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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 2012

Open to Public

Department of the Treasury ▶ The organization may have to use a copy of this return to satisfy state reporting requirements. Inspection Internal Revenue Service For the 2012 calendar year, or tax year beginning July 1 2012, and ending **20** 13 June 30 D Employer identification number C Name of organization North Central Wisconsin Workforce Development Board Check if applicable. Address change Doing Business As 39-1453475 Number and street (or P.O box if mail is not delivered to street address) E Telephone number Name change initial return 715 204 1640 3118 Post Road City, town or post office, state, and ZIP code Terminated Amended return Stevens Point, WI 54481-6451 G Gross receipts \$ 4.580,430 Application pending F Name and address of principal officer: H(a) is this a group return for affiliates? Yes No Same as above H(b) Are all affiliates included? Yes No If "No," attach a list. (see instructions) Tax-exempt status 501(c)(3) 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527 Website: ▶ www nowwdb org H(c) Group exemption number ▶ Form of organization. Corporation Trust Association L Year of formation: M State of legal domicile: WΙ Part I Briefly describe the organization's mission or most significant activities: Mission To create the highest quality of life in our communities by focusing on solutions to workforce development issues Governance Significant Activities Administering Workforce Investment Act funds in the North Central Wisconsin Workforce Development Area Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 2 Number of voting members of the governing body (Part VI, line 1a) 3 31 **Activitles &** Number of independent voting members of the governing body (Part VI, line 1b) 4 4 25 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 12 6 Total number of volunteers (estimate if necessary) 6 31 Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 Net unrelated business taxable income from Form 990-T, line 34 Prior Year Current Vesi 8 Contributions and grants (Part VIII, line 1h). 4,421,929 4,549,861 9 Program service revenue (Part VIII, line 2g) 21,853 30,569 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . 0 0 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 0 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 4,443,782 4,580,430 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 1,277,102 1,141,961 14 Benefits paid to or for members (Part IX, column (A), line 4) . . 15 Salaries, other compensation, employee benefits (Part IX_column (A), lines 5-10) 556,306 683,259 Professional fundraising fees (Part IX, column (A), (Tine) 11e) 16a Total fundraising expenses (Part IX, columnit (D), line 25)b Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 17 2,549,930 2,742,579 Total expenses. Add lines 13-27 (must equal Partix Column A), line 25) 18 4,383,338 4,567,799 Revenue less expenses. Subtract line 18 from line 12 19 60,444 12,631 Beginning of Current Year End of Year Total assets (Part X, line 16) 20 460,856 21 Total liabilities (Part X, line 26) == 444,315 339,855 22 Net assets or fund balances. Subtract line 21 from line 20 108.370 121,001 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Signature of officer 2014 Here Rene R. Type of print name and title Daniels; Executive Director Print/Type preparer's name Preparer's signature **Paid** Check | If self-employed **Preparer** Firm's name Firm's EIN ▶ **Use Only** Firm's address Phone no. May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2012)

| Form 99 | 00 (2012) Page 2 |
|---------|--|
| Part | Statement of Program Service Accomplishments |
| | Check if Schedule O contains a response to any question in this Part III |
| 1 | Bnefly describe the organization's mission: |
| | To create the highest quality of life in our communities by focusing on solutions to workforce development issues |
| | |
| | |
| | |
| 2 | Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? |
| | prior Form 990 or 990-EZ? |
| 3 | Did the organization cease conducting, or make significant changes in how it conducts, any program |
| Ū | services? |
| | If "Yes," describe these changes on Schedule O. |
| 4 | Describe the organization's program service accomplishments for each of its three largest program services, as measured by |
| _ | expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, |
| | the total expenses, and revenue, if any, for each program service reported. |
| | |
| 4a | (Code:) (Expenses \$ |
| | Services include providing training and education funding and support to nearly 1,800 persons during the fiscal year which ended |
| | June 30, 2013 |
| | *************************************** |
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| 4b | (Code:) (Expenses \$14,051 including grants of \$) (Revenue \$17,369) |
| | Community Outreach The goals of this program are to educate business on proper observation of labor laws and assess workplace |
| | Skills |
| | |
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| 4c | (Code:) (Expenses \$ |
| | Job Fairs are held at various times of the year and at various places throughout our Workforce Development Area |
| | |
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| | 1 |
| | 1 |
| 4d | Other program services (Describe in Schedule O.) |
| | (Expenses \$ including grants of \$) (Revenue \$) |
| | Total program service expenses ► 4.176.122 |

| Part | IV Checklist of Required Schedules | | | |
|------------|---|-----------|--|--|
| | | | Yes | No |
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," | | 1 | 1 |
| | complete Schedule A | 1 | / | ↓_ |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? | 2 | 1 | ↓ |
| 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 | | 1 |
| 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 | - | 1 |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, | | | 广 |
| | assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III | 5 | | 1 |
| 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 | l | 1 |
| 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 | <u>L</u> | 1 |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III | 8 | | 1 |
| 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 | | 1 |
| 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 | L _ | 1 |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, | | | |
| | VII, VIII, IX, or X as applicable. | ļ | | |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI |] | | |
| h | Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more | 11a | - | ⊢- |
| J | of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | | 1 |
| С | Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 11c | | 1 |
| d | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets | 116 | | |
| | reported in Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | | 1 |
| | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | | 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. | 11f | V | _ |
| 12 a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete | | 1 | |
| | Schedule D, Parts XI and XII | 12a | _ | |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | | | 1 |
| 40 | • | 12b | | |
| 13 14 a | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States? | 13 14a | | 1 |
| b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, | 146 | | <u> </u> |
| | fundraising, business, investment, and program service activities outside the United States, or aggregate | 1 | [| |
| | foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV | 14b | | ✓ |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any | | | |
| | organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV | 15 | | ✓ |
| 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 | | ✓ |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) | 17 | | ✓ |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II. | 18 | | · · |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? | | -+ | - |
| | If "Yes," complete Schedule G, Part III | 19 | ľ | 1 |
| 20 a | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | $\neg \uparrow$ | |
| <u>b</u> | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | |
| - | | Form | 990 | (2012) |

Checklist of Required Schedules (continued)

| | | | Yes | No |
|----------|---|------------|-----|----------|
| 21 | Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 | | / |
| 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 | 1 | |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J | 23 | | 1 |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25 | 24a | | 1 |
| b c | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | 24b 24c | | 1 |
| d 25a | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 24d 25a | | √ |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I | 25b | | 1 |
| 26 | Was a loan to or by a current or former officer, director, trustee, key employee, 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 | | 1 |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III | 27 | | 1 |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): | | | |
| a b | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28a 28b | | √ |
| С | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV | 28c | 1 | |
| 29 30 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M | 29 30 | | √ ✓ |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I | 31 | · | <u>√</u> |
| 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 | | <u> </u> |
| 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 | - | ✓ |
| 34 | 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 | 34 | | <u> </u> |
| 35a b | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a 35b | | 1 |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 | 36 | | ✓ |
| 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 | | - |
| 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 | 1 | <u> </u> |

| Part | Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V | | | |
|--------|---|------------------|---------------|----------|
| | Officer if deficience of contains a response to any question in this rait v | _ · · | Yes | No |
| 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 3 | 5 | | |
| b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | 2 | | i |
| C | Did the organization comply with backup withholding rules for reportable payments to vendors and | | | |
| _ | reportable gaming (gambling) winnings to prize winners? | 1c | 1 | |
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax | | | |
| | Statements, filed for the calendar year ending with or within the year covered by this return [2a] [1] | | -,- | |
| Ь | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . | 2b | ✓ | |
| 3a | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year? | 20 | | 1 |
| b | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O | 3a 3b | | - |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority | 130 | | |
| -,- | over, a financial account in a foreign country (such as a bank account, securities account, or other financial | | | |
| | account)? | 4a | | 1 |
| b | If "Yes," enter the name of the foreign country: ▶ | - | | |
| | See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | 1 |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | ✓ |
| C | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | 5c | | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the | | | - |
| | organization solicit any contributions that were not tax deductible as charitable contributions? | 6a | | ✓_ |
| þ | If "Yes," did the organization include with every solicitation an express statement that such contributions or | | | |
| _ | gifts were not tax deductible? | 6b | | |
| 7 a | Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods | | | |
| a | and services provided to the payor? | - | | |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7a 7b | | ✓ |
| C | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was | " | | |
| _ | required to file Form 8282? | 7c | i | 1 |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | - | | Ť |
| e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | 1 |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | √ |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g | | |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | 7h | | |
| 8 | Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting | | | |
| | organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring | | | |
| | organization, have excess business holdings at any time during the year? | 8 | | |
| 9 | Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? | | | |
| a b | Did the organization make a distribution to a donor, donor advisor, or related person? | 9a 9b | \rightarrow | |
| 10 | Section 501(c)(7) organizations. Enter: | 35 | - | |
| а | Initiation fees and capital contributions included on Part VIII, line 12 | | | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b | | ĺ | |
| 11 | Section 501(c)(12) organizations. Enter: | 1 | ı | • |
| а | Gross income from members or shareholders | | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources | | } | |
| | against amounts due or received from them.) | | _] | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | — ↓ | |
| | If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b | | - 1 | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | 10- | | |
| а | Is the organization licensed to issue qualified health plans in more than one state? | 13a | | |
| ь | 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 | | | |
| С | Enter the amount of reserves on hand | | | |
| 14a | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | \dashv | |
| | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. | 14b | | |

| Part | Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Schedule O contains a response to any question in this Part VI | See in | struct | tions. |
|----------|---|---------------|--------------|----------|
| Secti | on A. Governing Body and Management | - | - | . ☑ |
| | on a continue of the continue | | Yes | No |
| 1a | Enter the number of voting members of the governing body at the end of the tax year | | | |
| b 2 | Enter the number of voting members included in line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? | 2 | | 1 |
| 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 | | 1 |
| 4 5 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | | ✓ |
| 6 7a | Did the organization have members or stockholders? | 6 7a | | 1 |
| ь | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? | 7b | | 1 |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | | |
| a | The governing body? | 8a | ✓ | |
| 9 | Each committee with authority to act on behalf of the governing body? | 8b 9 | | 1 |
| Section | on B. Policies (This Section B requests information about policies not required by the Internal Reven | | ode.) |) |
| | | | Yes | No |
| 10a b | Did the organization have local chapters, branches, or affiliates? | 10a | | 1 |
| | affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? | 10b | | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 11a | ✓ | ļ |
| 12a | Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | √ | ! |
| c | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give use to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done. | 12b | √ | |
| 13 | Did the organization have a written whistleblower policy? | 13 | ✓ | |
| 14 15 | Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | 14 | | , |
| a | The organization's CEO, Executive Director, or top management official | 15a | 1 | |
| b 16a | Other officers or key employees of the organization | 15b | V | , |
| h | with a taxable entity during the year? | 16a | | 1 |
| | 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 | - | |
| Section | on C. Disclosure | | | |
| 17 18 | List the states with which a copy of this Form 990 is required to be filed \(\bigsup \) \(\text{Wisconsin} \) Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply. | 501(| c)(3)s | only) |
| 19 | ☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O) Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of and financial statements available to the public during the tax year. | | | olicy, |
| 20 | State the name, physical address, and telephone number of the person who possesses the books and records organization: John Cokl. 3118 Post Poad. State A. Stevens Pourt. WI 54481, 715 204 1643 | of the | | |

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|----------|-----------------------------|---------------------|----------------|---------------------|--------------|-------|
| Part VII | Compensation of Officers, D | irectors, Trustees, | Key Employees, | , Highest Compensat | ed Employees | , and |
| | Independent Contractors | | | | | |

