OMB No 1545 0047

Open to Public Inspection

Employer identification number 20-1024004 Part I Identification of Disregarded Entities (Complete of the organization answered 'Yes' to Form 990, Part IV, line 33.) Inland Development Corporation Name of the organization

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)		(d) Total income	(e) End-of-year assets		(f) Direct controlling entity	D
(μ)								
(2)							1	
	, , 							
	İ							
(3)								
	1 							
Part II Identification of Related Tax-Exempt Organizations (Complete of 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.)	is (Complete if the case during the tax ye	organization answer	ed 'Yes' to Forn	1 990, Part IV,	line 34 becaus	se it had		
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))		(f) Direct controlling entity	(g) Sec 512(b)(13) controlled entity?	13) tity?
							Yes	<u>و</u>
ω								
				· · · ·				
(2)								

Schedule R (Form 990) 2012

TEEA5001L 12/28/12

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

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Schedule R (Form 990) 2012 Inland Development Corporation

20-10240

Part III 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.)

(a) Name, address, and EIN of Priirelated organization	(b) nary activity	,		(e) Predominant income Share of total (related, unrelated, excluded from tax under sections	come Share of total ited, income		Share of Disproporend-year allocations?	20	General or managing le partner?	or ' Percentage ownership	age hip
		country)		512-514)			Yes	No 1065)	Yes	₽	1
(1)											
							_				
(2)											
		-									
(3)											
Part IV Identification of Related Organizations Taxable as a C	l ated Organizati t had one or m	ons Taxable ore related	as a Cor organiza	poration or Tru ations treated	ust (Complete as a corpor	if the organiza	corporation or Trust (Complete if the organization answered 'Yes' to itzations treated as a corporation or trust during the tax year.)	corporation or Trust (Complete if the organization answered 'Yes' to Form 990, Part IV, nizations treated as a corporation or trust during the tax year.)	Part IV,		
(a) Name, address, and EIN of related organization	elated organization	(b) Primary activity		(c) Legal domicite (state or foreign	(d) Direct controlling	Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Sec 512(b)(13) controlled entity?	13) titly?
				commay	enny	(Seption 10				Yes	S
(1) Windwave Technologies, Po Box 185 - Heppner, OR 97836 - 20-1167279	ies, Inc.	Wireless	ss Se	OR	N/A	C Corp	1,196,561	3, 463, 421.	100.00	×	
(2)											
		 -									
	 	·									
(3)											
							-				
											
ВАА				TEEAS	TEEA5002L 12/28/12				Schedule R (Form 990) 2012	Form 990) 2(2012

20-1024004

Part V Transactions With Related Organizations (Complete of the organization answered 'Yes' to Form 990, Part IV, line 34, 35b, or 36.)	orm 990, Part IV	', line 34, 35b, or 3(. (:)		
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Yes	શ
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	s listed in Parts II-IV?		_ 		×
b Gift, grant, or capital contribution to related organization(s)			1 p		$ \times $
c Gift, grant, or capital contribution from related organization(s)			<u>-</u>	1	\times
d Loans or loan guarantees to or for related organization(s)			=	×	
e Loans or loan guarantees by related organization(s)			1e		×
f Dividends from related organization(s)			=	****	×
g Sale of assets to related organization(s)			1g		×
h Purchase of assets from related organization(s)			4		×
i Exchange of assets with related organization(s)			=		×
j Lease of facilities, equipment, or other assets to related organization(s)			-		×
b I now of facilities commonst as other second from valed accommendately			1		>
R cease or ractifies, equipment, or other assets from related organization (s) I Performance of services or membership or fundraising solicitations for related organization (s)			=		< ×
m Performance of services or membership or fundraising solicitations by related organization(s)			-		×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			٦		×
o Sharing of paid employees with related organization(s)			10	×	
p Reimbursement paid to related organization(s) for expenses			-		×
q Reimbursement paid by related organization(s) for expenses			19		\times
r Other transfer of cash or property to related organization(s)		٠	·		×
s Other transfer of cash or property from related organization(s)			18		×
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.	vered relationships ar	d transaction thresholds			
(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	d) determir involved	gui, p
(1) Windwave Technologies, Inc.	đ	2,018,577.	FMV		
(2) Windwave Technologies, Inc.	0	152, 288.	FMV		
(3)					
(4)					
(5)					
(9)					
BAA TEEA5003L 12/28/12		Schedul	Schedule R (Form 990) 2012	n 990) 2	2012

Part VI Unrelated Organizations Taxable as a Partnership (Complete of the organization answered 'Yes' to Form 990, Part IV, line 37.)

