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Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

benefit trust or private foundation)

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

2012

Open to Public Inspection

A F	or the	2012 calendar year, or tax year beginning $SEP I$, 2012 and 0	enaing P	<u>10G 31, 2013</u>					
В с	heck if pplicable	C Name of organization		D Employer identific	cation number				
	Address change Name	BINGHAMTON LOCAL DEVELOPMENT CORPORAT	ION		400505				
<u></u>	_change	Doing Business As		22-2	482535				
L	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	•				
	Termin-	CITY HALL - 4TH FLOOR		607-	772-7161				
	Amendo	City, town, or post office, state, and ZIP code		G Gross receipts \$	465,638.				
	Applica			H(a) Is this a group re					
_	pending			for affiliates?	Yes X No				
		SAME AS C ABOVE		H(b) Are all affiliates incl					
			507						
		mpt status X 501(c)(3)	or 527	7	list (see instructions)				
		e: ► WWW.CITYOFBINGHAMTON.COM	1	H(c) Group exemption					
K Form of organization: X Corporation									
Pa		Summary							
ø		Briefly describe the organization's mission or most significant activities $\ { extbf{TO} \ \ extbf{FU}}$							
Governance	1 1	DEVELOPMENT IN THE CITY OF BINGHAMTON BY	ATTRA	ACTING NEW BI	USINESS,				
Ë	2 (Check this box $lacktriangle$ if the organization discontinued its operations or dispos	sed of more	e than 25% of its net as	sets				
Š	3 1	Number of voting members of the governing body (Part VI, line 1a)		3	14				
Ğ	Į.	Number of independent voting members of the governing body (Part VI, line 1b)		4	14				
δ.		Fotal number of individuals employed in calendar year 2012 (Part V, line 2a)	•	5	0				
ite		Fotal number of volunteers (estimate if necessary)		6	14				
Activities &		Fotal unrelated business revenue from Part VIII, column (C), line 12		7a	0.				
¥			•	7b	0.				
	10	Net unrelated business taxable income from Form 990-T, line 34		··					
Revenue Comment) 	2		Prior Year	Current Year				
Đ.	, 8	Contributions and grants (Part VIII, line 1h)	_	471,454.	389,426.				
9	₽9 F	Program service revenue (Part VIII, line 2g)	66,852.	75,192.					
<u></u>	10 I	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		173,041.	1,020.				
	₩'' `	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	<u> </u>				
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		711,347.	465,638.				
α	13 (Grants and similar amounts paid (Part IX, column (A), lines 1-3)		109,515.	98,727.				
€	1 1-4 1	Benefits paid to or for members (Part & column (A), dine A)	<u></u>	0.	<u> </u>				
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), Firjes 5-10)		0.	<u> </u>				
Expenses	16a l	Professional fundraising fees (Part IX, column A), line-11e)	. [_	0.	0.				
, g	b -	Total fundraising expenses (Part IX, column (D)) Ine 25) →	0.						
û	17 (Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		393,592.	417,151.				
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		503,107.	515,878.				
	i	Revenue less expenses. Subtract line 18 from line 12		208,240.	<50,240.>				
es es	1		B	eginning of Current Year	End of Year				
and	20	Total assets (Part X, line 16)		3,342,941.	3,345,376.				
Ass	21	Total liabilities (Part X, line 26)		37,285.	89,960.				
Net Assets or Fund Balances	22	Net assets or fund balances Subtract line 21 from line 20		3,305,656.	3,255,416.				
壳	art II	Signature Block		3,303,030.	3/233/1101				
		Ities of perjury, I declare that I have examined this return, including accompanying schedule	e and states	nents, and to the best of m	v knowledge and helief it is				
	•	t, and complete. Declaration of <u>pre</u> parer (other than officer) is based on all information of wi			y knowledge and belief, it is				
iiue	, correc	t, and complete. Declar allory of preparer (other than officer) is based on an information of wi	ilicii prepare	i ilas ally kilowicuge.					
		Signature of officer		Date					
Sig					0/2014				
Her	e	Timothy Grippen, President Type or print name and title		1710	3/201				
			T	Date Check	PTIN				
		Print/Type preparer's name Pripa er's signature		e -					
Paid		DUANE SHOEN July / July		01/07/14 self-employ					
	parer	Firm's name CDLM & COMPANY CPA'S, LLP		Firm's EIN	<u> 16-1171627</u>				
Use	Only	Firm's address 401 E. STATE ST., SUITE 500							
		ITHACA, NY 14850		Phone no. 6	07-272-4444				
Ma	y the IF	RS discuss this return with the preparer shown above? (see instructions)		· · · · · · · · · · · · · · · · · · ·	X Yes No				
2320	01 12-1	0-12 LHA For Paperwork Reduction Act Notice, see the separate instruction	ons.		Form 990 (2012)				

	990 (2012) BINGHAMTON LOCAL DEVELOPMENT CORPORATION 22-2482535	Page 2
Pai	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response to any question in this Part III	
1	Briefly describe the organization's mission:	
•	TO FURTHER SUSTAINABLE ECONOMIC DEVELOPMENT IN THE CITY OF BINGHAM?	ron
	BY ATTRACTING NEW BUSINESS, RETAINING AND GROWING ESTABLISHED	
	BUSINESS, BUILDING INDUSTRIAL AND COMMERCIAL CAPACITY, PROMOTING	
	EMPLOYMENT, AND FOSTERING ENTREPRENEURSHIP AND INNOVATION.	
2	Did the organization undertake any significant program services during the year which were not listed on	X No
		NO LALI
	If "Yes," describe these new services on Schedule O.	C==1
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? L	X No
	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 expense	s
	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	405.004	,192.)
70	TO FURTHER SUSTAINABLE ECONOMIC DEVELOPMENT IN THE CITY OF BINGHAM	
	BY ATTRACTING NEW BUSINESS, RETAINING AND GROWING ESTABLISHED BUSINESS	
	BUILDING INDUSTRIAL AND COMMERCIAL CAPACITY, PROMOTING EMPLOYMENT,	
		AND
	FOSTERING ENTREPRENEURSHIP AND INNOVATION.	
		_
	(Code) (Expenses \$ including grants of \$) (Revenue \$	
40	(Code) (Expenses \$	
		_
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$,
		
4d	Other program services (Describe in Schedule O)	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► 435,021.	
		990 (2012)

12-10-12

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," complete Schedule A	1_	<u>X</u>	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X_
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		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	•		
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	ļ
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	├
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			١
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	-	_X_
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			3,7
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е		11e		X
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	X	├
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	l		
	Schedule D, Parts XI and XII	12a	X	+-
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	401		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a		14a		X
b	· · · · · · · · · · · · · · · · · · ·			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	144		x
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	<u> </u>	+~
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	15		X
40	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	13	 	 ^
16	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
47	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		 **
17	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	ļ	Х
40	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	''		1
18	1a and 9a2 if *Voa * aampiata Sahadula G. Part II	18		Х
40	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	<u>'</u>		
19	complete Schedule G, Part III	19		Х
20-	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	 	X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	 	
	11 100 to mile 200, die trie organization attach a copy of no accuracy matricial statements to the fotont.	_	990	(2012