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

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

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

| Check this box if neither the organization no (A) Name and Title | (B) Average hours per week (list any hours for related | oox, | unies er and | Pos neck ss pe | rson | e than on the state of the stat | h an tee) | compensation from the organization | (E) Reportable compensation from related organizations (W-2/1099-MISC) | other compensation from the |
|--|--|----------|-----------------------|----------------------|---------|--|--------------|---|---|--|
| | organizations below dotted line) | | Institutional trustee | | ıployee | Highest compensated employee | | (W-2/1099-MISC) | | organization and related organizations |
| (26) Ulrich, Carol | o | | | | | ļ | | 1 | | |
| Director | | ✓ | | | | | ĺ | 0 | 0 | ĺ |
| (27) Wetterau, Natasha Director | 0 | \ | | | | | | 0 | 0 | (|
| (28) Weyers, Lori | 0 | | | | | | | | | |
| Director | | ✓ | | | | | | 0 | 0 | (|
| (29) Willfahrt, Connie Director | 0 | ✓ | | | | | | 01 | 0 | (|
| (30) Younger, Thomas | 0 | | | | | | | | | |
| Director | | \ | | | | | | o | 0 | |
| (31) Zelazoski, Ben | 0 | | | | | | | | | • |
| <u>Director</u> | | ✓ | | | | | | 190 | 0 | |
| (32) Ziegler, Janice | 0 | | | | | | | | | |
| Director | | ✓ | | | | | | 0 | 0 | |
| (33) Zimmerman, Ronald Director | <u> </u> | 1 | | | | | | 460 | 0 | 0 |
| (34) Agnoli, Steven Vice President | 0 | | | / | | | | 0: | 0 | |
| (35) Daniels, Rene | 50 | | H | - | | | \vdash | | | |
| Executive Director | | | | 1 | | | | 82,194 | اه | O |
| (36) Kınsella, Joe | 0 | | | 一 | | | | 02,194 | | |
| Secretary/Treasurer | | ✓ | | 1 | ļ | İ | | ا | o | O |
| (37) Olson, Kent | 0 | | | | 一 | | | | | |
| Board Chair | | ✓ | | ✓ | _ | | | 0 | 0 | 0 |
| | | | | | | | | | | |
| | | | | | | | | | | |

| | (2012) | |
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| | | |
| | | |

Form 990 (2012)

| Part VII | Compensation of Officers, Directors, T | rustees, Key Employees | , Highest Compensated Employees, | and |
|----------|--|------------------------|----------------------------------|-----|
| | Independent Contractors | | | |

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

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

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

| ☐ Check this box if neither the organization no | r any relate | d org | aniz | atio | n c | ompe | ensa | ated any currer | t officer, directo | r, or trustee. |
|---|--|---|-----------------------|---------|--------------|------------------------------|--------|--|----------------------------------|--|
| (A) Name and Title | (B) Average hours per week (list any | ge box, unless person is both an officer and a director/trustee) Ger officer and a director/trustee) Gerbaration Compensation | | | | | | | | (F) Estimated amount of other |
| | hours for related organizations below dotted line) | | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | the organization (W-2/1099-MISC) | organizations (W-2/1099-MISC) | compensation from the organization and related organizations |
| (1) Anderson, Elizabeth | 0 | | | | | | |] | | |
| Director | † <u>*</u> | / | | | | | Ī | , | o | 0 |
| (2) Borowicz, Mark | 0 | | | | | | _ | <u>_</u> | | |
| Director | †i | 1 | | | | | | 0 | 0 | 0 |
| (3) Burmaster, Elizabeth | 0 | | | | | | | | | |
| Director | | ✓ | | | | | | 0 | oi | 0 |
| (4) Christiansen, Marcia | 0 | | | | | | | | | |
| Director | | ✓ | [| | | | | o | 0 | 0 |
| (5) Clements, Deb | 0 | | | | | | | | · | |
| Director | | ✓ | | | | | | 0 | 0 | 0 |
| (6) Drengler, Kathy | 0 | | | | | | | | | |
| Director | | ✓ | | | | | | 0 | 0 | 0 |
| (7) Durst, Paul | 0 | | | | | | | | | |
| Director | | ✓ | | | | | | 0 | o | 0 |
| (8) Fausti, Robert | 0 | | ĺ | | | | | | | |
| Director | | ✓ | | | | | | 0 | 0 | 0 |
| (9) Hoppa, Deb | 0 | | | | | | | | | |
| Director | | ✓ | | | | | | 0 | 0 | 0 |
| (10) Jackson, Dana | 0 | | | | ĺ | | | | . – | |
| Director | | ✓ | | | | | _ | 190 | 0 | 0 |
| (11) Karl, Ronald | 0 | | | | I | | | | | |
| <u>Director</u> | | / | | | | | | 140 | 0 | 0 |
| (12) Kiesling, Cindy | 0 | | l | | - 1 | İ | | | | |
| Director | | ✓ | | | | | \Box | 0 | 0 | 0 |
| (13) Kramer, Mark | 0 | | | | | | ĺ | | | |
| Director | | ✓ | _ | | [| | | 0 | 0 | 0 |
| (14) Landru Jr, Jimmy | 0 | | | | | | | | | |
| Director | | ✓ | | | | [| | 50 | 0 | 0 |

| | (A) Name and title | (B) Average hours per week (list any | box, | unles er and | Pos neck ss pe | rson Irect | is both or/trus | h an tee) | (D) Reportable compensation from | (E) Reportable compensation from related | an | (F) timated nount of other | |
|-------------------|--|--|----------|-----------------------|----------------------|---------------|---------------------------------|--------------|--|--|------------------|--|----------|
| | | hours for related organizations below dotted line) | | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | the organization (W-2/1099-MISC) | organizations (W-2/1099-MISC) | fr org and | pensatio om the anization d related inizations | |
| (15) M | ayne, Lisa | 00 | 1 | | | | | | 190 | 0 | | | |
| | cDonald, Hang | 0 | Ļ | | | - | - | | 190 | | | | |
| Direct | or | | / | | | _ | | | 0 | 0 | | | |
| (17) M Direct | endham, Phil | <u> </u> | / | | | | | | | | | | , |
| | ichalsen, Bill | 0 | Ť | Н | | _ | | | 0 | 0 | | | (|
| Direct | or | | / | | | | L., | | 0 | 0 | | | (|
| | oland, Patty | 0 | / | | | | | | _ | _ | ļ. | | |
| Direct | | 0 | - | Н | | | | | 0 | 0 | | | |
| Direct | eet, Jolene or | † <u>v</u> | 1 | | | i | | | 0 | 0 | | | C |
| (21) S | argent, Jeff | 0 | | | | | | | | | | | |
| Direct | | | √ | - | | - | | \vdash | 0 | 0. | | | |
| Direct | chulfer, LouAnn or | 0 | 1 | | | | | | 190 | o | | | C |
| | evert, Scott | 0 | | | | | | | | | _ | | |
| Direct | or | | ✓ | | _ | | | | 0 | 0 | | | 0 |
| | obczak, Lisa | 00 | / | | | · } | | | 0 | 0 | | | , |
| Direct (25) Sv | wan, DuWayne | 0 | _ | | | | | | | | | | |
| Direct | | | 1 | | | | | | 0 | 0 | | | 0 |
| 1b | Sub-total | | | • | | | . ! | > | 760 | 0 | | | 0 |
| c d | Total from continuation sheets to Part Total (add lines 1b and 1c) | - | | • | | • | | | 82,844 83,604 | 0 | | | 0 |
| <u>2</u> | Total number of individuals (including but | | | | | | bove |) wh | | <u></u> | 0 of | | |
| | reportable compensation from the organic | | | | | | | | | | | , | |
| 3 | Did the organization list any former of | ficer direct | tor o | r tri | ıcto | | · · · · · · | mal | ovee or high | et componento | a | Yes | No |
| 3 | employee on line 1a? If "Yes," complete S | | | | | | | ı ııpı | | · · · · · | 3 | 1 | <u>√</u> |
| 4 | For any individual listed on line 1a, is the | | | | | | | n an | nd other comp | ensation from th | | | |
| | organization and related organizations | greater tha | an \$1 | 50,0 | 000 | ? <i>If</i> | "Yes | s," (| complete Scho | edule J for suc | I | | |
| _ | individual | . accrue co | mner | Ieati | | fron | | | | | . 4 | | ✓_ |
| 5 | for services rendered to the organization? | | | | | | | | | | " 5 | 1 - 1 | Ī |
| Section | on B. Independent Contractors | | | | | | | _ | | | | | <u> </u> |
| 1 | Complete this table for your five highest of compensation from the organization. Rep year. | | | | | | | | | | | | Κ |
| | (A) Name and business add | ress | | _ | - | | | | (B) Description of se | rvices | (C) Compens | ation | |
| WI Sta | te AFL-CIO LETC, 2811 8th St S STE 30, WI | | 54494 | | | | | Sub | contractor | | | 1,388 | 543 |
| | rd Service Corp., 1402 Pankratz St STE 101, N | | | | | | | | contractor | | | | ,501 |
| | entral Technical College, 1000 W Campus D | | | | | | \neg | trair | | | | | ,398 |
| | #5, PO Box 564, Portage, WI 53901 | | | | | | | | contractor | | | | ,700 |
| Mid-St 2 | ate Technical College, 500 32nd St N, WI Rap Total number of independent contracto | ids, WI 5449 | a hir | n n | ot In | mıte | | | ning ose listed abo | ve) who | | 280 | ,575 |
| _ | received more than \$100,000 of compens | | | | | | | | 5 | 10, 1110 | | | |

| Par | t VIII | Statement of Revenue | | + | Aram in Abia Dant | \/III | | |
|--|-----------|--|----------|------------------|-------------------|---|--|---|
| | | Check if Schedule O contains a | respo | onse to any ques | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512, 513, or 514 |
| ats ts | 1a | Federated campaigns | 1a | | | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | b | Membership dues | 1b | | | | | } |
| S, C | С | Fundraising events | 1c | | | | | |
| Pi Fi | d | Related organizations | 1d | | | 1 | | |
| S, E | е | Government grants (contributions) | 1e | 4,526,264 | | | | |
| ig ig | f | All other contributions, gifts, grants, | | | | İ | | 1 |
| 혈美 | l | and similar amounts not included above | 1f | 23,597 | | | | |
| a a | 9 | Noncash contributions included in lines 1a | | | | ļ | | İ |
| <u>Q</u> <u>≅</u> | h | Total. Add lines 1a-1f | <u> </u> | | 4,549,861 | | _ | <u> </u> |
| ş | | 5 | | Business Code | | | | |
| 94 | 2a | Fee for Svc - Community Outreach | 3 | 900099 | 17,369 | | | |
| 免 | b | Registration Fee - Job Fair | | 900099 | 13,200 | 13,200 |) | |
| Ž | d | *************************************** | | | | | | |
| აგ E | ي ا | | | | | | | · |
| Program Service Revenue | f | All other program service revenu | | | | | | |
| 5 | g | Total. Add lines 2a–2f | | ▶ | 30,569 | · · · · · · · · · · · · · · · · · · · | 1 | <u> </u> |
| | 3 | Investment income (including | | | | | T | |
| | } | and other similar amounts) . | | ▶ | | | | |
| | 4 | Income from investment of tax-exer | npt bo | ond proceeds ► | | | | |
| | 5 | Royalties | | | | | | |
| | | (i) Real | | (ii) Personal | | | | |
| | 6a | Gross rents | | | | | | |
| | b | Less: rental expenses | | | | | ļ | |
| | C | Rental income or (loss) | | | | | | |
| | d 7a | Net rental income or (loss) . Gross amount from sales of (i) Security | | ▶ (ii) Other | | | | |
| | , 'a | assets other than inventory | | (1) 0 11 101 | | | | ' |
| | ь | Less: cost or other basis | | | | | 1 | 1 |
| | ~ | and sales expenses . | | | | | | 1 |
| | c | Gain or (loss) | | | | | | · · |
| | d | | | ▶ | | | | |
| enue | 8a | Gross income from fundraising events (not including \$ | | | | | | |
| Other Reve | | of contributions reported on line 10 See Part IV, line 18 | | | | | | |
| Ě | b | Less: direct expenses | b | | ļ | | | 1 |
| • | С | Net income or (loss) from fundrai | sing e | events . 🕨 | | <u> </u> | | |
| | | Gross income from gaming activit See Part IV, line 19 | a | | | | | |
| | | Less: direct expenses | | | | | | |
| | | Net income or (loss) from gaming | | vities ▶ | | | | ļ |
| | 10a | Gross sales of inventory, le returns and allowances | | | | | | |
| | | | F | | | | | |
| | | Less: cost of goods sold Net income or (loss) from sales of | | entory | | | | - |
| | C | Miscellaneous Revenue | 1 1100 | Business Code | | | | |
| | 11a | | | | • | | | |
| | b | | i i | | | | | |
| | C | | | | | | | |
| | d | All other revenue | | | | | | |
| | е | Total. Add lines 11a-11d | L | ▶ | | | | t |
| i | 12 | Total revenue. See instructions. | | _ | 4 500 430 | 20 560 | | |