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) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Predominant income (related, unre-	(e) Are all partners section 501(c)(3)	Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?	oor- Code V-UBI amount in box 20 of Schedule		General or managing partner?	l	(k) Percentage ownership
			lated, excluded from tax under	organizatio	ńs?							
			section 512-514)	Yes	No		Yes	No		Yes	2	
(1)									_	_		
									•••			
				-	·							
(2)												
	·								,			
	,											
(3)												
	.,											
(4)											 	
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(<u>5</u>)												
(9)												
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(7)												
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(8)												
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	.,											
ВАА			TEE	TEEA5004L 12/28/12	28/12				Schedule		R (Form 990) 2012) 2012

Schedule R	(Form 990) 2012	Page 5
Part VI	Supplemental Information	
<u></u>	Complete this part to provide additional information for responses to questions on Schedule R (see instructions).	
		. – – – –
		<u>-</u>
		. – – – –
		-
	·	

Form **4562**

Depreciation and Amortization (Including Information on Listed Property)

► See separate instructions.

OMB No 1545-0172

2012

Attachment Sequence No 179

Department of the Treasury Internal Revenue Service
Name(s) shown on return
Inland Develo

► Attach to your tax return.

	(s) shown on return							ntifying number
Busine	and Development ess or activity to which this form rel	Corporation					20)-1024004
	m 990/990-PF	ates						
Par		nense Certain	Property Under Se	ction 179				
<u> </u>			complete Part V before		art I.			
1	Maximum amount (see in		-	<u> </u>			1	
2	Total cost of section 179 g	property placed in s	service (see instructions)			2	
3	Threshold cost of section	179 property befor	e reduction in limitation	(see instructions)		3	
4	Reduction in limitation. Su	btract line 3 from	line 2. If zero or less, er	iter -0-			4	
5	Dollar limitation for tax ye		from line 1. If zero or les	ss, enter -0 If m	narried fil	ıng		
	separately, see instruction		<u> </u>	1 4 > -			5	
6_	(a	Description of property	<u></u> -	(b) Cost (business	s use only)	(c) Elected co	<u>st</u>	
			 -					
7	Listed property Enter the	amount from line	20		7			-
8	Total elected cost of section			c) lines 6 and 7			8	-
9	Tentative deduction Enter		-	o), illies o alia /			9	
10	Carryover of disallowed de	eduction from line	13 of your 2011 Form 45	62			10	<u>-</u>
11					or line 5	(see instrs)	11	
12	12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11							
13					▶ 13			
	Do not use Part II or Part							
Par	t II Special Depred	iation Allowar	nce and Other Depr	eciation (Do n	ot include	e listed property) (See	instructions)
14	Special depreciation allow tax year (see instructions)	ance for qualified	property (other than liste	ed property) place	ed in serv	vice during the	14	
15	Property subject to section	n 168(f)(1) election	1				15	
16	Other depreciation (includ	ing ACRS)					16	233,204.
Par	t III MACRS Depre	ciation (Do not i	nclude listed property.) (See instructions.)			
			Section	n A				
17	MACRS deductions for as	sets placed in serv	vice in tax years beginnir	ng before 2012			17	
18	If you are electing to grou asset accounts, check her	p any assets place e	ed in service during the t	ax year into one	or more	general ►		
	Section B	- Assets Placed	in Service During 2012 T	ax Year Using th	e Genera	I Depreciation S	vstem	
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only — see instructions)	(d) Recovery period	(e) Convent	(f)		(g) Depreciation deduction
19 a	3-year property				<u> </u>			
	5-year property	1	-					
- c	7-year property	1				-		
d	10-year property	1						
	15-year property	1						-
f	20-year property	1				-		
g	25-year property	1		25 yrs		S/L	_	
h	Residential rental			27.5 yrs	MM			
	property			27.5 yrs	MM			
i	Nonresidential real			39 yrs	MM			-
	property				MM			
	Section C -	- Assets Placed in	Service During 2012 Ta	x Year Using the	Alternati			m
20 a	Class life			-		S/L		
b	12-year			12 yrs		S/L		
	40-year			40 yrs	MM			
Par	t IV Summary (See	nstructions)	·		<u>,</u>			
21	Listed property Enter amo						21	
22	Total Add amounts from line 12	lines 14 through 17. Iii	nes 19 and 20 m column (q), a	nd line 21 Enter here	and on	į.	$\neg \vdash$	
	the appropriate lines of you	ur return. Partners	ships and S corporations	- see instructio	ns		22	233,204.