Did the organization answer "Yes" to Part VII, Section A, Inne 3, 4, or 5 about compensation of the organization's current and former officers, directors, frustees, key employees, and highest compensated employees? If "Yes," complete Schedule L, Part IV and former officers, directors, frustees, key employees, and highest compensated employees? If "Yes," complete Schedule L, Part IV and 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 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary penod exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary penod exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary penod exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary penod exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary penod exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary penod exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary penod exception? Did the organization as an on behalf of "issuer for bonds outstanding at any time during the year? Did the organization as an on behalf of "issuer for bonds outstanding at any time during the year? Did the organization as an on behalf of "issuer for bonds outstanding at any time during the year? Did the organization aware that it engaged in an excess benefit transaction with a dagualized person outstanding and that the transaction and any excess professor of the organization of 90 organization and provide a grant or other assistance to an officer, director, trustee, or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of a current or former o				.	
United States on Part IX, column (A), line 17 lf "Yes", complete Schedule I, Parts I and II 2	•	Did the assessment or according to the CE 000 of grants and other accordance to any accordance or accordance in the		Yes	No
Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, counting (i), line 2" II" "Yes," complete Schedule I, Parts and III 20 bit the organization in swer "Yes" to Part IV, gestion 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 bit the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$10,000 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 X If "No", go to line 25 bit the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? bit the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? bit the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? bit the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? bit the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? bit the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? bit the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? bit the organization and an exercise account of the organization and exemption of the organization and exemption of the organization and the organization and exemption of the organization and exemption of the organization and exemption of the organization and that the transaction with a dequalified person in a prior year, and that the transaction has not been reported on any of the organization is the organization and exemption or organization and that the transaction organization and that the transaction has not been reported or any of the organization and part to a business transaction with one organization exemption or any part the exempti	21		21	x	
column (A), line 2° II "Yes," complete Schedule I, Parts I and III 2	~				
Did the organization answer "Yes" to Part VII, Section A, Ine 3.4, or 5 about compensation of the organization's current and former officers, directors, inustees, key employees, and highest compensated employees? If "Yes," complete Schedule L Part IV and 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 Did the organization minetal any proceeds of tax-exempt bonds beyond a temporary penod exception? Did the organization minetal any escrive value of the organization minetal and solicity of the organization maintain an escrive vaccount other than a refunding escrive at any time during the year to defease any tax-exempt bonds? Did the organization minetal any escrive than a refunding escrive at any time during the year? Did the organization as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization as an "on behalf of" issuer for bonds outstanding at any time during the year? Did t	22		22		х
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 24 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the tast 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 fine 25 b Od the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds? Section 501(kgl) and 501(kgl) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part II 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 pinor Forms 990 c7 990-EZ? If "Yes," complete Schedule L, Part II 27b Us the organization provide a grant or other assistance to an officer, director, trustee, key employee, unsubstantial 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 IV 18b A family member of a current or former officer, director, trustee, or key employee, for a family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 29c Did the organization and account of the organization of the organization receive contributions of if "Yes," complete Schedule R, Part IV, If Yes, "complete Schedule R	~~	, , , , , , , , , , , , , , , , , , , ,	-22		
Schedule J 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 Did the organization maintain an escrive account other than a refunding escrive at any time during the year to defease any tax-exempt bonds? Did the organization maintain an escrive account other than a refunding escrive at any time during the year to defease any tax-exempt bonds? Did the organization maintain an escrive account other than a refunding escrive at any time during the year to defease any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization act as an "on behalf of" issuer for bonds outstanding as ofticipally and that the transaction with a disqualified person units and that the transaction where the organization wave that it engaged in an excess benefit transaction with a disqualified person units and that the transaction wave that it engaged in an excess benefit transaction with a disqualified person units and that the transaction wave that it engaged in an excess benefit transaction with a disqualified person units and that the transaction with one of the organization and promptee to disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, fusitee, key employee, substantial contribution or employee hiereof, a grant selection committee member, or to a 35% controlled entity or family member of a current or former officer director, fusitee, or key employee? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash co	23				
24a Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002* If "Yes," answer lines 24b through 24d and complete Schedule K if "No", go to line 25 b Dd the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? C Dd the organization invest an an escreed or tax exempt bonds beyond a temporary period exception? Dd the organization invest an an escreed or tax exempt bonds beyond a temporary period exception? Dd the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year of defease any tax exempt bonds? Dd the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24c 24d 2 24d 2 24d 2 24d 2 24d 3 Section 501(e)3) and 501(e)4) organizations. Did the organization engage 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 is not 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 are the organization provide a grant or other assistance to an officer, director, trustee, expenditude of any of these persons? If "Yes," complete Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): A Current of former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV instructions? If "Yes," complete Schedule M, Part I instructions? If "Yes," complete Schedule M, Part I instructions? If "Yes," complete Schedule M, Part I instructions? If "Yes," complete Schedule B, Part IV, Ins. Instructions? If "Yes,"			22		x
at day of the year, that was ssued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No", go to line 25 b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year of defease any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Did the organization and that the transaction with a disqualified person unit and that the transaction where year? 25d 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 II 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 27 Did the organization prowde a grant or other assistance to an officer, director, trustee, key employee, substantial contribution or employee thereof, agrant selection committee member, or to a 35% controlled entity or family member of any of these persons of "Yes," complete Schedule L, Part IV 28a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a A current or former officer, director, trustee, or key employee or a family member thereof) was an officer, director, trustee, or key employee? If "Yes," complete Schedule II. Part IV 28b A current or former officer, director, trustee, or key emp			23		A
Schedule K If "No", go to line 25 D of the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? D of the organization manutain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? D of the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 601c(k3) and 501c(k4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? I is the organization aware that the engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I I Is the organization has not been reported on any of the organization's prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part I I Is the organization as the end of the organization's tax year? If "Yes," complete Schedule L, Part I I Is 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 I I Is Was the organization provide a grant or other assistance to an officer, director, trustee, key employee, byte 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 IV Instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV Instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, or key employee? If Yes, complete Schedule L, Part IV Instructions for original to receive more than \$25,000 in non-cash contributions? If Yes, complete Schedule L, Part IV Instructions or original thread in the part I Yes, complete Schedule L, Part IV Instructio	24a				1
b Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(p(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 I. Part I b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990 cF2? If "Yes," complete Schedule L, Part II 25b 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 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 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV C An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$250,000 in non-cash contributions? If "Yes," complete Schedule R, Part II Did the organization of th			04-		X
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b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 31 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 32 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Ime 1 33 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Ime 2 34 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, Ime 2 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, Ime 2 36 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 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, Innes 11b and 19? Note, All Form 990 fi					
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	990 (2012) BINGHAMTON LOCAL DEVELOPMENT CORPORATION	1 22-2482	<u>535</u>	P	age !
Par	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V				_
	Check in Schedule O Contains a response to any question in this rait v			Yes	L Na
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	l ol	_	res	No
		<u> </u>			
		able gaming			
	Did the organization comply with backup withholding rules for reportable payments to vendors and report (gambling) winnings to prize winners?	able garring	1c	!	
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	1	10		l
	filed for the calendar year ending with or within the year covered by this return	o			
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b		ļ
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				<u> </u>
	Did the organization have unrelated business gross income of \$1,000 or more during the year?		За		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other author	ority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account		4a		X
	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 According	unts.			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a	1	x
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization	ganization solicit			
	any contributions that were not tax deductible as charitable contributions?		6a		X
	If "Yes," did the organization include with every solicitation an express statement that such contributions	or gifts			
	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).			İ	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services	provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	ļ. <u></u> .	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was re	quired			
	to file Form 8282?		7с		X
d	If "Yes," indicate the number of Forms 8282 filed during the year				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contra	act?	7e	L	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7 f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8	8899 as required?	7g		<u> </u>
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				
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any t	me during the year?	8	ļ. <u></u>	-
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the organization make any taxable distributions under section 4966?		9a	1	-
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b	 	-
10	Section 501(c)(7) organizations. Enter.	1			
а	Initiation fees and capital contributions included on Part VIII, line 12			İ	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities				
11	Section 501(c)(12) organizations. Enter:	1			ļ.
а	Gross income from members or shareholders 11a	 			
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 104	i	12a	-	+-
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12th	<u> </u>	1	1	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		-	+	+-
_	Is the organization licensed to issue qualified health plans in more than one state?		13a		1