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 respons | se to any question i | in this Part IX | | |
|---------|--|---|-----------------------------|---------------------------------|---------------------------------------|
| Do no | ot include amounts reported on lines 6b, 7b, | (Α) | (B) | (C) | |
| 8b, 9l | b, and 10b of Part VIII. | Total expenses | Program service expenses | Management and general expenses | (D) Fundraising expenses |
| 1 | Grants and other assistance to governments and | | 5 . | gondia expenses | expenses |
| | organizations in the United States. See Part IV, line 21 | | i | | |
| 2 | Grants and other assistance to individuals in | | | | |
| | the United States. See Part IV, line 22 | 1,141,961 | 1,141,961 | İ | |
| 3 | Grants and other assistance to governments, | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | 1,111,001 | | · · · · · · · · · · · · · · · · · · · |
| | organizations, and individuals outside the United States. See Part IV, lines 15 and 16 | | | | |
| 4 | Benefits paid to or for members | | | | |
| 5 | Compensation of current officers, directors, trustees, and key employees | 92,060 | | 92,060 | |
| 6 | Compensation not included above, to disqualified | 52,000 | | 92,000 | |
| • | persons (as defined under section 4958(f)(1)) and | | | | |
| | persons described in section 4958(c)(3)(B) | | | | |
| 7 | Other salaries and wages | 424,122 | 317,985 | 106,137 | |
| 8 | Pension plan accruals and contributions (include | 727,122 | 317,983 | 100,137 | |
| | section 401(k) and 403(b) employer contributions) | 11,773 | 8,748 | 3.025 | |
| 9 | Other employee benefits | 108,878 | 80,612 | 28,266 | |
| 10 | Payroll taxes | 46,426 | 28,540 | 17,886 | |
| 11 | Fees for services (non-employees): | 10,120 | 20,040 | 17,000 | |
| а | Management | 1 | | | |
| b | Legal | 2,597 | 0 | 2,597 | |
| С | Accounting | 10,640 | 0 | 10,640 | |
| d | Lobbying | | | | ···· |
| е | Professional fundraising services. See Part IV, line 17 | | | | |
| f | Investment management fees | | | | |
| g | Other. (If line 11g amount exceeds 10% of line 25, column | | | | |
| | (A) amount, list line 11g expenses on Schedule O.) | | | | |
| 12 | Advertising and promotion | 6,387 | 4,728 | 1,659 | |
| 13 | Office expenses | 73,338 | 44,801 | 28,537 | |
| 14 | Information technology | | | | |
| 15 | Royalties | | | | |
| 16 | Occupancy | 37,915 | 20,393 | 17,522 | ··· |
| 17 | Travel | 54,463 | 20,343 | 34,120 | |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings . | 5,611 | 0 | 5,611 | - |
| 20 | Interest | | | | |
| 21 | Payments to affiliates | | | | |
| 22 | Depreciation, depletion, and amortization . | 14,003 | 14,003 | 0 | |
| 23 | Insurance | 1,602 | 0 | 1,602 | |
| 24 | Other expenses. Itemize expenses not covered | | | ! | |
| | above (List miscellaneous expenses in line 24e. If | | i | Ì | 1 |
| | line 24e amount exceeds 10% of line 25, column | 1 | | | |
| | (A) amount, list line 24e expenses on Schedule O.) | | | | |
| a | Subcontractor | 2,396,028 | 2,396,028 | 0 | |
| b | Contractual | 117,682 | 93,443 | 24,239 | |
| C | Dues/Membership | 10,164 | 75 | 10,089 | |
| d | Training | 8,059 | 1,713 | 6,346 | |
| е 05 | All other expenses Total functional expenses. Add lines 1 through 24e | 4,090 | 2,749 | 1,341 | ··· |
| 25 | Joint costs. Complete this line only if the | 4,567,799 | 4,176,122 | 391,677 | |
| 26 | organization reported in column (B) joint costs | | İ | | |
| | from a combined educational campaign and | | | | |
| | fundraising solicitation. Check here following 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) (A) Beginning of year End of year Cash - non-interest-bearing 1 101,920 50,571 2 2 Savings and temporary cash investments 3 3 390,333 364,231 4 4 920 545 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 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 7 8 R Prepaid expenses and deferred charges . . . 9 9 Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a Less: accumulated depreciation 10b 10c b 24.505 59,512 45,509 Investments—publicly traded securities 11 11 12 Investments—other securities. See Part IV, line 11 . . . 12 13 Investments—program-related. See Part IV, line 11 13 14 14 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 552,685 460,856 17 17 436,241 302,925 18 18 19 19 8.074 36,930 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D . 21 Loans and other payables to current and former officers, directors, 22 trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 Unsecured notes and loans payable to unrelated third parties . . . 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X 25 Total liabilities. Add lines 17 through 25 26 444,315 339,855 Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 27 48,858 75,492 28 28 59,512 45,509 29 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 Paid-in or capital surplus, or land, building, or equipment fund . . . 31 31 32 32 Retained earnings, endowment, accumulated income, or other funds. Total net assets or fund balances 33 33 108,370 121,001 Total liabilities and net assets/fund balances 552.685 **34** 460,856 Form **990** (2012)

| Dono | 4 | 2 |
|------|---|---|
| Page | 1 | 4 |

| | | | | | | , |
|------------|--|-------|----------|---------------|--------------|--------------|
| Par | 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 | | | ,580 | 0,430 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | | 4 | ,567 | 7,799 |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | | | 12 | 2,631 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | | | 108 | 3,370 |
| 5 | Net unrealized gains (losses) on investments | 5 | | | | 0 |
| 6 | Donated services and use of facilities | 6 | <u> </u> | | | 0 |
| 7 | Investment expenses | 7 | | | | 0 |
| 8 | Prior period adjustments | 8 | | | | 0 |
| 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 | <u>L</u> | | 121 | ,001 |
| Part | XII Financial Statements and Reporting | | | | | |
| | Check if Schedule O contains a response to any question in this Part XII | | <u></u> | <u> </u> | | |
| | | | | Ye | 95 | No |
| 1 | Accounting method used to prepare the Form 990: Cash Accrual Other | | _ l | 1 | ł | |
| | If the organization changed its method of accounting from a prior year or checked "Other," ex | plain | in | j | | 1 |
| | Schedule O. | | | | | ا |
| 2 a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | | a | 1 | |
| | If "Yes," check a box below to indicate whether the financial statements for the year were com- | piled | or |] | 1 | ļ |
| | reviewed on a separate basis, consolidated basis, or both: | | 1 | - 1 | 1 | |
| | ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis | | ļ | | | ! |
| b | Were the organization's financial statements audited by an independent accountant? | | . 2t | 2 \ | | |
| | If "Yes," check a box below to indicate whether the financial statements for the year were audit | ed on | a | İ | | į |
| | separate basis, consolidated basis, or both: | | ł | | 1 | į |
| | ☑ 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 o | | <u> </u> | | | |
| | of the audit, review, or compilation of its financial statements and selection of an independent according to the second selection of the second selection selection of the second selection s | | | ; ✓ | 4 | ; |
| | If the organization changed either its oversight process or selection process during the tax year, ex | plain | in | i | | 1 |
| _ | Schedule O. | | - | | - - | |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set | torth | - 1 | | | |
| | the Single Audit Act and OMB Circular A-133? | • • | · 3a | 1 | 4 | |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits as a substantial or and december as a substantial or and decembe | | | Ι. | | |
| | required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a | uaits | 3b | | | |
| | | | Fo | om 9 9 | JO (2 | 2012) |
| | | | | | | |

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

Open to Public Inspection

Employer Identification number

North Central Wisconsin Workforce Development Board 39-1453475 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). [7] An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 9 An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. c Type III-Functionally integrated **b** Type II **d** Type III-Non-functionally integrated e 🔲 By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and No Yes 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? . 11g(iii) Provide the following information about the supported organization(s). (ii) EIN (iv) is the organization (i) Name of supported (iii) Type of organization (v) Did you notify (vii) Amount of monetary in col. (i) listed in your organization (described on lines 1-9 the organization in col (i) of your organization in col support above or IRC section governing document? (i) organized in the support? US? (see instructions)) Yes No Yes No Yes No (A) (B) (C) (D) (E) Total

