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Department of the Treasury Internal Revenue Service

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)

Open to Public

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

	ror tri	e 2012 Calendar year, or tax year beginning		and ending				
В	Check if applicab	C Name of organization			D Em	ıployer ıdentific	cation number	
	Addre	Worth County Development Auth	nority					
Ē	Name chang					91-2	198028	
	Initial		address)	Room/si	ute E Tel	ephone number		_
	Termi	•	,			•	390-0624	
	Amen	ded CALLAND COLOR STORE AND COLOR STORE CO		<u>'</u>	G Gros	ss receipts \$	5,365,	194.
	Application					s this a group re		
	pendi	F Name and address of principal officer Dan Reeder	<u> </u>			or affiliates?		X No
					H(b) A	re all affiliates inc		No
ī	Tax-ex	empt status 501(c)(3)X 501(c)(4) ◀ (insert no.) 4947((a)(1) or	1		list (see instruction	ons)
J	Websi	te:▶ Not available		,		Group exemption	•	•
ĸ	Form o	organization: X Corporation Trust Association	Other ►	LY	ear of forma	tion: 2003 N	State of legal domi	icile: IA
	art I	Summary						
a	1	Briefly describe the organization's mission or most significant ad	ctivities: To	provi	de for	and adu	minister	
Activities & Governance		the community portion of gaming	reveni	le for	the de	velopme	nt of Wor	th
r	2	Check this box If the organization discontinued its op	erations or	disposed of m	ore than 2	5% of its net as	sets	
ŏ.	3	Number of voting members of the governing body (Part VI, line	1a)			3		8
g S	4	Number of independent voting members of the governing body	(Part VI, line	e 1b)		4		8
es	5	Total number of individuals employed in calendar year 2012 (Pa	rt V, line 2a)	ı		5		0
Ϋ́	6	Total number of volunteers (estimate if necessary)				6		0
\cti	7 a	Total unrelated business revenue from Part VIII, column (C), line	12			7a		0.
_		Net unrelated business taxable income from Form 990-T, line 34	ļ			7b		0.
	i				Pric	or Year	Current Yea	ar
Revenue	8	Contributions and grants (Part VIII, line 1h)		ļ	4,9	98,450.	<u>5,247,</u>	<u>639.</u>
	9	Program service revenue (Part VIII, line 2g)			0.		0.	
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)			1	00,313.	117,	<u>555.</u>
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and	l 11e)	ļ		0.0		0.
_	12	Total revenue - add lines 8 through 11 (must equal Part VIII, colu	ımn (A), lıne	12)		98,763.	5,365,	
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		Γ]	1 4:52	28,509	3,486,	<u>538.</u>
	14	Benefits paid to or for members (Part IX, column (A), line 4)		150		10 EEB 7		<u> </u>
es	15	Salaries, other compensation, employee benefits (Part IX, column	ın (A), lınes t		<u> 11 5013</u>	62,1961	<u>\ 163,</u>	
ens	16a	Professional fundraising fees (Part IX, column (A), line 11e)		955 - - -		3038.		<u> </u>
Expenses	b	Total fundraising expenses (Part IX, column (D), line 25)		<u></u>	CEN	11110		3.1.4
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		\	(121)	75,059.	115,	
		Total expenses. Add lines 13-17 (must equal Part IX, column (A)	, line 25)	١		65,764.	3,764,	
	19	Revenue less expenses Subtract line 18 from line 12				32,999.	1,600,	
Net Assets or Fund Balances				-		C 4 O O T	End of Yea	
SSE	20	Total assets (Part X, line 16)		-	6,1	64,087.	7,764,	
et/	21	Total liabilities (Part X, line 26)		-	<u> </u>	0.	7.764	<u>0.</u>
	art II	Net assets or fund balances Subtract line 21 from line 20 Signature Block			6,1	64,087.	7,764,	<u> 395.</u>
_				nadulas and star	lamanta nad	l to the best of	Landada and bal	-4
		ulties of perjury, I declare that I have examined this return, including acco				-	knowledge and bell	iei, it is
liue	, correc	ct, and complete. Declaration of preparer (other than officer) is based on	an intormation	TOT WINCH Prepa	arer mas amy	Kilowledge.	2012	
c:_	_	Signature of officer				Date	3015	
Sig		Dan Reeder, President				- 4.10		
He	ı e	Type or print name and title						
		Print/Type preparer's name Preparer's sig	Atrico)		Date	Check	PTIN	
Pai	d	John N. Sherrick		Kept	1.30-1	_ ا حجا		3 0
	parer		LC		, 50	self-employed	42-11926	
	Only	Firm's address 2543 Tech Drive	<u>، بار</u>			LIHIH 2 ENA	44 TIJ40	<u>41</u>
	,	Bettendorf, IA 52722				Phone no. 56	332-82	ΩΩ
Ma	v the II	RS discuss this return with the preparer shown above? (see insti	nictions)			Tritone no. 3 (X Yes	
	001 12-			ructions		·	Form 990	No No
_020	· · L-						. 01111 000	- (2012)