Form **990** (2012)

14a

X

 $\textbf{Note.} \ \ \textbf{See the instructions for additional information the organization must report on Schedule O.}$ **b** Enter the amount of reserves the organization is required to maintain by the states in which the

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

14a Did the organization receive any payments for indoor tanning services during the tax year?

13b

organization is licensed to issue qualified health plans

c Enter the amount of reserves on hand

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

	Check if Schedule O contains a response to any question in this Part VI		<u> </u>	X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 14		J	
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		<u>X</u> _
3	Did the organization delegate control over management duties customanly performed by or under the direct supervision			77
	of officers, directors, or trustees, or key employees to a management company or other person?	3		<u>X</u> _
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	5		X
5 6	Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders?	6		X
	Did the organization have members of stockholders, or other persons who had the power to elect or appoint one or	0		
, a	more members of the governing body?	7a	x	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
-	persons other than the governing body?	7b	х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	The governing body?	8a	_x_	
	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			_
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u>X</u> _
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No_
	Did the organization have local chapters, branches, or affiliates?	10a		<u>X</u> _
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	77	
_	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b		40-	x	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b	X	
b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120		
·	in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Х	-
15	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?			
а	The organization's CEO, Executive Director, or top management official	15a		<u>X</u>
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		_X_
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
<u></u>	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► <u>NY</u> Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) is considered.	wailah	ماد	
18	for public inspection. Indicate how you made these available. Check all that apply.	avallau	110	
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finar	ncial	
.5	statements available to the public during the tax year.	IQI		
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	tion:	•	
	SABINA MORA - 607-772-7161			
	CITY HALL - 4TH FLOOR, BINGHAMTON, NY 13901			
23200 12-10-	В	Form	990	(2012)

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

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

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

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

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

(A) Name and Title	(B) Average hours per week	box	not c	Pos heck ss pe	more rson	than is both or/trus	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) TIMOTHY GRIPPEN	1.00								-	
PRESIDENT		X	<u> </u>	X		_		0.	0.	0
(2) DEBRA ANDRAKO	1.00]						il .		
VICE PRESIDENT		X		X			<u> </u>	0.	0.	0
(3) DONALD BERGIN	1.00	1					i			
SECRETARY		X	<u> </u>	X	L_	<u> </u>		0.	0.	0
(4) CHESTER SCHULTZ	1.00							_	_	_
TREASURER		X	<u> </u>	X		├		0.	0.	0
(5) TARIK ABDELAZIM	1.00	┨								
DIRECTOR	1 2 2 2	X				 	<u> </u>	0.	0.	0
(6) CAROLINE QUIDORT	1.00	۱								
DIRECTOR	1 00	X	-	1	-	-	-	0.	0.	0
(7) MATTHEW RYAN	1.00	٠,,								,
DIRECTOR	1 00	X	-	-	⊢	╁		0.	0.	0
(8) PATRICIA CUMMINGS	1.00	٠,							0.	0
DIRECTOR	1.00	X	-	├		┼-	-	0.	0.	
(9) KENNETH FRANK	1.00	x		l				0.	0.	0
DIRECTOR	1.00	├ ^	+		 	╁╌	\vdash	 	<u></u>	
(10) LEA WEBB	1.00	$ \mathbf{x} $						0.	0.	0
DIRECTOR (11) CHRIS PAPASTRAT	1.00	 ^	+-	╁	┢	1			· ·	
DIRECTOR	100	$ \mathbf{x} $			ļ		-	0.	0.	0
(12) CHARLES PEARSALL	1.00	+	1-	_						
DIRECTOR		\mathbf{x}					ĺ	0.	0.	o
(13) MARIE MCKENNA	1.00	T	1							
DIRECTOR		\mathbf{x}	1					0.	0.	0
(14) SCOTT HANCOCK	1.00		1-							
DIRECTOR		\mathbf{x}	\mathbf{L}_{-}		L			0.	0.	0
(15) MERRY HARRIS	4.00									
EXECUTIVE DIRECTOR	36.00	1_	<u> </u>	X		\perp		0.	56,600.	11,320
•		-								
A		+	+-	├	├		\vdash		-	
		1								
		•	_			_				Form 990 (201

om	990 (2012)	BINGHAMT	ON LOCAL	<u>.</u> I)EI	ÆI	OI	PME	<u>'N'</u>	r CORPORATIO	N 22-24	<u> 18253</u>	5 1	Page 8
Part	VII Section A. Officer	rs, Directors, Trus	tees, Key Em	oloy	ees,	and	1 Hi	ghe	st C	ompensated Employe	es (continued)			
	(A) Name and tit	le	(B) Average hours per week	offi	not ci	ss pe	ntion more	than o	n an	(D) Reportable compensation from	(E) Reportable compensatio from related		(F) Estima amoun othe	t of r
			(list any hours for related organizations below line)	Individual trustee or directo	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization: (W-2/1099-MIS	(C)	from torganization relationships in the community of the	he ation ated
			-											
•														
				ļ 										
		· · · · · · · · · · · · · · · · · · ·												
				_										
													 	