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A Public Support

| | ion A. Public Support | | | | | | |
|-----------|--|-----------------|-----------------|---------------|-------------|-----------------|--------------|
| | ndar year (or fiscal year beginning in) | (a) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) 2012 | (f) Total |
| 1 | Gifts, grants, contributions, and | | | | | | |
| | membership fees received. (Do not | | | | | | |
| | include any "unusual grants.") | 3,738,004 | 5,012,505 | _5,785,502 | 4,421,929 | 4,549,861 | 23,507,801 |
| 2 | Tax revenues levied for the | | | | ļ | | |
| | organization's benefit and either paid | | | | | | |
| | to or expended on its behalf | | | | | | |
| 3 | The value of services or facilities | ' ' | | | | | |
| | furnished by a governmental unit to the | | | | | | |
| | organization without charge | | | | | | |
| 4 | Total. Add lines 1 through 3 | 3,738,004 | 5,012,505 | 5,785,502 | 4,421,929 | 4,549,861 | 23,507,801 |
| 5 | The portion of total contributions by | | | | | | |
| | each person (other than a | | | | | | |
| | governmental unit or publicly | | | | | | |
| | supported organization) included on | | | | j | | |
| | line 1 that exceeds 2% of the amount | | | | | 1 | |
| | shown on line 11, column (f) | | | | | | |
| 6 | Public support. Subtract line 5 from line 4. | | { | | | | 23,507,801 |
| | on B. Total Support | ··· | | | | ···· | |
| | dar year (or fiscal year beginning in) 🕨 | (a) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) 2012 | (f) Total |
| 7 | Amounts from line 4 | 3,738,004 | 5,012,505 | 5,785,502 | 4,421,929 | 4,549,861 | 23,507,801 |
| 8 | Gross income from interest, dividends, | | | | | | |
| | payments received on securities loans, | } | | 1 | | ŀ | |
| | rents, royalties and income from similar | | ļ | ļ | | | |
| _ | sources | | | | | | |
| 9 | Net income from unrelated business | | | | [| ł | |
| | activities, whether or not the business | İ | İ | ļ | 1 | | |
| | is regularly carried on | | | | | | |
| 10 | Other income. Do not include gain or | ĺ | | | i | | |
| | loss from the sale of capital assets | | ŀ | | , | | |
| | (Explain in Part IV.) | | | | | | |
| 11 12 | Total support. Add lines 7 through 10 | /ooo instructio | <u></u> | <u></u> | | 101 | 23,507,801 |
| 13 | Gross receipts from related activities, etc. First five years. If the Form 990 is for the | • | • | | L | 12 | 171,279 |
| 13 | organization, check this box and stop her | | | | | | |
| Cooti | on C. Computation of Public Support | | | | | • • • • • | · · · · |
| | Public support percentage for 2012 (line 6 | | | L saluma (fi) | | 14 | |
| 14 | Public support percentage from 2012 (line of Public support percentage from 2011 Sch | | • | | _ | 15 | 100 % |
| 15 16a | 331/3% support test—2012. If the organiz | | | | | | 100 % |
| IVa | box and stop here. The organization quali | | | | | | |
| b | 331/3% support test—2011. If the organi | | | - | | | |
| | check this box and stop here. The organiz | | | | • | | |
| 17a | · | • | | | | | |
| 11a | 10%-facts-and-circumstances test—20 10% or more, and if the organization mee | | | | | | |
| | Part IV how the organization meets the "fa | | | | | | |
| | organization | | | _ | | • | . ▶ □ |
| ь | 10%-facts-and-circumstances test—20 | | | | | | |
| U | 15 is 10% or more, and if the organizati | | | | | | |
| | Explain in Part IV how the organization me | | | | | | • |
| | supported organization | | | | _ | • | • |
| 18 | Private foundation. If the organization did | | | | | | |
| | instructions | | | | | | |

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

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

| Secti | on A. Public Support | | | | | | |
|-------|---|------------------|--------------------------|-------------------|------------------|-----------------|--------------|
| Calen | dar year (or fiscal year beginning in) | (a) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) 2012 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees | | | | i | | |
| | received. (Do not include any "unusual grants.") | | 1 | | | ľ | |
| 2 | Gross receipts from admissions, merchandise | | | | | | |
| | sold or services performed, or facilities furnished in any activity that is related to the | | | ł | | ł | |
| | organization's tax-exempt purpose | 1 | | | | | |
| 3 | Gross receipts from activities that are not an | | | | | | |
| | unrelated trade or business under section 513 | 1 | | İ . | | | |
| 4 | Tax revenues levied for the | | | | | | |
| | organization's benefit and either paid | | } | | ! | ļ | ļ |
| | to or expended on its behalf | | | | | ļ | |
| 5 | The value of services or facilities | | | | | | |
| | furnished by a governmental unit to the | | | | | | |
| | organization without charge | | · | | | | 1 |
| 6 | Total. Add lines 1 through 5 | | | | | | |
| 7a | Amounts included on lines 1, 2, and 3 | | | | | | Ţ |
| | received from disqualified persons . | | | | | ! | } |
| ь | Amounts included on lines 2 and 3 | | | | | | |
| | received from other than disqualified | | 1 | | | | j |
| | persons that exceed the greater of \$5,000 | | | | | | 1 |
| | or 1% of the amount on line 13 for the year | | | | | | |
| C | Add lines 7a and 7b | | | | | | |
| 8 | Public support (Subtract line 7c from | | · | | | | |
| | line 6.) | | | | | | <u> </u> |
| | on B. Total Support | | | | | | |
| | dar year (or fiscal year beginning in) 🕨 | (a) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) 2012 | (f) Total |
| 9 | Amounts from line 6 | | | | | | |
| 10a | - · · · · · · · · · · · · · · · · · · · | | | | | | |
| | payments received on securities loans, rents, | | | | | | |
| | royalties and income from similar sources . | | | | | | |
| þ | Unrelated business taxable income (less | İ | | ł | 1 | | 1 |
| | section 511 taxes) from businesses acquired after June 30, 1975 | ļ | İ | | | | 1 |
| | · . | | | | | | |
| C | · · · · · · · · · · · · · · · · · · · | | | | | | |
| 11 | Net income from unrelated business activities not included in line 10b, whether | | | | i | | [|
| | or not the business is regularly carried on | | İ | j | ļ | | 1 |
| 40 | • • • | | | - | | | |
| 12 | Other income. Do not include gain or loss from the sale of capital assets | | | ! | ĺ | | ļ |
| | (Explain in Part IV.) | | i | 1 | ł | | |
| 13 | Total support. (Add lines 9, 10c, 11, | | | | | | - |
| | and 12.) | } | | ĺ | Ī | | Ì |
| 14 | First five years. If the Form 990 is for th | e organization | 's first second | t third fourth | or fifth tay ve | ar as a sectio | n 501(c)(3) |
| | organization, check this box and stop her | - | | | • | | '''' — |
| Secti | on C. Computation of Public Suppor | | | · · · · · · | | | |
| 15 | Public support percentage for 2012 (line 8 | | | 3. column (f)) | | 15 | % |
| 16 | Public support percentage from 2011 Sch | | - | | | 16 | % |
| | on D. Computation of Investment Inc | | | | <u> </u> | | |
| 17 | Investment income percentage for 2012 (I | | | line 13, colum | nn (f)) | 17 | % |
| 18 | Investment income percentage from 2011 | | • | | | 18 | % |
| 19a | 331/3% support tests-2012. If the organi | | | | | ore than 331/3 | |
| | 17 is not more than 331/3%, check this box a | and stop here. | The organization | n qualifies as a | publicly suppo | rted organizat | ion . 🕨 📋 |
| b | 331/3% support tests - 2011. If the organization | ation did not ch | neck a box on l | ine 14 or line 19 | 9a, and line 16 | is more than 3 | _ |
| | line 18 is not more than 331/3%, check this b | ox and stop he | e re. The organiz | zation qualifies | as a publicly su | pported organ | ization 🕨 🔲 |
| 20 | Private foundation If the organization did | t not check a b | nox on line 14 | 19a or 19h cl | neck this how s | and see instru | ctions 🕨 🗍 |

| Part IV | Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions). | Page (| | | | |
|--------------|--|--------|--|--|--|--|
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SCHEDULE D (Form 990)

Supplemental Financial Statements

2012

Employer Identification number

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

Open to Public Inspection

OMB No 1545-0047

| | Central Wisconsin Workforce Development Boa | | | | 39-1453475 |
|--------|--|---|---------------------|-----------------|---|
| Pa | Organizations Maintaining Done | | | inds or Acc | ounts. Complete if the |
| | organization answered "Yes" to F | , , , , , , , , , , , , , , , , , , , | | | • |
| 4 | Total aumhor of and of con- | (a) Donor advised | funds | (b) Fu | and other accounts |
| 1 | Total number at end of year | | | | · |
| 2 3 | Aggregate contributions to (during year) . | | | | · · · - · · · · · · · · · · · · · · · · |
| 4 | Aggregate grants from (during year) Aggregate value at end of year | | | | |
| 5 | Did the organization inform all donors and | donor advisors in writing | that the assets | held in done | or advised |
| • | funds are the organization's property, subject | | | | |
| 6 | Did the organization inform all grantees, do | | - | | |
| | only for charitable purposes and not for the | | | | |
| | | <u></u> | · | • | • • |
| Par | Conservation Easements. Comp | | | | |
| 1 | Purpose(s) of conservation easements held I | | | | |
| | Preservation of land for public use (e.g., | recreation or education) | Preservation | of an historica | ally important land area |
| | Protection of natural habitat | (| ☐ Preservation of | of a certified | historic structure |
| _ | Preservation of open space | | | | |
| 2 | Complete lines 2a through 2d if the organiza | tion held a qualified conse | ervation contribut | ion in the forr | m of a conservation |
| | easement on the last day of the tax year. | | | | Ti |
| _ | Total number of conservation easements . | | | | Held at the End of the Tax Year |
| a b | Total acreage restricted by conservation eas | | | | |
| c | Number of conservation easements on a cer | | | | |
| ď | Number of conservation easements include | | | | |
| | historic structure listed in the National Regist | | | | |
| 3 | Number of conservation easements modified | | | | he organization during the |
| | tax year ▶ | | - | - | · · |
| 4 | Number of states where property subject to | | | | |
| 5 | Does the organization have a written poli | cy regarding the periodic | c monitoring, in: | spection, ha | ndling of |
| | violations, and enforcement of the conservat | | | | |
| 6 | Staff and volunteer hours devoted to monitor | ring, inspecting, and enfor | cing conservation | easements | during the year |
| _ | | | | | |
| 7 | Amount of expenses incurred in monitoring, | inspecting, and enforcing | conservation eas | ements durin | g the year |
| 8 | Does each conservation easement reported | on line 2/d) above setiefy t | ho roquiromento | of anotion 17 | O(F)(4)(D) |
| J | | · · · · · · · · · · · | | or section 17 | · · · D Yes D No |
| 9 | In Part XIII, describe how the organization rep | | | and evnene | |
| • | balance sheet, and include, if applicable, the | text of the footnote to the | organization's fir | nancial stater | nents that describes the |
| | organization's accounting for conservation ea | | J | | |
| Part | | ctions of Art, Historica | l Treasures, o | Other Sim | ilar Assets. |
| | Complete if the organization answer | | | | |
| 1a | If the organization elected, as permitted und | er SFAS 116 (ASC 958), r | ot to report in its | s revenue sta | tement and balance sheet |
| | works of art, historical treasures, or other s | similar assets held for put | olic exhibition, ed | ducation, or | research in furtherance of |
| _ | public service, provide, in Part XIII, the text of | | | | |
| D | If the organization elected, as permitted un | der SFAS 116 (ASC 958). imilar assets hold for put | , to report in its | revenue stat | tement and balance sheet |
| | works of art, historical treasures, or other s public service, provide the following amounts | 1 44 4 44 4 | | | |
| | (i) Revenues included in Form 990, Part VIII, (ii) Assets included in Form 990, Part X If the organization received or held works of | line 1 | | | . ¢ |
| | (ii) Assets included in Form 990. Part X | | | | > \$ |
| 2 | If the organization received or held works of | of art, historical treasures | , or other similar | assets for f | financial gain, provide the |
| | following amounts required to be reported un | der SFAS 116 (ASC 958) r | elating to these it | tems: | J , promet 1110 |
| а | Revenues included in Form 990, Part VIII, line | 1 | | 🕨 | \$ |
| h | Accete included in Form 000, Part V | | | | |