	oncomist of required obligations			,
	In the average transfer described a contract 504(a)(0) a 4047(a)(4) (a)(a) (b)		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
_	If "Yes," complete Schedule A	_1_	-	X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	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		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, 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		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X	,3		
	as applicable	<u> </u>	× .	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			l
	Part VI	11a	X	<u> </u>
þ	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
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		X
a	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	44.1		- T
_	Part X, line 16? If "Yes," complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e		^
•	the organization's separate or consolidated limitation statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		_X_
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	~	_X_
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
46	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u>X</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			77
10	1c and 8a? If "Yes," complete Schedule G, Part II	18_		<u>X</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	40		v
202	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19 20a		X
	If "Yes" to line 20a, did the organization attach a conv of its audited financial statements to this return?	20a		27

232003 12-10-12

Form 990 (2012)

Worth County Development Authority 91-2198028 Form 990 (2012) Page 4 Part IV Checklist of Required Schedules (continued) Yes No 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 X 21 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, 22 column (A), line 2? If "Yes," complete Schedule I, Parts I and III Х 22 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 Х 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 2<u>4a</u> b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I X 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete X Schedule L. Part I 25b Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified 26 person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II X 26 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 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b 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 28c 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Х 30 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. Part I X 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N. Part II Х 32 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 X 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V. line 1 X 34 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b 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 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?

> X Form **990** (2012)

X

36

37

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

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197

If "Yes," complete Schedule R. Part V. line 2

Note. All Form 990 filers are required to complete Schedule O

1	St	atements Regarding	Other IRS	Filings and T	ax Compliance

•	Check if Schedule O contains a response to any question in this Part V				
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a 0			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	portable gaming			
	(gambling) winnings to prize winners?		1c		
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			3×	c.
	filed for the calendar year ending with or within the year covered by this return	2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	~ .	*	*
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	uthority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccount)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶				
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial A	ccounts		l	} _
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	ction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	•	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th	e organization solicit			
	any contributions that were not tax deductible as charitable contributions?		6a		_X_
b	If "Yes," did the organization include with every solicitation an express statement that such contribute	ons or gifts		İ	
	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).			Ser ca	<u> </u>
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices provided to the payor?	7a		<u>X</u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	is required			
	to file Form 8282?	ı	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	Ž	_	-
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co		7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra		_7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	-	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiza		7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did				ŽŽ.
_	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at a	iny time during the year?	8		i q
9	Sponsoring organizations maintaining donor advised funds.			•	
a	Did the organization make any taxable distributions under section 4966?		9a		
- b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:	40.	* / `		ė.
a b	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10a 10b	ઇ *.		ž.
11	Section 501(c)(12) organizations. Enter.	100			~
''	Gross income from members or shareholders	11a	ŀ		
	Gross income from other sources (Do not net amounts due or paid to other sources against	IId	Ì		
	amounts due or received from them)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a	Ì	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	120			
	Is the organization licensed to issue qualified health plans in more than one state?		13a		*
_	Note. See the instructions for additional information the organization must report on Schedule O				
b	Enter the amount of reserves the organization is required to maintain by the states in which the		-	ł	
_	organization is licensed to issue qualified health plans	13b			
С	Enter the amount of reserves on hand	13c		İ	
	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule	0	14b		
				990 (20121