23 For assets shown above and placed in service during the current year, enter

233,204.

Form 1128

Filed Under Rev. Proc. 85-58 Application To Adopt, Change, or Retain a Tax Year

(Rev January 2008) Department of the Treasury Internal Revenue Service

► See separate instructions.

OMB No. 1545-0134

Attachment Sequence No 148

ŀ	Part I General Information	
\neg	Important: All filers must complete Part I and sign below. See instructions Name of filer (if a joint return is filed, also enter spouse's name) (see instructions)	Filer's identifying number
		20-1024004
	Inland Development Corporation Number, street, and room or suite no (if a P O box, see instructions)	Service Center where income tax return will be filed
뒫	PO Box 757	Ogden, Utah
r Print	City or town, state, and ZIP code	Filer's area code and telephone number/Fax number
9	Heppner, OR 97836	(541) 571-8695 /(541) 676-9655
Ě	Name of applicant, if different than the filer (see instructions)	Applicant's identifying number (see instructions)
	Name of person to contact (if not the applicant or filer, attach a power of attorney)	Contact person's area code and telephone number/Fax number
	James Deason	(503) 502-3779 /(541) 676-9655
1	Check the appropriate box(es) to indicate the type of appli Individual Cooperative (sec. 1381(a)) Partnership Controlled foreign corporation (CFC) (sec Estate Foreign sales corporation (FSC) or Interes domestic international sales corporation (I S corporation Specified foreign corporation (SFC) (sec Personal service 10/50 corporation (sec. 904(d)(2)(E))	Passive foreign investment company (PFIC) (sec 1297) t-charge Other foreign corporation C-DISC) Tax-exempt organization
	corporation (PSC)	(Specify entity and applicable Code section)
3	 ☑ Change to a tax year ending ► December 31. ☐ Retain b If changing a tax year, indicate the date the present tax year end c If adopting or changing a tax year, the first return or short period beginning ► July 1 , 20 12 , and ending ► B Is the applicant's present tax year, as stated on line 2b above, als If "No," attach an explanation. Indicate the applicant's present overall method of accounting. ☐ Cash receipts and disbursements method ☑ Accrual method Other method (specify) ► 	return will be filed for the tax year December 31 , 20 12 o its current financial reporting year? ▶ ✓ Yes □ No hod f income.
	Signature—All Filers (See Who Mus	t Sign in the instructions.)
	der penalties of perjury, I declare that I have examined this application, including acc d belief, it is true, correct, and complete. Declaration of preparer (other than filer) is t	ompanying schedules and statements, and to the best of my knowledge
	Filer*	Preparer (other than filer) 5/3/(2013)
	Signature and date	Signature of individual preparing the application and date
ij	Perry Healy, President Lo Name and title (print or type)	nnie Read, CPA Name of individual preparing the application
	the application is filed on behalf of a controlled foreign corporation or a //50 corporation by a controlling domestic shareholder, see instructions	ad & Bose, PC Name of firm preparing the application