| Par | III Organizations Maintaining | | | | | | | | |
|--------|--|-------------|---------------------------|------------|--|------------------------|--|------------------------|-------------------------|
| 3 | Using the organization's acquisition, collection items (check all that apply): | accession | | | | | | | |
| а | ☐ Public exhibition | | | d | ☐ Loar | or exchar | nge prog | grams | |
| b | ☐ Scholarly research | | | е | ☐ Othe | er | | | |
| С | ☐ Preservation for future generation: | S | | | | | | | |
| 4 | Provide a description of the organiza | tion's co | llections | and exp | lain how | they furthe | r the or | ganization's ex | empt purpose in Par |
| | XIII. | | | | | | | | |
| 5 | During the year, did the organization | | | | | | | | |
| | assets to be sold to raise funds rather | than to | be maint | ained as | part of th | e organiza | tion's c | ollection? . | · 🔲 Yes 🗌 No |
| | line 9, or reported an amour | nt on Fo | rm 990, | Part X, | line 21. ` | - | | | |
| 1a | Is the organization an agent, trustee | , custod | ian or otl | ner inter | mediary f | or contribu | utions o | r other assets | not |
| | included on Form 990, Part X? | | | | | | | | · 🗌 Yes 🗌 No |
| b | If "Yes," explain the arrangement in P | art XIII a | nd compl | ete the f | ollowing t | able: | | | · <u>·</u> |
| | | | | | | | <u> </u> | | Amount |
| C | Beginning balance | | | | | | | | |
| d | Additions during the year | | | | | | <u> </u> | 3 | |
| e | Distributions during the year | | | | | | | | |
| f | Ending balance | | | | | | | | |
| 2a | Did the organization include an amoun | | | | | | | | |
| | If "Yes," explain the arrangement in P | | | | | | | | |
| Par | t V Endowment Funds. Compl | | | | | | | | |
| | | (a) Cun | rent year | (b) Pr | nor year | (c) Two ye | ars back | (d) Three years ba | ack (e) Four years back |
| 1a | Beginning of year balance | | | | | | | | |
| b | Contributions | | | ļ | | | | | |
| C | Net investment earnings, gains, and | I | |] | |] | | | |
| | losses | | | <u> </u> | | | | | |
| đ | Grants or scholarships | | | ļ | | | | | |
| е | Other expenditures for facilities and | | | [| | | | | |
| _ | programs | | | ├ | | | | | |
| f | Administrative expenses | | | ļ | | ļ— | | | |
| g | End of year balance | | | L | | L | | | |
| 2 | Provide the estimated percentage of t | | | | ce (line 1g | i, column (| a)) held a | as: | |
| a | Board designated or quasi-endowmer | ıτ ► | | % | | | | | |
| b | Permanent endowment ▶ | % | 07 | | | | | | |
| C | | | | 00/ | | | | | |
| 20 | The percentages in lines 2a, 2b, and 2 Are there endowment funds not in the | | | | zation the | at are hold | and ad | ministered for t | tho |
| Ja | organization by: | posses | 3011 01 11 | ie organi | Zauon inc | at are nero | and ad | ministered for | Yes No |
| | (i) unrelated organizations | | | | | | | | . 3a(i) |
| | (ii) related organizations | | | | | | | | 3a(ii) |
| b | If "Yes" to 3a(ii), are the related organi | | | | nn Schedi | ule R? | | | 3b |
| 4 | Describe in Part XIII the intended uses | | | | | | | | |
| Pari | | | | | | | | | |
| | Description of property | |) Cost or ot (investme | her basis | (b) Cost o | r other basis ther) | | Accumulated preciation | (d) Book value |
| 1a | Land | | - | | | | A 1880 | | |
| b | Buildings | | | | | | 12 in 15 in 15 in 15 in 15 in 15 in 15 in 15 in 15 in 15 in 15 in 15 in 15 in 15 in 15 in 15 in 15 in 15 in 15 | | |
| c | Leasehold improvements | | | | | | | | |
| ď | Equipment | | | | | 70,014 | | 24,505 | 45,509 |
| e | Other | | | | | . 0,014 | | 24,555 | 73,009 |
| Total. | Add lines 1a through 1e. (Column (d) m | ust_equa | l Form 99 | 90, Part 2 | X, column | (B), line 10 | D(c).) . | • | 45,509 |
| | | | | | | | | | |

| Part VII | Investments—Other Securities | . See Form 990, Part X, | line 12. | |
|--------------------------|---|--------------------------------|---|--------------------------|
| (6 | Description of security or category (including name of security) | (b) Book value | (c) Method of valua Cost or end-of-year ma | |
| (1) Financia | derivatives | | | |
| (2) Closely- | held equity interests | | | |
| | | | | |
| (A) | | | | |
| (B) | · | | | |
| (C) | ····· | | | |
| (D) | | | | |
| (E) (F) | | | | |
| (G) | | | | |
| (H) | | | | |
| (I) | | | | _ |
| | (b) must equal Form 990, Part X, col. (B) line 12.) | | | |
| Part VIII | Investments - Program Related | . See Form 990. Part X | . line 13. | |
| | (a) Description of investment type | (b) Book value | (c) Method of valua | tion. |
| | | | Cost or end-of-year man | |
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| <u>(4)</u> <u>(5)</u> | | | | _ |
| (6) | | | | |
| (7) | | | | |
| (8) | | | | |
| (9) | | | | |
| (10) | | | | |
| | b) must equal Form 990, Part X, col. (B) line 13.) | | | |
| Part IX | Other Assets. See Form 990, Pa | | | |
| | (a |) Description | | (b) Book value |
| _(1) | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| (5) | | | | |
| <u>(6)</u> (7) | | | | |
| (8) | | | | |
| (9) | | | | |
| (10) | | | | |
| | mn (b) must equal Form 990, Part X, co | | . | |
| Part X | Other Liabilities. See Form 990, | | | |
| 1. | (a) Description of liability | (b) Book value | | |
| | income taxes | | | . वैद्याप्त च्या १ के । |
| (2) | | | | |
| (3) | | | } | |
| (4) | | | | |
| (5) (6) | | | { | |
| (7) | | | | |
| (8) | | | | |
| (9) | | | | |
| (10) | | | | |
| (11) | | | | |
| | b) must equal Form 990, Part X, col (B) line 25.) | | | |
| 2. FIN 48 (AS | C 740) Footnote. In Part XIII, provide the to | ext of the footnote to the org | anization's financial statements that rej | oorts the organization's |
| liability for un | certain tax positions under FIN 48 (ASC 74 | 10). Check here if the text of | the footnote has been provided in Part | XIII 🖂 |

| Reconciliation of Revenue per Audited Financial Statement are revenue, gains, and other support per audited financial statements bunts included on line 1 but not on Form 990, Part VIII, line 12: unrealized gains on investments | 2a 2b | ļ | 1 | 4,580,43 |
|--|---|--|---|-----------------------------|
| ounts included on line 1 but not on Form 990, Part VIII, line 12: unrealized gains on investments | 2a 2b | | ⊣ 1 | |
| ated services and use of facilities | 2b | | ⊣ 1 | |
| ated services and use of facilities | | | ⊣ 1 | |
| | | | | |
| | 2c | | <u> </u> | |
| er (Describe in Part XIII.) | 2d | | 1 | |
| | | · · · · · · · | 2e | |
| <u> </u> | | | 3 | 4,580,43 |
| | ĺ | | | 4,000,40 |
| | 4a | , | | |
| · · · · · · · · · · · · · · · · · · · | 4b | | ⊣ 1 | |
| | | <u> </u> | ' | |
| | | | 5 | 4,580,43 |
| | | | er Retur | |
| | | | 11 | 4,567,79 |
| | | | | |
| ated services and use of facilities | 2a | (| | • |
| r vear adjustments | 2b | | 4 | |
| | 2c | | 7 1 | |
| er (Describe in Part XIII.) | 2d | 0 | 1 | |
| , | | | 2e | |
| | | | 3 | 4,567,79 |
| ounts included on Form 990, Part IX, line 25, but not on line 1: | | | | |
| | 4a | d | , | |
| - | 4b | | -} I | |
| lines 4a and 4b | | | 4c | |
| $_{ m II}$ expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line | € 18.) | | 5 | 4.567.79 |
| Supplemental Information | | | | |
| | partact line 2e from line 1 counts included on Form 990, Part VIII, line 12, but not on line 1: content expenses not included on Form 990, Part VIII, line 7b cer (Describe in Part XIII.) Il lines 4a and 4b cal revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line Reconciliation of Expenses per Audited Financial Statem cal expenses and losses per audited financial statements counts included on line 1 but not on Form 990, Part IX, line 25: cated services and use of facilities cer (Describe in Part XIII.) Il lines 2a through 2d counts included on Form 990, Part IX, line 25, but not on line 1: counts included on Form 990, Part IX, line 25, but not on line 1: counts included on Form 990, Part IX, line 25, but not on line 1: counts included on Form 990, Part IX, line 25, but not on line 1: counts included on Form 990, Part IX, line 25, but not on line 1: counts included on Form 990, Part IX, line 25, but not on line 1: counts included on Form 990, Part IX, line 25, but not on line 1: counts included on Form 990, Part IX, line 25, but not on line 1: counts included on Form 990, Part IX, line 25, but not on line 1: counts included on Form 990, Part IX, line 25, but not on line 1: counts included on Form 990, Part IX, line 25, but not on line 1: counts included on Form 990, Part IX, line 25, but not on line 1: counts included on Form 990, Part IX, line 25, but not on line 1: counts included on Form 990, Part IX, line 25, but not on line 1: counts included on Form 990, Part IX, line 25, but not on line 1: counts included on Form 990, Part IX, line 25, but not on line 1: counts included on Form 990, Part IX, line 25, but not on line 1: counts included on Form 990, Part IX, line 25, but not on line 1: counts included on Form 990, Part IX, line 25, but not on line 1: counts included on Form 990, Part IX, line 25, but not on line 1: counts included on Form 990, Part IX, line 25, but not on line 1: counts included on Form 990, Part IX, line 25, but not on line 1: counts included on Form 990, Part IX, line 25, | partact line 2e from line 1 pounts included on Form 990, Part VIII, line 12, but not on line 1: postment expenses not included on Form 990, Part VIII, line 7b der (Describe in Part XIII.) lines 4a and 4b al revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statements al expenses and losses per audited financial statements counts included on line 1 but not on Form 990, Part IX, line 25: parted services and use of facilities ar year adjustments er (Describe in Part XIII.) lines 2a through 2d chract line 2e from line 1 counts included on Form 990, Part IX, line 25, but not on line 1: pounts included on Form 990, Part IX, line 25, but not on line 1: pounts included on Form 990, Part IX, line 25, but not on line 1: pounts included on Form 990, Part IX, line 25, but not on line 1: pounts included on Form 990, Part IX, line 25, but not on line 1: pounts included on Form 990, Part IX, line 25, but not on line 1: pounts included on Form 990, Part IX, line 25, but not on line 1: pounts included on Form 990, Part IX, line 25, but not on line 1: pounts included on Form 990, Part IX, line 25, but not on line 1: pounts included on Form 990, Part IX, line 25, but not on line 1: pounts included on Form 990, Part IX, line 25, but not on line 1: pounts included on Form 990, Part IX, line 25, but not on line 1: pounts included on Form 990, Part IX, line 25, but not on line 1: pounts included on Form 990, Part IX, line 25, but not on line 1: pounts included on Form 990, Part IX, line 25, but not on line 1: pounts included on Form 990, Part IX, line 25, but not on line 1: pounts included on Form 990, Part IX, line 25, but not on line 1: pounts included on Form 990, Part IX, line 25, but not on line 1: pounts included on Form 990, Part IX, line 25, but not on line 1: pounts included on Form 990, Part IX, line 25, but not on line 1: pounts included on Form 990, Part IX, line 25, but not on line 1: pounts included on Form 990, Part IX, line 25, but no | Atract line 2e from line 1 Dounts included on Form 990, Part VIII, line 12, but not on line 1: Destruct expenses not included on Form 990, Part VIII, line 7b Destruct expenses not included on Form 990, Part VIII, line 7b Destruct expenses not included on Form 990, Part VIII, line 7b Destruct expenses and 4b Destruct lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statements With Expenses per all expenses and losses per audited financial statements Dounts included on line 1 but not on Form 990, Part IX, line 25: Destruct expenses and use of facilities Destruct line 2e from line 1 Dounts included on Form 990, Part IX, line 25, but not on line 1: Destruct lines 2a through 2d Destruct line 2e from line 1 Destruct expenses not included on Form 990, Part VIII, line 7b Destruct expenses not included on Form 990, Part VIII, line 7b Destruct expenses not included on Form 990, Part VIII, line 7b Destruct expenses not included on Form 990, Part VIII, line 7b Destruct expenses not included on Form 990, Part VIII, line 7b Destruct expenses not included on Form 990, Part VIII, line 7b Destruct expenses not included on Form 990, Part I, line 18.) | Attract line 2e from line 1 |

assuming the taxing authority has full knowledge of all information. If the tax position does not meet the more likely than not recognition

threshold, the benefit of the tax position is not recognized in the financial statements