	Sub-total	bt- t- Dt \	II Castian A							0.	56,6	00.	11,	320. 0.
	Total (add lines 1b and		ii, Section A							0.	56,6		11,	320.
2	Total number of individu		not limited to th	ose	liste	ed al	bov	e) wł	no re	eceived more than \$100	,000 of reportab	le		0
	compensation from the	organization >											Yes	O No
3	Did the organization list line 1a? If "Yes," comple				e, ke	ey er	nplo	yee	or l	highest compensated e	mployee on			x
4	For any individual listed	on line 1a, is the si	um of reportab	le c	-						the organization			
5	and related organization Did any person listed on	-									idual for services		1	X
<u> </u>	rendered to the organiza	ation? If "Yes," con								• .			5	X
Sec 1	tion B. Independent Cor Complete this table for y		ompensated in	dep	ende	ent c	ont	racto	ors t	hat received more than	\$100,000 of con	npensatio	on from	
	the organization Report		the calendar y	ear	endi	ng v	vith	or w	rthir		year			
		(A) Name and business	address	N	ON	E			_	(B) Description of s	services	Com	(C) pensat	ion
														
									_					
2	Total number of indeper \$100,000 of compensat		_	not l	mite	d to		se li O	stec	d above) who received r	nore than		 ,	
												Fo	rm 99 0	(2012)

232008 12-10-12

BINGHAMTON LOCAL DEVELOPMENT CORPORATION 22-2482535 Form 990 (2012) Part VIII Statement of Revenue Check if Schedule O contains a response to any question in this Part VIII (D)
Revenue excluded from tax under sections 512, 513, or 514 (B) (C) Unrelated Related or Total revenue exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1a 1 a Federated campaigns Membership dues 1b Fundraising events 1c d Related organizations 1d 386,926. e Government grants (contributions) f All other contributions, gifts, grants, and 2,500 similar amounts not included above g Noncash contributions included in lines 1a-1f \$ 389,426 h Total. Add lines 1a-1f Business Code 2 a LOAN INTEREST INCOME 900099 66,423 66,423 Program Service 8,769. 8,769. 900099 ь MISCELLANEOUS f All other program service revenue 75,192 g Total. Add lines 2a-2f Investment income (including dividends, interest, and 1,020. 1,020 other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6 a Gross rents Less: rental expenses Rental income or (loss) d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Business Code Miscellaneous Revenue 11 a d All other revenue

465,638.

232009 12-10-12

Total. Add lines 11a-11d

Total revenue. See instructions.

75,192

1,020

Form 990 (2012)

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A). Check if Schedule O contains a response to any question in this Part IX (C) Management and (A) Total expenses (D) Fundraising Do not include amounts reported on lines 6b, Program service expenses 7b. 8b. 9b. and 10b of Part VIII. general expenses expenses Grants and other assistance to governments and 98,727 98,727 organizations in the United States. See Part IV, line 21 Grants and other assistance to individuals in the United States See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits Payroll taxes 10 Fees for services (non-employees): Management b Legal Accounting C Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) 5,251 2,625 7,876. Advertising and promotion 12 3,039. 2,026. 1.013 Office expenses 13 Information technology 14 Royalties 15 16 Occupancy 17 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials Conferences, conventions, and meetings 19 Interest 20 21 Payments to affiliates Depreciation, depletion, and amortization 22 23 Insurance Other expenses, Itemize expenses not covered 24 above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) FACILITIES, PERSONNEL 230,928 153,952 76,976 162,874. BAD DEBTS 162,874. 11,705. 11.705. ADMINISTRATION FEES 486. 729. 243 d MISCELLANEOUS EXPENSES All other expenses 515,878. 435,021 80,857 0. Total functional expenses. Add lines 1 through 24e <u>25</u> Joint costs. Complete this line only if the organization

Form 990 (2012)

Check here

reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

If following SOP 98-2 (ASC 958-720)

Part X Balance Sheet Check if Schedule O contains a response to any question in this Part X (A) (B) End of year Beginning of year 40,842. 37,423 Cash - non-interest-bearing 1 1,807,760. 1,572,629. 2 2 Savings and temporary cash investments 78,796. 29,000. Pledges and grants receivable, net 3 3 Accounts receivable, net 4 4 Loans and other receivables from current and former officers, directors. 5 trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 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 instr). Complete Part II of Sch L. ... 1,566,935. 1,281,024. Notes and loans receivable, net Я Inventories for sale or use Prepaid expenses and deferred charges 9 9 10a Land, buildings, and equipment, cost or other 136,954. basis Complete Part VI of Schedule D 10a 136,954. 136,954. 10b 10c b Less: accumulated depreciation Investments - publicly traded securities 11 11 Investments - other securities. See Part IV, line 11 12 12 Investments - program-related See Part IV, line 11 13 13 14 14 Intangible assets Other assets. See Part IV, line 11 15 15 3,342,941 3,345,376. Total assets. Add lines 1 through 15 (must equal line 34) 16 16 89,960. 37,285 17 17 Accounts payable and accrued expenses 18 18 Grants payable 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities Escrow or custodial account liability Complete Part IV of Schedule D 21 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons 22 Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of 25 Schedule D 89,960. 37,285. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 2,172. 13,187. Unrestricted net assets 27 27 3,303,484. 3,242,229. 28 28 Temporarily restricted net assets Permanently restricted net assets 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 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 3,305,656. 3,255,416. 33 Total net assets or fund balances 33

3,345,376. Form **990** (2012)

3,342,941

Total liabilities and net assets/fund balances

	990 (2012) BINGHAMTON LOCAL DEVELOPMENT CORPORATION	22-2483	<u> 2535</u>	Pag	ge 12
Pa	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
	,				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>5,6</u>	
2	Total expenses (must equal Part IX, column (A), line 25)	2			<u>78.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3			<u>40.</u> >
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,30	5,6	<u>56.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	3,25	<u>5,4</u>	<u> 16.</u>
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				لعا
				Yes	No
1	Accounting method used to prepare the Form 990. Cash X Accrual Cother				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule ()			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a	} }	-	
	separate basis, consolidated basis, or both:		1		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,	1 1		
	consolidated basis, or both:		1 1		
	X Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audıt,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audıt			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		L
			Form	990 ((2012)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