Page	4

Pa	at II Automatic Approval Request (see instructions)	
	dentify the revenue procedure under which this automatic approval request is filed ▶	
Sec	ction A—Corporations (Other Than S Corporations or Personal Service Corporations) (Rev. Proc. 2006-45, o	r its
_	successor)	T T
1	Is the applicant a corporation (including a homeowners association (section 528)) that is requesting a change in	Yes No
	tax year and is not precluded from using the automatic approval rules under section 4 of Rev. Proc. 2006-45	
	(or its successor)? (see instructions)	
2	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period?	
3	If "Yes" and the corporation is electing to change to a permitted tax year, file Form 1128 as an attachment to Form 2553. Is the applicant a corporation requesting a concurrent change for a CFC, FSC or IC-DISC? (see instructions)	,
	etion B—Partnerships, S Corporations, Personal Service Corporations (PSCs), and Trusts (Rev. Proc.	
-	2006-46, or its successor)	
	Is the applicant a partnership, S corporation, PSC, or trust that is requesting a tax year and is not precluded from	<u>'</u>
4	using the automatic approval rules under section 4 of Rev. Proc. 2006-46 (or its successor)? (see instructions) . >	
5	Is the partnership, S corporation, PSC, or trust requesting to change to its required tax year or a partnership, S corporation, or PSC that wants to change to a 52-53 week tax year ending with reference to such tax year? ▶	
6	Is the partnership, S corporation, or PSC (other than a member of a tiered structure) requesting a tax year that coincides with its natural business year described in section 4.01(2) of Rev. Proc. 2006-46 (or its successor)? Attach a statement showing gross receipts for the most recent 47 months. (See instructions for information	
	required to be submitted)	
7	Is the S corporation requesting an ownership tax year? (see instructions)	
8 	Is the applicant a partnership requesting a concurrent change pursuant to section 6.09 of Rev. Proc. 2006-45 (or its successor) or section 5.04(8) of Rev. Proc. 2002-39 (or its successor)? (see instructions)	
Sec	ction C—Individuals (Rev. Proc. 2003-62, or its successor) (see instructions)	
9	Is the applicant an individual requesting a change from a fiscal year to a calendar year?	
	etion D—Tax-Exempt Organizations (Rev. Proc. 76-10 or 85-58) (see instructions)	
	Is the applicant a tax-exempt organization requesting a change?	1.
Pa	Ruling Request (All applicants requesting a ruling must complete Section A and any other se	ection that
	applies to the entity. See instructions.) (Rev. Proc. 2002-39, or its successor)	Van Na
		Yes No
1	Is the applicant a partnership, S corporation, personal service corporation, or trust that is under examination by	
	the IRS, before an appeals office, or a Federal court?	
^		
2	Has the applicant changed its annual accounting period at any time within the most recent 48-month period ending with the last month of the requested tax year?	
	If "Yes" and a letter ruling was issued granting approval to make the change, attach a copy of the letter ruling, or if not available, an explanation including the date approval was granted. If a letter ruling was not issued, indicate when and explain how the change was implemented.	
3	Within the most recent 48-month period, has any accounting period application been withdrawn, not perfected, denied, or not implemented?	
4a	Is the applicant requesting to establish a business purpose under section 5.02(1) of Rev. Proc. 2002-39 (or its successor)?	
	If "Yes," attach an explanation of the legal basis supporting the requested tax year (see instructions).	
b	If your business purpose is based on one of the natural business year tests under section 5.03, check the applicable box.	
	☐ Annual business cycle test ☐ Seasonal business test ☐ 25-percent gross receipts test	,
	Attach a statement showing gross receipts from sales and services (and inventory cost if applicable) for the test period. (see instructions)	
5	Enter the taxable income or (loss) for the 3 tax years immediately preceding the year of change and for the short period. If necessary, estimate the amount for the short period.	
	Short period \$ First preceding year \$	
	Second preceding year \$	
	Note: Individuals, enter adjusted gross income. Partnerships and S corporations, enter ordinary income. Section	