The Organization recorded no assets or liabilities for uncertain tax positions or unrecognized tax benefits. Federal returns for tax years

2009 and beyond remain subject to examination by the Internal Revenue Service

| Schedule D (For | m 990) 2012 | Page 🕻 |
|-----------------|--------------------------------------|------------|
| Part XIII | Supplemental Information (continued) | |
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SCHEDULE! (Form 990)

Department of the Treasury

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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OMB No 1545-0047

Open to Public Inspection

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, <u>%</u>□ (h) Purpose of grant or assistance Employer identification number √ Yes 39-1453475 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation (book, FMV, appraisal, other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (d) Amount of cash (e) Amount of nongrant cash assistance (c) IRC section if applicable General Information on Grants and Assistance the selection criteria used to award the grants or assistance? North Central Wisconsin Workforce Development Board **(b)** E(N 1 (a) Name and address of organization or government Name of the organization Part II Part

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Schedule I (Form 990) (2012)

Cat. No 50055P

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Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

Enter total number of other organizations listed in the line 1 table

8 8

(12)

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

| Schedule I (Form 990) (2012) Part III Grants and Other Assistance to Individuals in the University of the Universe of the Uni | | nited States. Com | plete if the organiz | ation answered "Yes" to | Page 2 the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. |
|--|--------------------------|--------------------------|-----------------------------------|---|---|
| (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non-cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of non-cash assistance |
| 1 Education assistance for participants in WDA | 1797 | 1,141,961 | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |
| 9 | | | | | |
| 7 | | | | | |
| Part IV Supplemental Information. Complete this part information. | 1 — | ide the information | required in Part I, | line 2, Part III, column (b) | to provide the information required in Part I, line 2, Part III, column (b), and any other additional |
| | | | | | |
| Part I. Line 2. Each recipient is assigned a case manager Case managers are charged with monitoring the recipients on a day-to-day basis. Case managers and their participant files | Case managers are | charged with monitori | ing the recipients on a | day-to-day basis Case man | agers and their participant files |
| are monitored, at least yearly, by the North Central Wisconsin Workforce Development Board staff | onsin Workforce Deve | lopment Board staff | | | |
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| | | | | | Schedule I (Form 990) (2012) |

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

(10)

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

Employer Identification number North Central Wisconsin Workforce Development Board 39-1453475 Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. (d) Corrected? (b) Relationship between disqualified person and 1 (a) Name of disqualified person (c) Description of transaction organization Yes No (1)(2)(3) (4)(5)(6)Enter the amount of tax incurred by the organization managers or disqualified persons during the year 2 \$ Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Part II Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22. (a) Name of interested person (b) Relationship (c) Purpose of (d) Loan to or (e) Onginal (f) Balance due (g) in default? (h) Approved (i) Written with organization loan from the by board or principal amount agreement? organization? committee? To From Yes No Yes No (1)(2)(3)(4)(5)(6)(7)(8) (9)(10)Total Grants or Assistance Benefiting Interested Persons. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (b) Relationship between interested (a) Name of interested person (c) Amount of assistance (d) Type of assistance (e) Purpose of assistance person and the organization (1) (2)(3)(4)(5) (6)(7) (8)(9)

| Part IV Business Transactions Invo | olving Interested Persons. answered "Yes" on Form 99 | 00, Part IV, line 28a, | 28b, or 28c. | | |
|--|---|---------------------------|--|-------------|-------------------------------|
| (a) Name of interested person | (b) Relationship between interested person and the organization | (c) Amount of transaction | (d) Description of transaction | organi | aring of zation's nues? |
| | | | | Yes | No |
| (1) Kiesling, Cindy | Director | 1,308,372 | Subcontractor | | 1 |
| (2) Christiansen, Marcia | Director | | Subcontractor | | 1 |
| (3) Weyers/Borowicz | Director | | Client Education/Training | | 1 |
| (4) Willfahrt, Connie | Director | | Client Education/Training | | 1 |
| (5) Burmaster, Elizabeth | Director | | Client Education/Training | | / |
| (6) Sobczak, Lisa | Director | 19,935 | Contractual - temp services | | ✓ |
| (7) | | | | | - |
| (8) (9) | | | | | |
| (10) | | | | | |
| Complete this part to provide | additional information for re | esponses to question | ns on Schedule L (see instruction | ons). | |
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SCHEDULE 0 (Form 990 or 990-EZ)

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.

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

Inspection Employer identification number

| North Central Wisconsin Workforce Development Board | 39-1453475 |
|--|-----------------------------------|
| Part VI. Section A. Line 1a North Central Wisconsin Workforce Development Board meets quarterly an | |
| Executive Committee, which meets monthly, to act on behalf of the full board. The Executive Committee | |
| North Central Wisconsin Workforce Development Board, when a seat on the Executive Committee is vi | acant, a nomination process is |
| followed to fill the seat | |
| | |
| Part VI, Section B, Line 11b: The 990 and all accompanying schedules were prepared by Finance Direct | tor John Cokl and subsequently |
| submitted to our independent auditor for review. Upon satisfactory review, the 990 and all schedules w | ere made available to all members |
| of the Executive Committee prior to submission to the Internal Revenue Service | |
| | |
| Part VI; Section B, Line 12c Board members are required to fill out a conflict of interst form yearly, mo | nitoring is done by verifying the |
| completed form is on file. When a conflict of interest arises, the conflicted board member abstains from | the vote and that abstention is |
| recorded accordingly in the minutes that are taken at each meeting to ensure integrity | |
| <u></u> | |
| Part VI, Section B, Line 15. The North Central Wisconsin Workforce Development Board contracted with | n an independent wage and benefit |
| consultant to validate the appropriateness of pay for all employees NCWWDB also frequently participa | tes in wage and benefit surveys |
| | |
| Part VI, Section C. Line 19 Bylaws, conflict of interest forms, etc. are made available to the public upor | request North Central Wisconsin |
| Workforce Development Board also considers privacy, trade secrets, and other factors in determining t | he release of information. At all |
| times, North Central Wisconsin Workforce Development Board will abide by all applicable laws | |
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Independent Auditor's Report

Board of Directors North Central Wisconsin Workforce Development Board, Inc. Stevens Point, Wisconsin

Report on Financial Statements

We have audited the accompanying financial statements of North Central Wisconsin Workforce Development Board, Inc. (a nonprofit organization) which comprise the statements of financial position as of June 30, 2013 and 2012 and the related statements of activities and cash flows for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audit in accordance with auditing standards generally accepted in the United States and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of North Central Wisconsin Workforce Development Board, Inc. as of June 30, 2013 and 2012, and the changes in its net assets and its cash flows, for the years then ended in conformity with accounting principles generally accepted in the United States.

Other Matters

Supplementary Information

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The accompanying schedule of expenditures of federal awards which is required by U.S. Office of Management and Budget Circular A-133, Audits of States, Local Governments, and Non-Profit Organizations, and the State Single Audit Guidelines, issued by the Wisconsin Department of Administration, is presented for purposes of additional analysis, and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements Such information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States. In our opinion, the schedule of expenditures of federal awards is fairly stated in all material respects in relation to the financial statements as whole.

Other Reporting Required by Government Auditing Standards

In accordance with Government Auditing Standards, we have also issued our report dated December 18, 2013, on our consideration of North Central Wisconsin Workforce Development Board, Inc.'s internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with Government Auditing Standards in considering North Central Wisconsin Workforce Development Board, Inc.'s internal control over financial reporting and compliance.

Wiggle LLP
Wipfli LLP

December 18, 2013 Wausau, Wisconsin

Statements of Financial Position June 30, 2013 and 2012

| Assets | 2013 | | 2012 |
|--------------------------------------|---------------|----|---------|
| Current assets: | | | |
| Cash | \$ 50,571 | \$ | 101,920 |
| Accounts receivable | 545 | | 920 |
| Grants and contracts receivable | 364,231 | _ | 390,333 |
| Total current assets | 415,347 | | 493,173 |
| Property and equipment, net | 45,509 | | 59,512 |
| TOTAL ASSETS | \$ 460,856 | \$ | 552,685 |
| Liabilities and Net Assets | | | |
| Current liabilities: | | | |
| Accounts payable | \$ 287,070 | \$ | 417,628 |
| Accrued payroll and related expenses | 15,855 | | 18,613 |
| Deferred revenue | 4,158 | | 6,006 |
| Grant funds received in advance | 32,772 | | 2,068 |
| Total liabilities | 339,855 | | 444,315 |
| Net assets: | | | |
| Unrestricted | 75,492 | | 48,858 |
| Temporarily restricted | 45,509 | | 59,512 |
| Total net assets | 121,001 | | 108,370 |
| TOTAL LIABILITIES AND NET ASSETS | \$ 460,856 | \$ | 552,685 |

Statements of Activities

Years Ended June 30, 2013 and 2012

| | | 2013 | | | | |
|--------------------------------------|-----|-------------|----|-----------|----|-----------|
| | | Temporarily | | | | |
| | Uni | restricted | Re | estricted | | Total |
| Revenue: | | | | | | |
| Grant revenue | \$ | 4,526,264 | \$ | 0 | \$ | 4,526,264 |
| Other income/contributions | | 54,166 | | 0 | | 54,166 |
| Net assets released from restriction | | 14,003 | (| 14,003) | | 0 |
| Total revenue | | 4,594,433 | (| 14,003) | | 4,580,430 |
| Expenses: | | | | | | |
| Program activities: | | | | | | |
| Job training and employment - Adult | | 3,544,055 | | 0 | | 3,544,055 |
| Other programs | | 632,067 | | 0 | | 632,067 |
| Total program expenses | | 4,176,122 | | 0 | | 4,176,122 |
| Management and general | | 391,677 | | 0 | | 391,677 |
| Total expenses | | 4,567,799 | | 0 | | 4,567,799 |
| Change in net assets | | 26,634 | (| 14,003) | | 12,631 |
| Net assets - Beginning of year | _ | 48,858 | | 59,512 | | 108,370 |
| Net assets - End of year | \$ | 75,492 | \$ | 45,509 | \$ | 121,001 |

See accompanying notes to financial statements.

| | | | 2012 | | | |
|--------------------------------------|--------------|-------------|-----------|------|-----------|--|
| | | Temporarily | | | arily | |
| | Unrestricted | <u>R</u> | estricted | | Total | |
| Revenue: | | | | | | |
| Grant revenue | \$ 4,351,915 | \$ | 70,014 | \$ | 4,421,929 | |
| Other income/contributions | 21,853 | | 0 | | 21,853 | |
| Net assets released from restriction | 10,502 | (| 10,502) | | 0_ | |
| Total revenue | 4,384,270 | | 59,512 | | 4,443,782 | |
| Expenses: | | | | | | |
| Program activities: | | | | | | |
| Job training and employment - Adult | 3,547,884 | | 0 | | 3,547,884 | |
| Other programs | 490,456 | | 0 | | 490,456 | |
| Total program expenses | 4,038,340 | | 0 | | 4,038,340 | |
| Management and general | 344,998 | | 0 | | 344,998 | |
| Total expenses | 4,383,338 | | 0 | | 4,383,338 | |
| Change in net assets | 932 | | 59,512 | | 60,444 | |
| Net assets - Beginning of year | 47,926 | | 0 | | 47,926 | |
| rect assets - Deginning of year | 77,920 | | | | 71,720 | |
| Net assets - End of year | \$ 48,858 | \$ | 59,512 | _\$_ | 108,370 | |