2012

Inspection

Nam	e of	the	organ	izatio	

Employer identification number

		BINGHAM	TON LOCAL DE	VELOP:	MENT	CORPO	RATIO	N L	2	2-2482	535	
Part I	Reason		ity Status (All organiz									
he organ	ization is not a	private foundation	because it is: (For lines 1	through 1	11, check o	only one b	ox)					
1 🔲	A church, cor	nvention of churche	s, or association of churc	ches desci	nbed in se	ction 170	(b)(1)(A)(i)					
2 🗌	A school des	cribed in section 17	'0(b)(1)(A)(ii). (Attach Sc	hedule E)								
з 🔲	A hospital or	a cooperative hosp	tal service organization o	descnbed i	n section	170(b)(1)(A)(iiı).					
4 🔲	A medical res	earch organization	operated in conjunction	with a hos	pıtal descr	ribed in se	ction 170	(b)(1)(A)(ıı	ı). Enter i	the hospital	's nam	ie,
	city, and stat	e:										
5 🔲	An organizati	on operated for the	benefit of a college or ur	niversity ov	vned or op	erated by	a governr	nental unr	t describ	ed in		
	section 170	(b)(1)(A)(iv). (Compl	ete Part II)									
6 🔲	A federal, sta	te, or local governm	ent or governmental unit	t described	l in sectio	n 170(b)(1)(A)(v).					
7 X	An organizati	on that normally rec	eives a substantial part (of its supp	ort from a	governme	ntal unit o	r from the	general	public desc	nbed ı	n
	section 170(b)(1)(A)(vi). (Comple	ete Part II)									
8 🔲	A community	trust described in s	section 170(b)(1)(A)(vi). ((Complete	Part II)							
9 🔲	An organizati	on that normally rec	eives (1) more than 33 1	1/3% of its	support fi	rom contri	butions, m	nembershi	p fees, a	nd gross re	ceipts	from
	activities rela	ted to its exempt fu	nctions - subject to certa	un exceptio	ons, and (2	2) no more	than 33 1	/3% of its	support	from gross	invest	ment
	income and t	ınrelated business t	axable income (less sect	tion 511 ta	x) from bu	sinesses a	cquired b	y the orga	nızation	after June 3	30, 197	' 5.
	See section	509(a)(2). (Complete	e Part III)									
ю 🖳	An organizati	on organized and o	perated exclusively to te	st for publ	c safety S	See sectio	n 509(a)(4	I).				
11 📖	An organizati	on organized and o	perated exclusively for th	ne benefit o	of, to perfo	rm the fur	nctions of,	or to carr	y out the	purposes of	of one	or
	more publicly	supported organization	ations described in section	on 509(a)(1	1) or section	on 509(a)(2	?) See sec	tion 509(a)(3). Ch	eck the box	that	
	describes the	type of supporting	organization and comple		_			L1				
	a L Type		• •	ype III - Fui	-	_				n-functional	•	_
e 📖			at the organization is not									ın
			than one or more publicly						9(a)(1) or	section 509	}(a)(2)	
f	If the organiz	ation received a wri	tten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				
		rganization, check t						-				L
g	· -		organization accepted ar									l
		-	directly controls, either al	one or tog	ether with	persons o	lescribed i	in (ii) and (III) below		Yes	No
	_	• •	upported organization?		٠					11g(i)	┾	
		•	n described in (i) above?		•	•				11g(ii)		
_	• •	-	a person described in (i) o							11g(iii)	Ш	
h	Provide the f	ollowing information	about the supported or	ganization	(S)							
		· · · · · · · · · · · · · · · · · · ·	T	L			4 15 .	(vi) ls	the			
` '	of supported	(ii) EIN	(iii) Type of organization (described on lines 1-9		organization sted in your		on in col.	organization	on in col.	(vii) Amoun		netary
org	anization		above or IRC section		document?			(i) organiz U.S	ed in the	Sup	port	
			(see instructions))	Yes	No	Yes	No	Yes	No			
						100			1.10			
							<u> </u> 					
				 	-							
	· · ·					_						
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otal												

232021 12-04-12 Schedule A (Form 990 or 990-EZ) 2012

Form 990 or 990-EZ.

LHA For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2012 BINGHAMTON LOCAL DEVELOPMENT CORPORATION 22-2482535 Page 2

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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	ınclude any "unusual grants ")	399,612.	442,689.	658,405.	471,454.	389,426.	2361586.
2	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities					1	
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	399,612.	442,689.	658,405.	471,454.	389,426.	2361586.
	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4						2361586.
	ction B. Total Support						<u> </u>
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 4	399,612.	442,689.	658,405.	471,454.	389,426.	2361586.
	Gross income from interest,			000,2000		005,1200	
Ū	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	2,192.	1,128.	1,017.	1,041.	1,020.	6,398.
۵	Net income from unrelated business				1,0110	1,0200	0/3501
9	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain				· · · · · · · · · · · · · · · · · · ·		
10	or loss from the sale of capital					;	
	assets (Explain in Part IV)]					
4.4	Total support. Add lines 7 through 10	<u> </u>					2367984.
	Gross receipts from related activities,	oto /soo instructi				12	405,894.
	First five years. If the Form 990 is for	•	•	d fourth or fifth to		·	403,034.
13	•	-	s iirst, second, triir	u, iouriii, or iiiiii ta	ax year as a section	11 50 1(0)(3)	ightharpoonup
Sec	organization, check this box and stor ction C. Computation of Publ	ic Support Pe	rcentage				
	Public support percentage for 2012 (column (fl)		14	99.73 %
	Public support percentage from 2011	, , ,	-	oldinii (i))		15	99.56 %
	33 1/3% support test - 2012. If the	•	·	n line 13, and line	1/1 ie 33 1/3% or n	· · · · · · · · · · · · · · · · · · ·	
100	· · · · · · · · · · · · · · · · · · ·				14 15 55 17570 01 11	note, check this be	▶ X
	stop here. The organization qualifies 33 1/3% support test - 2011. If the c		-		Juga 15 ja 22 1/20/	or more check th	
	• •	-			IIIIe 13 15 33 1/3/0	o or more, check tr	IIS DOX
4**	and stop here. The organization qual	• •	•	•	. 12 162 or 16b /	and kao 14 to 100/	
1/2	10% -facts-and-circumstances tes	•					·
	and if the organization meets the "fac			•	-	it iv now the organ	iization
	meets the "facts-and-circumstances"	-			=		▶∟
t	o 10% -facts-and-circumstances tes	-					
	more, and if the organization meets the				•		, []
	organization meets the "facts-and-circ		-	•			
<u> 18</u>	Private foundation. If the organization	on did not check a	pox on line 13, 16	a, 160, 1/a, or 17t	•	•	
					Sche	equie a (Form 990	or 990-EZ) 2012

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.)

qualify under the tests listed be Section A. Public Support	low, please com	plete Part II)		<u> </u>	<u> </u>	
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and		1-7	10, 10	157-5	(2)	
membership fees received. (Do not						•
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	·					
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and					T	
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 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) Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6		(-)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1	(3)
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income					-	
(less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support. (Add lines 9, 10c, 11, and 12)			L	<u> </u>		
14 First five years. If the Form 990 is for	the organization	's first, second, thu	rd, fourth, or fifth t	ax year as a sect	ion 501(c)(3) organiz	zation,
check this box and stop here	_ 		·			▶∟
Section C. Computation of Publi					1 1	
15 Public support percentage for 2012 (lii	ne 8, column (f) o	divided by line 13, o	column (f))		15	9
16 Public support percentage from 2011					16	9
Section D. Computation of Inves			•		14-1	
17 Investment income percentage for 20			ne 13, column (f))		17	9
18 Investment income percentage from 2					18	9
19a 33 1/3% support tests - 2012. If the						1 / is not
more than 33 1/3%, check this box an	•	-	-			▶∟_
b 33 1/3% support tests - 2011. If the						
line 18 is not more than 33 1/3%, chec		-				╵┄
20 Private foundation. If the organization	n did not check a	a box on line 14, 19	a. or 19b. check t	nis box and see i	nstructions	▶∟