Form 990 (2012) Worth County Development Authority 91-2198028 Page
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response 91-2198028 Page 6

•	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.						
	Check if Schedule O contains a response to any question in this Part VI			\mathbf{X}			
Sec	tion 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	8					
	If there are material differences in voting rights among members of the governing body, or if the governing	7					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		ş				
b		8 .		, ,			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	٦,					
_	officer, director, trustee, or key employee?	2		X.			
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision		 				
3	of officers, directors, or trustees, or key employees to a management company or other person?			v			
		3		X			
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	5		X			
5	, , , , , , , , , , , , , , , , , , ,						
6	Did the organization have members or stockholders?	6		Х			
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or						
	more members of the governing body?	7a		X			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or						
	persons other than the governing body?	7b		X			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:						
а	The governing body?	8a	X				
b	Each committee with authority to act on behalf of the governing body?	8b	X				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the						
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X			
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)						
			Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?	10a		<u>x</u>			
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					
11a							
b							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	-	. £ .5 X			
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b					
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120					
_	in Schedule O how this was done	12c					
13	Did the organization have a written whistleblower policy?	13		X			
14	Did the organization have a written document retention and destruction policy?	14		X			
15	Did the process for determining compensation of the following persons include a review and approval by independent	14	- ; -				
.5			*,				
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	`	_ ~	7.7			
a	The organization's CEO, Executive Director, or top management official	15a		<u>X</u>			
b	Other officers or key employees of the organization	15b		<u>X</u> _			
40	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		[]	ı			
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		<u> </u>			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation		.				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's						
	exempt status with respect to such arrangements?	16b					
<u>Sec</u>	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed ► None						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990 T (Section 501(c)(3)s only)	avaılab	le				
	for public inspection. Indicate how you made these available. Check all that apply.						
	Own website Another's website X Upon request Other (explain in Schedule O)						
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, ar	nd finar	icial				
	statements available to the public during the tax year						
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	ition 🕨	•				
	Organization's office - 641-390-0624						
	91 8th Street North, Northwood, IA 50459						
23200		<u> </u>	990	0040			

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A) Name and Title	(B) Average	(C) Position (do not check more than one					one	(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	box offi	box, unless person is both an officer and a director/trustee)			is bot	h an	compensation from	compensation from related	amount of other
		Institutional trustee	Officer	Key emptoyee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
(1) Dan Reeder	0.00	1		l				_	_	
resident		X		Х	_	L		0.	0.	
(2) Gary Christiansen	0.00	ļ							_	_
Secretary		X		X	L	<u> </u>		0.	0.	C
(3) Joyce Russell	0.00	l								_
Vice President		X		X	_	_		0.	0.	(
(4) Ken Abrams	0.00	١.,	ł	٠,,						_
reasurer	0.00	X		X		-		0.	0.	
(5) Dean Hendrikson	0.00	1		x		}		0.	0.	
Officer	0.00	╁─	-	^				0.		(
(6) Roger Gentz Officer	0.00	1		x				0.	0.	C
7) Kim Koenigs	40.00	├	-		-	-		0.	- 0 •	
Executive Director	40.00	1			x	х		77,904.	0.	C
			-							•
		_								
		_								
		<u> </u>	<u> </u>			-				···
	ī	1	ı	I	ľ	1		1		

232007 12-10-12

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization Form 990 (2012)