Statements of Cash Flows Years Ended June 30, 2013 and 2012

| | | 2013 | 2012 |
|---|----|------------|----------|
| Increase (decrease) in cash: | | | |
| Cash flows from operating activities: | | | |
| Change in net assets | \$ | 12,631 \$ | 60,444 |
| Adjustments to reconcile change in net assets | | | |
| to net cash (used in) provided by operating activities: | | | |
| Depreciation | | 14,003 | 10,502 |
| Donated equipment | | 0 (| 70,014) |
| Changes in operating assets and liabilities: | | | |
| Grants and contracts receivable | | 26,102 | 758,861 |
| Accounts receivable | | 375 | 680 |
| Accounts payable | (| 130,558) (| 471,736) |
| Accrued payroll and related expenses | (| 2,758) | 7,680 |
| Deferred revenue | (| 1,848) | 2,387 |
| Grant funds received in advance | | 30,704 (| 287,570) |
| Net cash (used in) provided by operating activities | (| 51,349) | 11,234 |
| Change in cash | (| 51,349) | 11,234 |
| Cash - Beginning of year | · | 101,920 | 90,686 |
| Cash - End of year | \$ | 50,571 \$ | 101,920 |
| Supplemental schedule of noncash activity: | _ | | |
| Donated equipment | \$ | 0 \$ | 70,014 |

Notes to Financial Statements

Note 1 Summary of Significant Accounting Policies

Nature of Operations

North Central Wisconsin Workforce Development Board, Inc. (the "Organization") was organized as a nonprofit corporation in 1984. The Organization's purpose is to supply funding for workforce development programs that provide educational and vocational training to youth, adults, and disabled workers in the workforce development area (WDA). The Organization is primarily supported through federal and state government grants. Approximately 96% of the Organization's grant revenue is passed through from the State of Wisconsin, Department of Workforce Development (DWD) for both the years ended June 30, 2013 and 2012.

Basis of Presentation

All financial statements are prepared using the accrual basis of accounting in accordance with accounting principles generally accepted in the United States.

Classification of Net Assets

Net assets and revenue, expenses, gains, and losses are classified based on the existence or absence of donor-imposed restrictions. Accordingly, net assets of the Organization and changes therein are classified and reported as follows:

Unrestricted Net Assets – Net assets that are not subject to donor-imposed stipulations or where donor-imposed stipulations are met in the year of the contribution.

Temporarily Restricted Net Assets – Net assets subject to donor-imposed stipulations that may or may not be met, either by actions of the Organization and/or the passage of time. When a restriction expires, temporarily restricted net assets are transferred to unrestricted net assets and reported in the statement of activities as net assets released from restriction.

Permanently Restricted Net Assets – Net assets subject to donor-imposed stipulations that they be maintained permanently by the Organization. Generally, the donors of these assets permit the Organization to use all or part of the income earned on any related investments for general or specific purposes. Currently, the Organization does not have any permanently restricted net assets.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

Notes to Financial Statements

Note 1 Summary of Significant Accounting Policies (Continued)

Income Tax Status

The Organization is a tax-exempt organization as described in Section 501(c)(3) of the Internal Revenue Code and is exempt from federal income taxes on related income pursuant to Section 501(a) of the Internal Revenue Code. The Organization is also exempt from Wisconsin income taxes.

In order to account for any uncertain tax positions, ASC Topic 740-10, *Accounting for Uncertainty in Income Taxes*, requires an organization to assess whether it is more likely than not that a tax position will be sustained upon examination of the technical merits of the position, assuming the taxing authority has full knowledge of all information. If the tax position does not meet the more likely than not recognition threshold, the benefit of the tax position is not recognized in the financial statements.

The Organization recorded no assets or liabilities for uncertain tax positions or unrecognized tax benefits. Federal returns for tax years 2009 and beyond remain subject to examination by the Internal Revenue Service.

Cost Allocation

Joint costs are allocated to benefiting programs using various allocation methods depending on the type of joint cost being allocated. Joint costs are those costs incurred for the common benefit of all organization programs that cannot be readily identified with a final cost objective.

Revenue Recognition

Contributions restricted by the donor are reported as increases in unrestricted net assets if the restrictions expire in the fiscal year in which the contributions are recognized. All other donor-restricted contributions are reported as increases in temporarily or permanently restricted net assets depending on the nature of the restrictions. When a restriction expires, temporarily restricted net assets are reclassified as unrestricted net assets and reported in the statement of activities as contributions released from restriction.

- Conditional promises to give-are recognized-only when the conditions-on which they depend are substantially met and the promises become unconditional.

Notes to Financial Statements

Note 1 Summary of Significant Accounting Policies (Continued)

Revenue Recognition (Continued)

Grants are either recorded as contributions or exchange transactions based on criteria contained in the grant award.

A. Grant Awards that are Contributions

Grants that qualify as contributions are recorded as invoiced to the funding sources. Revenue is recognized in the accounting period when the related expenses are incurred. Amounts received in excess of expenses are reflected as grant funds received in advance.

B. Grant Awards that are Exchange Transactions

Exchange transactions reimburse based on a predetermined rate for services performed. The revenue is recognized in the period the service is performed.

Property and Equipment

Property purchased is capitalized at cost, or fair market value if donated, and depreciated over its useful life using the straight-line method. The Organization capitalizes property with a cost of \$5,000 or more and a useful life of over one year.

The Organization has adopted a policy of imposing a time restriction on donated assets. Donated property and equipment are recorded as restricted support. As the property and equipment are depreciated, the temporarily restricted net assets are released from restriction and reported in the statement of activities as net assets released from restriction.

Subsequent Events

Subsequent events have been evaluated through December 18, 2013, which is the date the financial statements were available to be issued.

Note 2 __Concentration of Credit Risk __

The Organization maintains cash balances at two financial institutions. Accounts at these financial institutions are insured by the Federal Deposit Insurance Corporation (FDIC) up to \$250,000. At times during the year, the bank balance may have been in excess of the FDIC coverage. Management believes these financial institutions have strong credit rating and credit risk related to the deposits is minimal.

Notes to Financial Statements

Note 3 Grants and Contracts Receivable

Grants and contracts receivable represent amounts due from the various funding sources as follows:

| | 2013 | | 2012 |
|---|-------------------------|-----------|-------------------|
| Wisconsin Department of Workforce Development Wisconsin Department of Corrections | \$ 352,379 11,852 | \$ | 378,320 12,013 |
| Grants and contracts receivable | \$ _364,231 | \$_ | 390,333 |

Note 4 Property and Equipment

A summary of property and equipment as of June 30, 2013 and 2012 is as follows:

| | | 2013 | | 2012 |
|-----------------------------|----|----------------|----|---------------|
| Equipment | \$ | 70,014 | \$ | 85,011 |
| Accumulated depreciation | (| 24,505) | (_ | 25,499) |
| Property and equipment, net | \$ | 4 <u>5,509</u> | | <u>59,512</u> |

Note 5 Temporarily Restricted Net Assets

The Organization received a donation of equipment which is restricted by the donor for specific use by the Organization. The Organization has a temporarily restricted net asset balance of \$45,509 and \$59,512 for the years ended June 30, 2013 and 2012, respectively.

Note 6 Related Parties

The Organization's Board of Directors consists of management from both private and public sectors that perform job-related services. The Organization has entered into various contracts and awards with several of these agencies. For the years ended June 30, 2013 and 2012, the amount reimbursed to related parties was \$2,534,529 and \$2,694,174, respectively. As of June 30, 2013 and 2012, the Organization had approximately \$197,751 and \$265,228, respectively, of accounts payable due to related parties.

Note 7 Concentration of Revenue

The vast majority of the Organization's funding is received from the State of Wisconsin Department of Workforce Development (DWD) through federal grants from the United States Department of Labor. As such, significant changes or reduction in available funds could adversely affect the Organization. However, the Organization has no reason to believe these funds will cease in the foreseeable future

Notes to Financial Statements

Note 8 Retirement Plan

Beginning February 1, 2012, the Organization adopted a 401(k) plan (the "Plan"), as defined in the Internal Revenue Service Code. Employees are eligible if they are 21 years of age and have completed one year of service. Employee contributions are vested at the time an employee became eligible to participate in the plan. Employer contributions vest over a six-year period. The Organization has the option for a discretionary employee match contribution and to make discretionary non-elective contributions. This decision will be made by the Board of Directors on the last day of the plan year. Contributions to the 401(k) plan totaled \$16,159 and \$0 for the years ended June 30, 2013 and 2012 respectively.

The Organization had a defined contribution pension plan that covered all employees who worked a minimum of 30 hours per week. Employees were eligible after 12 months of service. Contributions vested at the time an employee became eligible to participate in the plan. The employer contribution was 7% of eligible wages. This plan ended on December 20, 2011. Contributions to the plan totaled \$8,083 for the year ended June 30, 2012.

Note 9 Operating Leases

The Organization leases various facilities and equipment for operation of its programs. Rent expense for the years ended June 30, 2013 and 2012, was \$47,368 and \$45,270, respectively. Future minimum lease payments on leases having terms beyond June 30, 2013, are as follows:

| 2014 2015 2016 2017 2018 | \$ 58,754 57,949 57,877 29,308 1,182 |
|--------------------------------------|---|
| Total | \$ 205,070 |

Note 10 Grant Awards

At June 30, 2013, the Organization had received future funding commitments under various grants of approximately \$3,423,000. Of this amount, approximately \$2,463,000 is committed to subcontractors for future-services. These commitments are not recognized in the accompanying financial statements as receivables and revenue, as they are conditional awards.

Supplementary Information

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North Central Wisconsin Workforce Development Board, Inc.