232023 12-04-12

Schedule A (Form 990 or 990-EZ) 2012

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Inspection

Name of the organization

Employer identification number

		BINGHAMTON LOCAL D					22-2482	
Par	t I	Organizations Maintaining Donor Advise	d Funds or	Other Simila	r Funds or A	ccou	nts. Complete if	the
		organization answered "Yes" to Form 990, Part IV, line						
			(a) Do	nor advised funds	(b) Fund	ds and other acco	ounts
1	Total	number at end of year						
2	Aggre	gate contributions to (during year)						
3	Aggre	gate grants from (during year)						
4	Aggre	gate value at end of year						
5	Did th	e organization inform all donors and donor advisors in	writing that the	assets held in do	nor advised fun	ds		
		e organization's property, subject to the organization's					Yes	☐ No
6	Did th	ie organization inform all grantees, donors, and donor a	dvisors in writ	ing that grant fund	ls can be used	only		
	for ch	arrtable purposes and not for the benefit of the donor of	r donor adviso	or, or for any other	purpose confe	nng		
	ımper	missible private benefit?				_	Yes	☐ No
Par	t II	Conservation Easements. Complete if the org	ganization ans	wered "Yes" to Fo	rm 990, Part IV,	line 7		
1	Purpo	ose(s) of conservation easements held by the organization	on (check all t	hat apply)				
		Preservation of land for public use (e.g., recreation or e	education)	Preservation	of an historical	ly impo	rtant land area	
		Protection of natural habitat		Preservation	of a certified h	storic s	structure	
		Preservation of open space						
2	Comp	plete lines 2a through 2d if the organization held a quali	fied conservat	on contribution in	the form of a co	onserva	ition easement oi	n the last
	day o	f the tax year.						
	-	•					Held at the End of	the Tax Year
а	Total	number of conservation easements				2a		
b	Total	acreage restricted by conservation easements				2b		
С	Numt	per of conservation easements on a certified historic str	ucture include	d in (a)		2c		
d		per of conservation easements included in (c) acquired			ric structure			
		in the National Register				2d		
3		er of conservation easements modified, transferred, re	leased, exting	uished, or termina	ted by the organ	nization	during the tax	
	year I		, ,	•	, ,		Ū	
4	•	per of states where property subject to conservation ea	sement is loca	ted >				
5		the organization have a written policy regarding the per			ndling of			
		ions, and enforcement of the conservation easements i			_		Yes	☐ No
6	Staff	and volunteer hours devoted to monitoring, inspecting,	and enforcing	conservation eas	ements during t	he year	r >	
7	Amou	int of expenses incurred in monitoring, inspecting, and	enforcing con:	servation easemer	nts during the ye	ear 🕨 S	<u></u>	
8		each conservation easement reported on line 2(d) above	_					_
	and s	ection 170(h)(4)(B)(ii)?		·			Yes	☐ No
9		rt XIII, describe how the organization reports conservati	on easements	in its revenue and	d expense state	ment, a	nd balance shee	t, and
		de, if applicable, the text of the footnote to the organiza			•			
	cons	ervation easements.				_	_	
Pai	t III	Organizations Maintaining Collections o	f Art, Histo	rical Treasure	es, or Other	Simila	ar Assets.	
		Complete if the organization answered "Yes" to Form	990, Part IV, I	ne 8				
1a	If the	organization elected, as permitted under SFAS 116 (AS	SC 958), not to	report in its rever	ue statement a	nd bala	ince sheet works	of art,
	histoi	ncal treasures, or other similar assets held for public exl	hibition, educa	ition, or research i	n furtherance of	public	service, provide,	ın Part XIII,
	the te	ext of the footnote to its financial statements that descri	bes these iten	ns				
b	If the	organization elected, as permitted under SFAS 116 (AS	SC 958), to rep	ort in its revenue	statement and b	alance	sheet works of a	ırt, hıstorical
_		ures, or other similar assets held for public exhibition, e						
		ng to these items:						•
		Revenues included in Form 990, Part VIII, line 1				▶ 5	š	
	• •	ssets included in Form 990, Part X	•					
2	• •	organization received or held works of art, historical tre	asures or oth	er similar assets fr	or financial dain			
_		ollowing amounts required to be reported under SFAS 1				p. 04101	-	
-		nues included in Form 990, Part VIII, line 1	, o (noo 500)	. J. G. C. II I G. G. II		▶ 4	\$	
a h		ts included in Form 990, Part X			•		\$	
b	ಗಾತಿಕ	is included in Form 350, Fatt A			•		*	

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Schedule D (Form 990) 2012

		TON LOCAL I					82535 Page 2
Par							
3	Using the organization's acquisition, accession	on, and other records	s, check any of the	following that are	a significant i	use of its i	collection items
	(check all that apply):		 1				
а	Public exhibition	d		nange programs			
b	Scholarly research	е	Other				
С	Preservation for future generations						
4	Provide a description of the organization's co	illections and explain	how they further th	ne organization's e	xempt purpo	se in Part	XIII.
5	During the year, did the organization solicit or				ılar assets	_	, ,
r 	to be sold to raise funds rather than to be ma				··		Yes No
Par		-	te if the organization	n answered "Yes"	to Form 990	, Part IV, I	ine 9, or
	reported an amount on Form 990, Par	t X, line 21					
1a	Is the organization an agent, trustee, custodi	an or other intermed	ary for contribution	s or other assets i	not included	_	_
	on Form 990, Part X?						」Yes No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table				
							Amount
С	Beginning balance	-			1c		
d	Additions during the year				1d		
е	Distributions during the year				1e		
f	Ending balance						
	Did the organization include an amount on Fo					L	」Yes No
	If "Yes," explain the arrangement in Part XIII.						
Par	t V Endowment Funds. Complete it	the organization ans	swered "Yes" to For		1		
		(a) Current year	(b) Prior year	(c) Two years bac	(d) Three y	ears back	(e) Four years back
1a	Beginning of year balance	3,303,484.	3,093,643.	2,963,96	ι. 2.8	70,651.	2,719,740.
þ	Contributions	113,128.	427,196.	465,77	2. 3	96,717.	410,254.
С	Net investment earnings, gains, and losses	1,016.	173,035.	2,17	3.	1,118.	1,007.
d	Grants or scholarships						
е	Other expenditures for facilities						
	and programs	175,399.	390,390.	338,26	3. 3	04,525.	260,350.
f	Administrative expenses						
g	End of year balance	3,242,229.	3,303,484.	3,093,64	3. 2.9	63,961.	2,870,651.
2	Provide the estimated percentage of the curr	ent year end balance	e (line 1g, column (a	i)) held as			
а	Board designated or quasi-endowment		_%				
b	Permanent endowment	%					
¢	Temporarily restricted endowment ▶ 10	<u>0.00</u> %					
	The percentages in lines 2a, 2b, and 2c should	ıld equal 100%					
3a	Are there endowment funds not in the posse	ssion of the organiza	ation that are held a	nd administered fo	or the organiz	zation	
	by:						Yes No
	(i) unrelated organizations						3a(i) X
	(II) related organizations						3a(ii) X
b	If "Yes" to 3a(ii), are the related organizations	s listed as required or	n Schedule R?				3b
4	Describe in Part XIII the intended uses of the						
Par	t VI Land, Buildings, and Equipm		· · ·	Г		 -	
	Description of property	(a) Cost or of	1	· ·) Accumulate	1	(d) Book value
		basis (investr		(other)	depreciation		464 4-1
1a	Land .	136,	954.				136,954.
Ь	Buildings		-				
С	Leasehold improvements						
d	Equipment						
<u> e </u>							125 651
Total	. Add lines 1a through 1e (Column (d) must e	gual Form 990 Part	X column (B) line 1	(O(c))			136,954.