Page	1

6	Corporations only, enter the losses or credits, if any, that were generated or that expired in the short period: Generated Expiring	Yes No				
	• Net operating loss \$ \$					
	Capital loss					
•	Unused credits \$ \$					
7	Enter the amount of deferral, if any, resulting from the change (see section 5.05(1), (2), (3) and 6.01(7) of Rev. Proc. 2002-39, or its successor)					
8a						
oa	If "Yes," attach a statement for each CFC providing the name, address, identifying number, tax year, the					
	percentage of total combined voting power of the applicant, and the amount of income included in the gross income of the applicant under section 951 for the 3 tax years immediately before the short period and for the short period.					
b	b Will each CFC concurrently change its tax year?					
Q ₂	Is the applicant a U.S. shareholder in a PFIC as defined in section 1297?					
	If "Yes," attach a statement providing the name, address, identifying number, and tax year of the PFIC, the percentage of interest owned by the applicant, and the amount of distributions or ordinary earnings and net capital gain from the PFIC included in the income of the applicant. Did the applicant elect under section 1295 to treat the PFIC as a qualified electing fund?					
10a	Is the applicant a member of a partnership, a beneficiary of a trust or estate, a shareholder of an S corporation, a shareholder of an IC-DISC, or a shareholder of an FSC?					
	If "Yes," attach a statement providing the name, address, identifying number, type of entity (partnership, trust,					
	estate, S corporation, IC-DISC, or FSC), tax year, percentage of interest in capital and profits, or percentage of					
	interest of each IC-DISC or FSC and the amount of income received from each entity for the first preceding year and for the short period. Indicate the percentage of gross income of the applicant represented by each amount.					
	Will any partnership concurrently change its tax year to conform with the tax year requested?					
11	Does the applicant or any related entity currently have any accounting method, tax year, ruling, or technical					
	advice request pending with the IRS National Office?					
	If "Yes," attach a statement explaining the type of request (method, tax year, etc.) and the specific issues involved in each request.					
12	Is Form 2848, Power of Attorney and Declaration of Representative, attached to this application?					
13	Does the applicant request a conference of right (in person or by telephone) with the IRS National Office, if the IRS proposes to disapprove the application?					
14	Enter amount of user fee attached to this application (see instructions)					
Sect	tion B—Corporations (other than S corporations and controlled foreign corporations) (see instructions)					
15	Enter the date of incorporation. ▶					
16a	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period?	Yes No				
b	If "Yes," will the corporation be going to a permitted S corporation tax year?					
17	Is the corporation a member of an affiliated group filing a consolidated return?					
	If "Yes," attach a statement providing (a) the name, address, identifying number used on the consolidated return,					
	tax year, and Service Center where the applicant files the return; (b) the name, address, and identifying number					
	of each member of the affiliated group; (c) the taxable income (loss) of each member for the 3 years immediately before the short period and for the short period; and (d) the name of the parent corporation.					
18a	Personal service corporations (PSCs): Attach a statement providing each shareholder's name, type of entity					
	(individual, partnership, corporation, etc.), address, identifying number, tax year, percentage of ownership, and					
	amount of income received from the PSC for the first preceding year and the short period.					
b	If the PSC is using a tax year other than the required tax year, indicate how it obtained its tax year. Grandfathered (attach copy of letter ruling) Letter ruling (date of letter ruling) (attach copy))					

Page	4
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Sec	tion C—S Corporations (see instructions)		
19	Enter the date of the S corporation election. ▶	Yes	No
20	Is any shareholder applying for a corresponding change in tax year?		
21	If the corporation is using a tax year other than the required tax year, indicate how it obtained its tax year. Grandfathered (attach copy of letter ruling) Letter ruling (date of letter ruling) (attach copy))		
22	Attach a statement providing each shareholder's name, type of shareholder (individual, estate, qualified subchapter S Trust, electing small business trust, other trust, or exempt organization), address, identifying number, tax year, percentage of ownership, and the amount of income each shareholder received from the S corporation for the first preceding year and for the short period.		
Sec	tion D—Partnerships (see instructions)		
23	Enter the date the partnership's business began. ▶	Yes	No
24	Is any partner applying for a corresponding change in tax year?		
25	Attach a statement providing each partner's name, type of partner (individual, partnership, estate, trust, corporation, S corporation, IC-DISC, etc.), address, identifying number, tax year, and the percentage of interest in capital and profits.		
26	Is any partner a shareholder of a PSC as defined in Regulations section 1.441-3(c)?		
27	If the partnership is using a tax year other than the required tax year, indicate how it obtained its tax year. Grandfathered (attach copy of letter ruling) Letter ruling (date of letter ruling (attach copy))		
Sec	tion E—Controlled Foreign Corporations (CFC)		
28	Attach a statement for each U.S. shareholder (as defined in section 951(b)) providing the name, address, identifying number, tax year, percentage of total value and percentage of total voting power, and the amount of income included in gross income under section 951 for the 3 tax years immediately before the short period and for the short period.		
Sec	tion FTax-Exempt Organizations		
29	Type of organization: ☐ Corporation ☐ Trust ☐ Other (specify) ▶	Yes	No
30	Date of organization. ►		
31	Code section under which the organization is exempt. ▶		
32	Is the organization required to file an annual return on Form 990, 1120-C, 990-PF, 990-T, 1120-H, or 1120-POL? ▶		
33	Enter the date the tax exemption was granted. ►		
34	If the organization is a private foundation, is the foundation terminating its status under section 507? >		
==	tion G—Estates		
35	Enter the date the estate was created. ▶		
	Attach a statement providing the name, identifying number, address, and tax year of each beneficiary and each is an interested party of any portion of the estate.		
b	Based on the adjusted total income of the estate entered in Part III, Section A, line 5, attach a statement s distribution deduction and the taxable amounts distributed to each beneficiary for the 2 tax years immediately short period and for the short period.		
Sec	tion H—Passive Foreign Investment Companies		
37	If the applicant is a passive foreign investment company, attach a statement providing each U.S. shareholder's name identifying number, and percentage of interest owned.	e, addr	ess,
	Fam. 1128	(Day 1	0000