	<u>າ 990 (</u>	2012) Worth	County	Developm	ent Author	ity	91-2198	028 Page 9
Pa	rt VII	Statement of Rever	nue					
		Check if Schedule O cont	ains a response	to any question	in this Part VIII			
*				A	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ue and Other Similar Amounts	b d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribut All other contributions, gifts, gran similar amounts not included abo Noncash contributions included in lines Total. Add lines 1a-1f	ts, and ve 1f 5,	247,639. Business Code	5,247,639.		10 mm 1 mm 1 mm 1 mm 1 mm 1 mm 1 mm 1 m	313, 01 314
Revenue	c d e f	All other program service reve		•			* * * * * * * * * * * * * * * * * * *	
Other Revenue	3 4 5 6 a b	Investment income (including other similar amounts) Income from investment of tax Royalties Gross rents Less rental expenses		>	117,555.	117,555.	5' - 2	
	7 a b c	Rental income or (loss) Net rental income or (loss) Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss)	(i) Securities	(II) Other			The second of th	
	8 a b c	Gross income from fundraising including \$	of 1c). See a b Iraising events	>			*	
	c 10 a b	Less direct expenses Net income or (loss) from gam Gross sales of inventory, less and allowances Less cost of goods sold Net income or (loss) from sale	>					
		All other revenue Total. Add lines 11a-11d		Business Code	F 265 104	117 555		
	12	Total revenue. See instructions.			<u>5,365,194.</u>	117,555.	0.	0.

0 . Form **990** (2012)

Sect	on 501(c)(3) and 501(c)(4) organizations must com			omplete column (A)	
	Check if Schedule O contains a respon		is Part IX	(0)	<u></u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				Y sangery
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in			4 > 4	* * {
	the United States See Part IV, line 22	3,486,538.	<u>3,486,538.</u>	< v 3	,
3	Grants and other assistance to governments,			~ * * · ·	,
	organizations, and individuals outside the			*	
	United States See Part IV, lines 15 and 16			, y	<u> </u>
4	Benefits paid to or for members			; ; ,	. 1.4 %
5	Compensation of current officers, directors,				
	trustees, and key employees		.,		
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				· -·
7	Other salaries and wages	163,069.		163,069.	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits .				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal	49,075.		49,075.	
С	Accounting	5,113.		5,113.	
d	, ,		X Y V X	-	
е	Professional fundraising services. See Part IV, line 17			1 第 4 2 、	
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion	17,876.		17,876.	•
13	Office expenses	9,337.		9,337.	
14	Information technology				
15	Royalties	0 681		0 684	
16	Occupancy	2,671.		2,671.	
17	Travel	7,604.		7,604.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	11 222		11 202	
22	Depreciation, depletion, and amortization	11,323.		11,323.	
23	Insurance	3,380.		3,380.	
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 0.)		, * •		2
а	Telephone_	4,925.		4,925.	
	Meals & Entertainment	1,516.		1,516.	
c	D	1,053.		1,053.	
d		628.		628.	
	All other expenses	778.		778.	
25	Total functional expenses. Add lines 1 through 24e	3,764,886.	3,486,538.	278,348.	0.
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)				

rar	τx_	Balance Sheet				
•		Check if Schedule O contains a response to any question in t	his Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1.	1	
	2	Savings and temporary cash investments	6,033,482.	2	7,642,514	
	3	Pledges and grants receivable, net		3		
	4	Accounts receivable, net		4		
	5	Loans and other receivables from current and former officers,	directors			3
		trustees, key employees, and highest compensated employee	· ·	. *** . *	, *~	· w
ļ		Part II of Schedule L	oo oompioto		5	
ŀ	6	Loans and other receivables from other disqualified persons (as defined under	* *	<u> </u>	*****
		section 4958(f)(1)), persons described in section 4958(c)(3)(B)	**, ' s			
-		employers and sponsoring organizations of section 501(c)(9)	° ≪		* * * *	
		employees' beneficiary organizations (see instr) Complete Pa				**
:	_	Notes and loans receivable, net	It II OI SCII L		6	
	7	•			7	
	8	Inventories for sale or use		8		
	9	Prepaid expenses and deferred charges			9	
ļ	10a	Land, buildings, and equipment cost or other	100 506			* * * * * * * * * * * * * * * * * * *
		basis. Complete Part VI of Schedule D	180,586.			101 001
		Less: accumulated depreciation [10b]	58,705.	130,604.	10c	121,881
	11	Investments - publicly traded securities		11		
	12	Investments - other securities. See Part IV, line 11			12	
	13	Investments - program-related. See Part IV, line 11		13		
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)		6,164,087.	_16	7,764,395
	17	Accounts payable and accrued expenses			17	
ı	18	Grants payable		18		
	19	Deferred revenue		19		
	20	Tax-exempt bond liabilities			20	
:	21	Escrow or custodial account liability Complete Part IV of Sch	edule D		21	
	22	Loans and other payables to current and former officers, direct	ctors, trustees,	7 45 99 5	100° 34	· *
		key employees, highest compensated employees, and disqua	lified persons.		202	4 4
'		Complete Part II of Schedule L		_	22	
	23	Secured mortgages and notes payable to unrelated third part	ies		23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to relate	ed third			
		parties, and other liabilities not included on lines 17-24) Comp	olete Part X of			
		Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		0.	26	C
		Organizations that follow SFAS 117 (ASC 958), check here	and	* * * ;		,
		complete lines 27 through 29, and lines 33 and 34.				. A
	27	Unrestricted net assets			27	
	28	Temporanly restricted net assets			28	
	29	Permanently restricted net assets			29	
		Organizations that do not follow SFAS 117 (ASC 958), che	ck here 🕨 🗓			
		and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		0.	30	(
	31	Paid in or capital surplus, or land, building, or equipment fund		0.	31	(
	32	Retained earnings, endowment, accumulated income, or other		6,164,087.	32	7,764,395
. 1	33	Total net assets or fund balances		6,164,087.	33	7,764,395
-	- J.J					