Schedule of Expenditures of Federal Awards Year Ended June 30, 2013

| | | Expenditures |
|---------|----------|--------------|
| Program | or Award | Amount |
| | Program | Period |
| | Grantor | Agency |
| | Program | Name |
| - | Grant | Number |
| | CFDA | Number |

ASSISTANCE PROGRAMS AS IDENTIFIED IN THE CATALOG OF FEDERAL DOMESTIC ASSISTANCE

| DEPART | DEPARTMENT OF LABOR | OR | | | | | |
|--------|---------------------|----|--|---------|------------------------------|------------|------------|
| 17.258 | Log #3362 | | Title I Adult | DWD-DET | 07/01/11-06/30/13 \$ 697,365 | \$ 697,365 | \$ 187,456 |
| 17.258 | Log #3435 | _ | Title I Adult | DWD-DET | 07/01/12-06/30/14 | 656,404 | 506,911 |
| 17.258 | Log #3404 | - | Disability Employment Initiative | DWD-DET | 02/01/12-09/30/14 | 169,039 | 40,766 |
| | | - | Subtotal 17.258 | | | | 735,133 |
| | | | | | | | |
| 17.259 | Log #3365 | | Title I Administration | DWD-DET | 04/01/11-06/30/13 | 291,844 | 120,871 |
| 17.259 | Log #3416 | _ | Title I Administration | DWD-DET | 04/01/12-06/30/14 | 277,443 | 146,520 |
| 17.259 | Log #3433 | _ | Industry Partnership Convening | DWD-DET | 04/01/12-04/30/13 | 25,000 | 25,000 |
| 17.259 | Log #3363 | - | Title I Youth | DWD-DET | 04/01/11-06/30/13 | 823,019 | 116,061 |
| 17.259 | Log #3410 | | Title I Youth | DWD-DET | 04/01/12-06/30/14 | 756,799 | 699,149 |
| 17.259 | Log #3433 | - | Rise Regional Collaboration | DWD-DET | 04/01/12-04/30/13 | 4,000 | 4,000 |
| | | - | Subtotal 17.259 | | | | 1,111,601 |
| 17.278 | Log # 3364 | - | Title I Dislocated Worker | DWD-DET | 07/01/11-06/30/13 | 1,106,210 | 344,352 |
| 17.278 | Log # 3436 | | Title I Dislocated Worker | DWD-DET | 07/01/12-06/30/14 | 1,083,779 | 575,824 |
| 17.278 | Log #3474 | - | Title I State Rapid Response | DWD-DET | 07/01/12-06/30/13 | 425,000 | 342,224 |
| | | - | Subtotal 17.278 | | | | 1,262,400 |
| | | - | Subtotal 17.258, 17.259, 17.278 -Cluster | | | | 3,109,134 |
| | | | | | | | |

Schedule of Expenditures of Federal Awards Year Ended June 30, 2013

| | | | | | Program | |
|------------------|-----------------------------------|---|----------------|---------------------------|-----------|--------------|
| CFDA | Grant | Program | Grantor | Program | or Award | |
| Number | Number | Name | Agency | Period | Amount | Expenditures |
| DEPARTN | DEPARTMENT OF LABOR (Continued) | (p) | | | | |
| 17.277 | N/A | NEG - NewPage Whiting Paper Mill | DWD-DET | 03/01/11-12/31/12 | 911,502 | 259,343 |
| 17.277 | Log #3447 | National Emergency Grant - OJT | DWD-DET | 07/01/12-12/31/13 | 70,000 | 29,121 |
| 17.277 | Log #3432 | National Emergency Grant - 38 | DWD-DET | 06/01/12-06/30/14 | 1,778,846 | 596,011 |
| | | Subtotal 17.277 | | | | 884,475 |
| 17.277 - | | | | | | |
| ARRA | DWAWIA1006NEG-WI-32 ARRA-National | ARRA-National Emergency Grant | DWD-DET | DWD-DET 01/01/10-06/30/14 | 1,488,327 | 191,273 |
| 17.207 | Log #3404 | Disability Employment Initiative | DWD-DET | 02/01/12-9/30/14 | 169,039 | 40,766 |
| 17.268 | NWCEPI | H1B Technical Skills Training Grant | NW CEP | 04/02/12-06/30/16 | 340,088 | 69,974 |
| 17.275 - ARRA | SGA/DFA PY-08-20 | ARRA Sector Alliance for the Green Economy (SAGE) | DWD-DET | 01/01/11-05/31/13 | 302,470 | 121,879 |
| 17.283 | 12-527-2013 | Workforce Innovation Grant | WDBSCW | 08/01/12-06/30/15 | 218,000 | 50,210 |
| Total feder | Total federal assistance | | | | | \$ 4,467,711 |

See Independent Auditor's Report.

See accompanying notes to the schedule of expenditures of federal awards and other financial assistance.

Notes to Schedule of Expenditures of Federal Awards and Other Financial Assistance

Note 1 Basis of Presentation

The accompanying schedule of expenditures of federal awards and other financial assistance includes the federal grant activity of North Central Wisconsin Workforce Development Board, Inc. under programs of the federal government for the year ended June 30, 2013. The information in this schedule is presented in accordance with the requirements of the Office of Management and Budget (OMB) Circular A-133, Audits of States, Local Governments, and Non-Profit Organizations. Because the schedule presents only a selected portion of the operations of North Central Wisconsin Workforce Development Board, Inc., it is not intended to and does not present the financial position, changes in net assets or cash flows of North Central Wisconsin Workforce Development Board, Inc.

Note 2 General

Expenditures reported on the Schedule are reported on the accrual basis of accounting. Such expenditures are recognized following the cost principles contained in OMB Circular A-122, Cost Principles for Non-Profit Organizations, wherein certain types of expenditures are not allowable or are limited as to reimbursement. Pass-through entity identifying numbers are presented where available.

Note 3 Subcontracted Services

Subcontracted services for the cluster CFDA #17.258, 17.259, and 17.278 totaled \$2,462,388. Subcontracted services for CFDA #17.277 and 17.277-ARRA totaled \$988,204. Subcontracted services for CFDA # 17.275-ARRA totaled \$80,065.



Independent Auditor's Report on Internal Control Over Financial Reporting and on Compliance and Other Matters

Board of Directors North Central Wisconsin Workforce Development Board, Inc. Stevens Point, Wisconsin

We have audited, in accordance with the auditing standards generally accepted in the United States and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States, the financial statements of North Central Wisconsin Workforce Development Board, Inc., which comprise the statement of financial position as of June 30, 2013, and the related statements of activities, and cash flows for the year then ended, and the related notes to the financial statements, and have issued our report thereon dated December 18, 2013.

Internal Control Over Financial Reporting

In planning and performing our audit, we considered North Central Wisconsin Workforce Development Board, Inc.'s internal control over financial reporting (internal control) to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of North Central Wisconsin Workforce Development Board, Inc.'s internal control. Accordingly, we do not express an opinion on the effectiveness of North Central Wisconsin Workforce Development Board, Inc.'s internal control.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent or detect and correct misstatements on a timely basis. A material weakness is a deficiency, or combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented or detected and corrected on a timely basis. A significant deficiency is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of the internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be deficiencies, significant deficiencies or material weaknesses. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

Compliance and Other Matters

As part of obtaining reasonable assurance about whether North Central Wisconsin Workforce Development Board, Inc.'s financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit and, accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

Purpose of this Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the entity's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the entity's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Wipfli LLP

December 18, 2013 Wausau, Wisconsin

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Independent Auditor's Report on Compliance for Each Major Federal Program and on Internal Control Over Compliance

Board of Directors North Central Wisconsin Workforce Development Board, Inc. Stevens Point, Wisconsin

Report on Compliance for Each Major Federal Program

We have audited North Central Wisconsin Workforce Development Board, Inc.'s compliance with the types of compliance requirements described in the U.S. Office of Management and Budget (OMB) Circular A-133 Compliance Supplement, and the State of Wisconsin Single Audit Guidelines; issued by the state of Wisconsin Department of Administration, that could have a direct and material effect on each of its major federal programs for the year ended June 30, 2013. North Central Wisconsin Workforce Development Board, Inc.'s major federal and state programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

Management's Responsibility for Compliance

Management of North Central Wisconsin Workforce Development Board, Inc. is responsible for compliance with the requirements of laws, regulations, contracts, and grants applicable to each it's federal and state programs.

Auditor's Responsibility

Our responsibility is to express an opinion on compliance for each of North Central Wisconsin Workforce Development Board, Inc. major federal and state programs based on our audit of the types of compliance requirements referred to above. We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States; the standards applicable to financial audits contained in Government Auditing Standards, issued by the Comptroller General of the United States; and OMB Circular A-133, Audits of States, Local Governments, and Non-Profit Organizations and the State of Wisconsin Single Audit Guidelines, issued by the State of Wisconsin Department of Administration. Those standards and OMB Circular A-133 require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance with the types of compliance requirements referred to above that could have a direct and material effect on a major federal and state program occurred. An audit includes examining, on a test basis, evidence about North Central Wisconsin Workforce Development Board, Inc. compliance with those requirements and performing such other procedures as we considered necessary in the circumstances.

We believe that our audit provides a reasonable basis for our opinion on compliance for each major federal and state program. However, our audit does not provide a legal determination of North Central Wisconsin Workforce Development Board, Inc.'s compliance with those requirements.

Opinion

In our opinion, North Central Wisconsin Workforce Development Board, Inc. complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major federal and state programs for the year ended June 30, 2013.

Report on Internal Control Over Compliance

Management of North Central Wisconsin Workforce Development Board, Inc. is responsible for establishing and maintaining effective internal control over compliance ("internal control") with the types of compliance requirements referred to above. In planning and performing our audit of compliance, we considered North Central Wisconsin Workforce Development Board, Inc.'s internal control with the types of requirements that could have a direct and material effect on a major federal or state program to determine the auditing procedures that are appropriate in the circumstances for the purpose of expressing our opinion on compliance for each major federal and state program and to test and report on internal control in accordance with OMB Circular A-133 and the *State of Wisconsin Single Audit Guidelines*, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of North Central Wisconsin Workforce Development Board, Inc.'s internal control.

A deficiency in internal control exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal or state program on a timely basis. A material weakness in internal control over compliance is a deficiency, or combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal or state program will not be prevented, or detected and corrected, on a timely basis. A significant deficiency in internal control over compliance is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal or state program that is less severe than a material weakness in internal control, yet important enough to merit the attention of those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over compliance that might be deficiencies, significant deficiencies, or material weaknesses. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses, as defined above. However, material weaknesses may exist that have not been identified.

The purpose of this report is solely to describe the scope of our testing of internal control and the results of that testing based on the requirements of OMB Circular A-133. Accordingly, this report is not suitable for any other purpose.

Wipfli LLP

December 18, 2013 Wausau, Wisconsin

Schedule of Findings and Questioned Costs

A. Summary of Auditor's Results

- 1. The auditor's report expresses an unmodified opinion on the financial statements of North Central Wisconsin Workforce Development Board, Inc.
- 2. No significant deficiencies relating to the audit of the financial statements are reported in the Independent Auditor's Report on Internal Control Over Financial Reporting and on Compliance and Other Matters.
- 3. No instances of noncompliance material to the financial statements of North Central Wisconsin Workforce Development Board, Inc. were disclosed during the audit.
- 4. No significant deficiencies were disclosed during the audit of the major federal programs as reported in the Independent Auditor's Report on Compliance for Each Major Federal Program and on Internal Control Over Compliance.
- 5. The auditor's report on compliance for the major federal award programs for North Central Wisconsin Workforce Development Board, Inc. expresses an unmodified opinion.
- 6. There were no audit findings relative to the major federal award programs for North Central Wisconsin Workforce Development Board, Inc.
- 7. The programs tested as a major federal and state programs were the Department of Labor:
 - CFDA#17.275-ARRA ARRA Sector Alliance for the Green Economy (SAGE)
 - CFDA#17.277 National Emergency Grant
 - CFDA#17.277-ARRA ARRA National Emergency Grant
- 8. The threshold for distinguishing Types A and B programs was \$300,000.
- 9. North Central Wisconsin Workforce Development Board, Inc. was determined to be a low-risk auditee.
- B. Findings Financial Statements Audit

Finding:

None

C. - - Findings and Questioned Costs – Major Federal Award Programs Audit

Questioned Costs:

None

Finding:

None

D. Prior Year Findings

None

Schedule of Findings and Questioned Costs

| E. | Other Issues |
|----|--------------|
| | |

1. Does the auditor's report or the notes to the financial statements include disclosure with regard to substantial doubt as to the auditee's ability to continue as a going concern?

No

- 2. Does the audit report show audit issues (i.e., material noncompliance, nonmaterial noncompliance, questioned costs, material weakness, significant deficiency, management letter comment, excess revenue, or excess reserve) related to grants/contracts with funding agencies that require audits to be in accordance with the Wisconsin State Single Audit Guidelines:
 - a. Department of Workforce Development

No

3. Was a management letter or other document conveying audit comments issued as a result of this audit?

No

4. Name and signature of partner in charge

1/4

5. Date of report

December 18, 2013