(Rev January 2013)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of th Internal Revenue		► File a sepa	arate applic	cation for each return.			
If you are	e filing for an	Automatic 3-Month Extension, com	plete only	Part I and check this box.			<u>► X</u>
If you are	e filing for an	Additional (Not Automatic) 3-Month	n Extension	n, complete only Part II (on page 2 of the	s form))	
Do not com	olete Part II un	less you have already been granted	d an autom	atic 3-month extention on a previously fil	led For	m 8868	
request an ex Associated V	required to file stension of time Vith Certain P	Form 990-T), or an additional (not to file any of the forms listed in Part I	automatic) or Part II w ast be sent	d a 3-month automatic extension of time 3-month extension of time. You can elevath the exception of Form 8870, Information to the IRS in paper format (see instructional Charities & Nonprofits.)	ctronica Return	ally file For i for Transfe	m 8868 to rs
Part()	Automatic	3-Month Extension of Time.	Only sub	omit original (no copies needed).			
A corporatio	n required to 1	ile Form 990-T and requesting an a	utomatic 6	-month extension — check this box and c	complet	te Part I or	nly 🕨 📗
All other cor income tax i		luding 1120-C filers), partnerships, i	REMICs, ar	nd trusts must use Form 7004 to request			
	Nome of average	organization or other filer, see instructions		Enter filer's identif			n number (EIN) or
Tung or	Name of exempt	organization of other mer, see instructions			Ciripioy	er identification	, ribiniser (Emily er
Type or print	_ , , , _				20 1	004004	
		Development Corporation and room or suite number If a PO box, see in				.024004 ocial security n	umber (SSN)
File by the due date for						•	
filing your return See	PO Box 7	t office, state, and ZIP code. For a foreign addr	ess, see instru	ctions	<u> </u>		
instructions	'	-					
	[Heppner,	OR 97836					
Enter the Re	eturn code for	the return that this application is fo	r (file a sep	parate application for each return)			01
Application Is For			Return Code	Application Is For			Return Code
Form 990 or	Form 990-EZ		01	Form 990-T (corporation)			07
Form 990-Bl	_		02	Form 1041-A			08
Form 4720 (II	ndıvıdual)	-	03	Form 4720			09
Form 990-PI	=		04	Form 5227			10
Form 990-T	(section 401(a	i) or 408(a) trust)	05	Form 6069			11
Form 990-T	(trust other th	an above)	06	Form 8870			12
Telephor If the ore If this is check the exte	ganization doe for a Group R is box nsion is for st an automatic	-571-8695 s not have an office or place of bus eturn, enter the organization's four If it is for part of the group, c	FAX No siness in th digit Group heck this b	e United States, check this box Exemption Number (GEN) and attach a list with the nai		for the who	_ ,
The exp	tension is for calendar year tax year beg	the organization's return for 1 20 or 2 12 , 2 20 12 ed in line 1 is for less than 12 mont	, and endir		al retui	rn	
3 a If this nonref	application is undable credi	for Form 990-BL, 990-PF, 990-T, 47 is See instructions	20, or 6069	enter the tentative tax, less any	3 a	\$	0.
payme	ents made Inc	lude any prior year overpayment all	owed as a		3 b	\$	0.
c Baland	ce due. Subtra	ct line 3b from line 3a Include your ederal Tax Payment System) See	r payment v	with this form, if required, by using	3 с	\$	0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev 1-2013)