Form **990** (2012)

Form	990 (2012) Worth County Development Authority	91-	2198028	Page 12
Pa	rt 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	<u>5</u> ,365	,194.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,764	,886.
3	Revenue less expenses Subtract line 2 from line 1	3	1,600	,308.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	6,164	,087.
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	7,764	,395.
Pa	rt XII Financial Statements and Reporting			
	Check if Schedule O contains a response to any question in this Part XII			
				es No
1	Accounting method used to prepare the Form 990. X Cash Accrual Other		\$	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.	ئاڭ ا	water 5
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X_
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a	3.,	1
	separate basis, consolidated basis, or both		, ,	
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?		2b	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basıs,		2 1
	consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis		, , , , , , , , , , , , , , , , , , ,	. [} `[
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,	22	المدمد
	review, or compilation of its financial statements and selection of an independent accountant?		2c	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.	. * *	*
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sil	ngle Auc	dit i i i i	1 1
	Act and OMB Circular A-133?		3a	<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red aud	lit	
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	
			Form 9	90 (2012)

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SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ 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. 2012
Open to Public Inspection

Name of the organization

Worth County Development Authority

Employer identification number

D-	worth County Devel		91-2198028
Pa			or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	r'	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		-
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advise	ed funds
	are the organization's property, subject to the organization's	•	Yes No
6	Did the organization inform all grantees, donors, and donor a	· · · · · · · · · · · · · · · · · · ·	
	for charitable purposes and not for the benefit of the donor of	· •	•
	impermissible private benefit?	or deriver devices, et les disy ether purpose e	Yes No
Pai	t'll Conservation Easements. Complete if the org	nanization answered "Yes" to Form 990. Pa	
1	Purpose(s) of conservation easements held by the organization		21(1), 1110 7.
•	Preservation of land for public use (e.g., recreation or e	——————————————————————————————————————	orically important land area
	Protection of natural habitat	Preservation of a certif	·
		Freservation of a certif	ned Historic structure
_	Preservation of open space	6 and a second s	4
2	Complete lines 2a through 2d if the organization held a qualif	ned conservation contribution in the form of	or a conservation easement on the last
	day of the tax year		
	Tabel and have of a second and a second a		Held at the End of the Tax Year
a	Total number of conservation easements		2a
þ	Total acreage restricted by conservation easements		_2b
C	Number of conservation easements on a certified historic str	, ,	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structui	
_	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the	organization during the tax
	year -		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the per	- '	
_	violations, and enforcement of the conservation easements if		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	-	
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h	
_	and section 170(h)(4)(B)(ii)?		└ Yes
9	In Part XIII, describe how the organization reports conservati		
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes the	he organization's accounting for
Do	conservation easements rt III Organizations Maintaining Collections o	f Art Historical Traceures or Ot	hay Cimilay Assats
Га		-	ner Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (AS		
	historical treasures, or other similar assets held for public exh		ce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri		
þ	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of pub	lic service, provide the following amounts
	relating to these items		
	(i) Revenues included in Form 990, Part VIII, line 1		\$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical tre		gaın, provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items	
a	Revenues included in Form 990, Part VIII, line 1		\$
b	Assets included in Form 990, Part X		> \$