Schedule D (Form 990) 2012

Part VII Investments - Other Securities. See	Form 990, Part X, line	12.		-2462535 Page 8
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of v	aluation Cost or en	d-of-year market value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)		-	_ 	
(E)				
(F)		 		_ _
(G)		 	- 	
(H)		 		
(1)				
Total (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	5 000 5 171	40	· · · - · · · · · · · · · · · · · · · ·	
Part VIII Investments - Program Related. Se (a) Description of investment type	e Form 990, Part X, line (b) Book value	13.	ratuation: Cost or one	d-of-year market value
	(D) BOOK VAIDE	(c) Method of v	aluation. Cost of en	D-Or-year market value
(1)		 		
(2)		 		
(3)				
(4)				
(5) (6)				·······
(7)		 		
(8)				
(9)				····
(10)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX Other Assets. See Form 990, Part X, line	15			<u></u>
L	Description			(b) Book value
(1)				<u> </u>
_(2)				
(3)		 		
(4)	· · · · · · · · · · · · · · · · · · ·	··-		
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Column (b) must equal Form 990, Part X, col (B) line	15.)		•	
Part X Other Liabilities. See Form 990, Part X, I				
(a) Description of liability		(b) Book value		
(1) Federal income taxes			1	
(2)				
(3)]	
(4)]	
(5)]	
(6)]	
(7)				
(8)				
(9)]	
(10)]	
(11)			j	
Total. (Column (b) must equal Form 990, Part X, col (B) line	25)			
2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the tex		organization's financia	I statements that re	ports the organization's
liability for uncertain tax positions under FIN 48 (ASC 7				

232053 12-10-12

	edule D (Form 990) 2012 BINGHAMTON LOCAL DEVELOPM		
Par	rt XI Reconciliation of Revenue per Audited Financial Stater	nents With Revenue per	
1	Total revenue, gains, and other support per audited financial statements		1 465,638.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments	2a	
ь	Donated services and use of facilities	2b	
С	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	
е	Add lines 2a through 2d		2e 0.
3	Subtract line 2e from line 1		3 465,638.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
С	Add lines 4a and 4b		7 4c 0.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5 465,638.
Par	rt XII Reconciliation of Expenses per Audited Financial State	ments With Expenses p	
1	Total expenses and losses per audited financial statements		1 515,878.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.		
а	Donated services and use of facilities	2a	<u> </u>
b		2b	
C	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	A 4 4 B	201	
3	Subtract line 2e from line 1	•	3 515,878.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	•	3 31370701
-	Investment expenses not included on Form 990, Part Vill, line 7b	المعا	J j
a	·	4a	
b	,	40	
	Add lines 4a and 4b	•	4c 0. 5 515,878.
5 Dar	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) rt XIII Supplemental Information	·	5 515,878.
			11 151 5 111 1 5
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Pa		
	e 2; Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part		
PAF	RT V, LINE 4: TO FURTHER THE ORGANIZATION	I S TAX EXEMPT P	URPORSE
PAL	RT X, LINE 2: THE CORPORATION'S FORM 990,	RETURN OF ORGA	NIZATION
			4
EXI	EMPT FROM INCOME TAX, FOR THE YEARS ENDIN	IG AUGUST 31, 20	10, 2011 AND
	40	A	
203	12 IS SUBJECT TO EXAMINATION BY THE IRS,	GENERALLY FOR T	HREE YEARS POST
FII	LING.		

Schedule D (Form 990) 2012

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, ► Attach to Form 990. BINGHAMTON LOCAL DEVELOPMENT CORPORATION Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE (Form 990)

OMB No 1545-0047	2012

Open to Public

2 Employer identification number 22-2482535 Inspection X Yes 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection Part I General Information on Grants and Assistance criteria used to award the grants or assistance?

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any reconsent that received more than \$5,000. Part II can be duplicated if additional space is needed.	Governments and \$5 000. Part II can	l Organizations in the be duplicated if additi	• United States. Conal space is need	omplete if the orga led.	nization answered "Y	es" to Form 990, Part	IV, line 21, for any
1 (a	1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BROOME 901 UP	BROOME COMMUNITY COLLEGE 901 UPPER FRONT STREET BINGHAMTON NY 13901	16-139336		98,727.	0			TO FUND CERTAIN PROGRAMS TO PROVIDE INTENSIVE COMMUNITY-BASED MANAGEMENT AND TECHNICAL
(A) (Enter total number of section 501(c)(3) and government organizations	and government organization	ganizations listed in th	listed in the line 1 table				1.

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

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) (2012)

22-2482535 Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed BINGHAMTON LOCAL DEVELOPMENT CORPORATION Schedule | (Form 990) (2012) Part III

Page 2

(b) Number of (c) Amount of (d) Amount of non-foliation (e) Method of valuation (f) Description of non-cash assistance recipients cash grant			Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information. The part I Line 2: The Organization recourses Grant Recipients To		FINAL FINANCIAL REPORTS.	
(a) Type of grant or assistance			Part IV Supplemental Information. Complete this part to provide t	SUBMIT BOTH OUARTERLY ACTIVITY REPOR	WELL AS FINAL ACTIVITY REPORTS AND B	

/ITY REPORTS ARE REQUIRED TO CONTAIN A DISCUSSION AND	RESS OF THE GRANTS, AS WELL AS ANY SUCH INFORMATION,	MENDATION AS REQUESTED BY THE ORGANIZATION. THE
ARE REQUIRED TO	GRANTS, AS WELL	S REQUESTED BY TH
ACTIVITY REPORTS	E PROGRESS OF THE	RECOMMENDATION AS
THE QUARTLERLY ACTIV	ANALYSIS OF THE PROGI	EXPLANATION OR RECOM

QUARTERLY FINANCIAL REPORTS ARE REQUIRED TO SET FORTH RECEIPTS AND

EXPENDITURES OF FUNDS PURSUANT TO THE GRANT DURING THE PRECEDING QUARTER.