Schedule D (Form 990) 2012

		ounty Deve					91-21	98028	Page 2
Pa	rt III. Organizations Maintaining C	ollections of A	rt, Historic	al Tre	asures, or Oth	ner Simi	lar Asse	ts(continu	red)
3 '	Using the organization's acquisition, accession	on, and other record	ds, check any	of the fo	ollowing that are a	significant	use of its	collection	items
	(check all that apply).								
а	Public exhibition	C	i 🔲 Loan	or exch	ange programs				
þ	Scholarly research	6	Othe						
c	Preservation for future generations				· · · · · ·				
4	Provide a description of the organization's co	ellections and explain	n how they fu	rther the	e organization's ex	empt purp	ose in Par	t XIII	
5	During the year, did the organization solicit or								
	to be sold to raise funds rather than to be ma	untained as part of	the organizati	on's coll	ection?			Yes	☐ No
Pai	t IV Escrow and Custodial Arrang					o Form 99	0, Part IV,	line 9, or	
	reported an amount on Form 990, Par								
1a	Is the organization an agent, trustee, custodia	an or other intermed	diary for contr	butions	or other assets no	t included			
	on Form 990, Part X?		•					Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII a	and complete the fo	ollowing table.						
		·	Ū			<u> </u>		Amount	
С	Beginning balance					1c			
	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amount on Fo	orm 990. Part X. line	21?				<u> </u>	Yes	☐ No
	If "Yes," explain the arrangement in Part XIII.			been p	rovided in Part XII	l			
	t V. Endowment Funds. Complete if						•		
		(a) Current year	(b) Prior y		(c) Two years back		years back	(e) Four y	ears back
1a	Beginning of year balance				(-)	1,47	J + 11 + 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 +	(6) + 64: 7	<u> </u>
b	Contributions	_				-			
c	Net investment earnings, gains, and losses								
ď	Grants or scholarships								
	Other expenditures for facilities								
_	and programs								
f	Administrative expenses					-			
g	End of year balance						·		
2	Provide the estimated percentage of the curre	ent vear end balanc	e (line 1a. col	umn (a))	held as	1			
а	Board designated or quasi-endowment	,	%	- (-7)					
b	Permanent endowment	%	_						
	Temporarily restricted endowment ▶	%							
	The percentages in lines 2a, 2b, and 2c should	ld equal 100%.							
За	Are there endowment funds not in the posses	ssion of the organiz	ation that are	held and	d administered for	the organi	zation		
	by.	_				Ū		Y	es No
	(i) unrelated organizations							3a(i)	
	(ii) related organizations							3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations	listed as required of	n Schedule R	?				3b	
4	Describe in Part XIII the intended uses of the	organization's endo	wment funds					•	
Par	t VI Land, Buildings, and Equipme	ent. See Form 990), Part X, line	0		. <u> </u>			
	Description of property	(a) Cost or o) Cost o	r other (c) A	Accumulat	ed	(d) Book v	/alue
		basis (investr	nent)	basis (o	ther) de	epreciation	1		
1a	Land	6,	000.					6	,000.
b	Buildings	131,	661.			27,8	67.		,794.
С	Leasehold improvements	42,	925.			30,8			,087.
d	Equipment								
е	Other								
Total	. Add lines 1a through 1e (Column (d) must ed	qual Form 990, Part	X, column (B)	line 10	(c))		ightharpoons	121	,881.

Schedule D (Form 990) 2012

Schedule D (Form 990) 2012 Worth Count	y Developm	ent Authority	91-21	98028 Page
Part VII Investments - Other Securities. Se	ee Form 990, Part X,	line 12		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of va	aluation Cost or end-of-ye	ear market value
(1) Financial derivatives				
(2) Closely-held equity interests				4
(3) Other				
(A)		- 	 -	
(B)	-			
(C)		-	· -	
(D)				
<u>(E)</u>	-			
(F)				-
(G)				
(H)				
(I)				
Total (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		F 4 " \	* ***	
Part VIII Investments - Program Related. S	ee Form 990, Part X,			
(a) Description of investment type	(b) Book value	(c) Method of va	aluation Cost or end-of-ye	ear market value
(1)				
(2)				
(3)				
(4)				
(5)	" -			
(6)			 	
(7)				
(8)				
(9)	-			
(10)		** ** ** ***		<u> </u>
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part IX Other Assets. See Form 990, Part X, line	15		<u> </u>	<u> </u>
Control of the contro			- T	# > D1 -1 -1 -
	Description			(b) Book value
(1)	· · · · · · · · · · · · · · · · · · ·			
(2)				
(3)		·		
(4)				
(5)				
(6)				
(7)				
(8)		···		
(9)				
(10)		- ••• 		
Total. (Column (b) must equal Form 990, Part X, col (B) lin	e 15 l	- <u></u>		
Part X Other Liabilities. See Form 990, Part X,			•	
4 (a) Description of liability	1110 25	(b) Book value	,	
· · · · · · · · · · · · · · · · · · ·		(b) Book Value	J	
(1) Federal income taxes				
(2)			<i>'</i>	
(3)				*
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)	1.			
(11)				
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	e 25)			
2. FIN 48 (ASC 740) Footnote In Part XIII, provide the tex		the organization's financial	statements that	ho organization!-
				ne organization's
liability for uncertain tax positions under FIN 48 (ASC 7	140) Check here if th	ie text of the foothole has t		
232053			Schedule	D (Form 990) 2012
12-10-12				

	dule D.(Form 990) 2012 Worth County Development A			2198028 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Statem	ents With Reve	enue per Return	
1	Total revenue, gains, and other support per audited financial statements		1	<u>5,365,194.</u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	5,365,194.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		3	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	*	
b	Other (Describe in Part XIII)	4b		
С	Add lines 4a and 4b		4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	5,365,194.
	t XII. Reconciliation of Expenses per Audited Financial Stater	nents With Exp	enses per Retu	
1	Total expenses and losses per audited financial statements		1	3,764,886.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		, ,	
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
G	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1	•	3	3,764,886.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			377017000.
٠ •	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b	70.1	4c	0.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	3,764,886.
	t XIII Supplemental Information			3,702,000.
	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part e 2; Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to			
			Sched	ule D (Form 990) 2012

Complete if the continuous and understand the continuous and the continuous and understand the continuous and understand the continuous continuous and understand the continuous	SCHEDULE I (Form 990)			Grants and	d Other Assistanc	Grants and Other Assistance to Organizations,	S,		OMB No 1545-0047
Morth County Devel Oppment Authority Worth County Devel Oppment Office Seaton Worth County Devel Office Seaton Worth County Devel Office Seaton Worth County Devel Office Seaton Worth County Office Seaton			i de	dovernment.	is, and individuals	in the Chile Sta	tes 1 IV line 24 er 22		1 7 7
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tal number of section 501(c)(3) and government organizations listed in the line 1 table									
tal number of other organizations listed in the line 1 table	tal number	r of section 501(c)(3) and	government org	anizations listed in th	ne line 1 table				
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Schedule I (Form 990) (2012) (f) Description of non-cash assistance* Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information (e) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed. (d) Amount of non-cash assistance 0 o o 1,809,686, 123,204, 1,182,771 290,877 18 (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance Other special grants Worth County grants Trustee/WCDA grants Educational grants 232102 12-18-12 Part III Part IV

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91-2198028

Worth County Development Authority

Schedule I (Form 990) (2012)

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Name of the organization Employer identification number 91-2198028 Worth County Development Authority Form 990, Part I, Line 1, Description of Organization Mission: County, Iowa, in accordance with Iowa Code section 99F Form 990, Part VI, Section B, line 11: The governing body reviews the 990 prior to filing it. Form 990, Part VI, Section C, Line 19: Upon request