232102 12-18-12

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

Inspection

BINGHAMTON LOCAL DEVELOPMENT CORPORATION

Employer identification number 22-2482535

DINGIMITOR BOCKE BUILDING CORPUSED 2101000
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
RETAINING AND GROWING ESTABLISHED BUSINESS, BUILDING INDUSTRIAL AND
COMMERCIAL CAPACITY, PROMOTING EMPLOYMENT, AND FOSTERING
ENTREPRENEURSHIP AND INNOVATION.
FORM 990, PART VI, SECTION A, LINE 7A: DIRECTORS AND NON-VOTING MEMBERS
ARE APPOINTED BY THE MAYOR FOR 2 YEAR TERMS, EXCEPT TWO CITY COUNCIL
MEMBERS WHO SERVE AS DIRECTORS ON A 1 YEAR TERM THROUGH THEIR APPOINTMENT
BY THE CITY COUNCIL PRESIDENT.
FORM 990, PART VI, SECTION A, LINE 7B: THE CITY COUNCIL APPROVES THE
OPERATING BUDGET AND LOANS OF MORE THAN \$25,000.
FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS REVIEWED BY THE
BOARD OF DIRECTORS BEFORE ITS FILING.
FORM 990, PART VI, SECTION B, LINE 12C: THE CONFLICT OF INTEREST POLICY IS
DISCUSSED AND REVIEWED ANNUALLY. ALL MEMBERS SIGN THE CONFLICT OF INTEREST
POLICY ANNUALLY. ANY CONFLICTS ARE DISCLOSED AT EACH MEETING BEFORE
DISCUSSIONS BEGIN ON THE TOPIC.
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS
AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PAGE 12, PART XII, LINE 2C

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

Schedule O (Form 990 or 990-EZ) (2012)

Schedule O (Form 990 or 990-EZ) (2012)	Page 2
Name of the organization BINGHAMTON LOCAL DEVELOPMENT CORPORATION	Employer identification number 22-2482535
AUDIT OVERSIGHT AND AUDITOR SELECTION PROCESS	
THE PROCESS FOR AUDIT OVERSIGHT AND AUDITOR SELECTION HAS	NOT CHANGED
FROM THE PRIOR YEAR.	

2012 Open to Public Inspection **Employer identification number** OMB No 1545-0047 Direct controlling 22-2482535 entity ε End-of-year assets <u>e</u> ► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. Total income Related Organizations and Unrelated Partnerships ▼ See separate instructions. Identification of Disregarded Entitles (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Legal domicile (state or foreign country) BINGHAMTON LOCAL DEVELOPMENT CORPORATION ▶ Attach to Form 990. Primary activity Name, address, and EIN (if applicable) of disregarded entity Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990) Part I

(g) Section 512(b)(13) Š × controlled entity? Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) OF. Direct controlling COMPONENT UNIT entity SINGHAMTON BLDC IS A status (if section Public charity 501(c)(3)) Exempt Code section Legal domicile (state or foreign country) NEW YORK Primary activity 9 GOVERNMENT Name, address, and EIN of related organization CITY OF BINGHAMTON - 15-6000404 BINGHAMTON, NY 13901 38 HAWLEY STREET

Part II

Schedule R (Form 990) 2012

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

22-2482535 Page 2

BINGHAMTON LOCAL DEVELOPMENT CORPORATION Schedule R (Form 990) 2012

Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

General or Percentage managing ownership Schedule R (Form 990) 2012 Yes No Section Section 512(bx13) controlled entity? Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year) 3 Percentage ownership Yes Ξ Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) Share of end-of-year assets <u>6</u> ate allocations? Disproportion-Yes No Ξ Share of total income Share of end-of-year assets <u>6</u> Type of entity (C corp, S corp, or trust) <u>e</u> Share of total income Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) ਉ **e** Legal domicile (state or foreign country) 30 Direct controlling entity ত্ত Primary activity (c)
Legal
domicile
(state or
foreign
country) Primary activity 9 Name, address, and EIN of related organization Name, address, and EIN of related organization (a) 232162 12-10-12 Part IV

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. 1. During the tax year, did the proapization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	s with one or more r	elated organizations listed	n Parts II-IV2	Yes No
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity			•	Ta X
b Gift, grant, or capital contribution to related organization(s)				db X
c Gift, grant, or capital contribution from related organization(s)				1c X
d Loans or loan guarantees to or for related organization(s)				1d X
e Loans or loan guarantees by related organization(s)				1e X
f Dyndends from related organization(s)				×
_				
y care of assets from related organization(s)				
j Lease of facilities, equipment, or other assets to related organization(s)				Ji X
k Lease of facilities, equipment, or other assets from related organization(s)				1k
I Performance of services or membership or fundraising solicitations for related organization(s)	anization(s)			- ×
m Performance of services or membership or fundraising solicitations by related orga	lated organization(s)			± ×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	ion(s)			
 Sharing of paid employees with related organization(s) 				To Y
p Reimbursement paid to related organization(s) for expenses				1p X
q Reimbursement paid by related organization(s) for expenses				1q X
r Other transfer of cash or property to related organization(s)				1r X
s Other transfer of cash or property from related organization(s)	:			X X
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	who must complete t	his line, including covered	relationships and transaction thresholds.	
(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	penon
(1)				
(3)				
(4)				
(5)				
9				
232163 12-10-12	31		Schedule	Schedule R (Form 990) 2012

22-2482535

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Page 4

Schedule R (Form 990) 2012 BINGHAMTON LOCAL DEVELOPMENT CORPORATION

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, Ine 37)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) (b) (c) (d)	(q)	(0)	(p)	(e)	9	(6)	(£)	Θ	3	(S)
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	(related, urrelated, 501(c)(3)	501(c)(3)	Share of total	Share of end-of-year	Dispropor- tionate allocations?	Olspropor- Code V-UBI General or Percentage tionals amount in box 20 managing ownership allocations? of Schooling K-1 parner?	General or managin partner?	Percentage ownership
			under section 512-514)	Yes No	ıncome	assets	Yes No	(Form 1065)	Yes No	
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32

Schedule R (Form 990) 2012 Part VII Supplemental Info	BINGHAMTON	LOCAL	DEVELOPMENT	CORPORATION22	-2482535 Page 5
Part VII Supplemental Info	rmation				
		ion for resp	onses to questions on S	Schedule R (see instructions)	
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