# FEMA 4562-DR

(Rev January 2020) 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 private foundations)

▶ Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

	A F	or th	e 2019 calendar year, or tax year beginning JUL 1, 2019 and ending	JUN 30, 2020 \				
	Во	heck if	C Name of organization	D Employer identification number				
	a	pplicab	SOUTHERN OREGON REGIONAL ECONOMIC					
		Addre	ess Device on Control					
	$\overline{\Box}$	Name chan		93-1062727				
Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number								
Final 1211 FACT DADALETTE DOAD 201 5/1-772 99/6								
termin- termin- ated  City or town, state or province, country, and ZIP or foreign postal code  G Gross receipts \$ 85								
	Г	Amer	MEDEORD OR 07504	H(a) Is this a group return				
	$\overline{}$	Appli		for subordinates? Yes X No				
		pend	same as C above	H(b) Are all subordinates included? Yes No				
	$\overline{1}$	ax-ex		If "No," attach a list (see instructions)				
			te: ► WWW.SOREDI.ORG	H(c) Group exemption number				
				ear of formation: 1987 M State of legal domicile: OR				
		ırt I						
	-	1	Briefly describe the organization's mission or most significant activities TO HELP	BUSINESSES PROSPER AND				
	č		ADVANCE ECONOMIC OPPORTUNITIES COMPATIBLE WI					
	rna	2	Check this box  if the organization discontinued its operations or disposed of m	ore than 25% of its net assets				
	Governance	3	Number of voting members of the governing body (Part VI, line 1a)	3 27				
	Ď	4	Number of independent voting members of the governing body (Part VI, line 1b)	4 27				
	Se	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5 9				
	Viti	6	Total number of volunteers (estimate if necessary)	6 50				
	Activities &	7 a	Total unrelated business revenue from Part VIII, column (C), Jine 12	7a 0.				
	_	b	Net unrelated business taxable income from Form 990-T, line 39	7ь 0.				
			77.1728	Prior Year Current Year				
	a	8	Contributions and grants (Part VIII, line In)	$\frac{Q_0}{2}$ 360,328. 345,927.				
	nue	9	Program service revenue (Part VIII, line 2g)	271,955. <u>271,955.</u>				
•	ě		Investment income (Part VIII, column (A), lines 3, 4, and 7¢)	2 103,329. 108,208.				
2	<u>;</u> "	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and O DEN 11T	149,714. 127,365.				
~	Revenue	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,043,167. 853,455.				
Œ		13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0. 0.				
<	>		Benefits paid to or for members (Part IX, column (A), line 4)	0. 0.				
Z	Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	518,034. 456,752.				
_	) Si		Professional fundraising fees (Part IX, column (A), line 11e)	0. 0.				
	ğ	b	Total fundraising expenses (Part IX, column (D), line 25) ▶					
NNED	۳		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	371,301. 437,256.				
Ź			Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	889,335. 894,008.				
Ă	. 0	19	Revenue less expenses Subtract line 18 from line 12	153,832. <40,553.				
က	Assets or Balances			Beginning of Current Year End of Year				
_	Sset	20	Total assets (Part X, line 16)	5,613,613. 5,491,032.				
	Fund	21	Total liabilities (Part X, line 26)	818,964. 736,936.				
			Net assets or fund balances Subtract line 21 from line 20	4,794,649. 4,754,096.				
		rt II	~	and the state of t				
			alties of perjury, I declare that I have examined this return, including accompanying schedules and state					
	true,	corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of which prepared to the complete of the complete o					
			(Signature of officer)	[Date]				
	Sıgr			Date				
	Here	Э	Type or print name and title					
				Date Check PTIN				
	n - ! -1		Print/Type preparer's name					
	Paid		CAROLYN M. RYDER	Self-employed   P00033827				
	Prep		Firm's name ISLER MEDFORD, LIC					
	Use (	UIIIY	Firm's address 839 ALDER CREEK DR.	Phone no. (541)779-7641				
			RS discuss this return with the preparer shown above? (see instructions)	X Yes No Form <b>990</b> (2019)				
	<b>93200</b>	1 01-2	20-20 LHA For Paperwork Reduction Act Notice, see the separate instructions.	Fulli <b>330</b> (2019)				

		1062727	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission		
	IT IS OUR MISSION TO HELP BUSINESSES PROSPER AND TO ADVANCE	ECONOMIC	7
	OPPORTUNITIES COMPATIBLE WITH COMMUNITY VALUES. WE ENVISION		
	BUSINESSES THRIVING IN VIBRANT COMMUNITIES IN JACKSON AND J		
		OSEPHINE	
	COUNTIES.		
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	L Yes <sup>□</sup>	X No
	If "Yes," describe these new services on Schedule O		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X No
0	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 measu		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the	total expenses, a	nd
	revenue, if any, for each program service reported		
4a	(Code) (Expenses \$	271,9	955.)
	TO DEVELOP AND MAINTAIN PROGRAMS TO STIMULATE THE OVERALL E	CONOMY OF	7
	SOUTHERN OREGON IN ORDER TO ENSURE CONTINUED BUSINESS GROWT		
		11 11110 001	
	OPPORTUNITIES WITHIN THE REGION.		
			<del></del>
			<del></del>
4b	(Code) (Expenses \$) (Revenue \$		)
4c	(Code ) (Expenses \$ Including grants of \$) (Revenue \$		)
		•	
		<del></del>	· — —
۰	Other program services (Describe on Schedule O.)		
4d	Other program services (Describe on Schedule O )	,	
	(Expenses \$ including grants of \$ ) (Revenue \$		
4e	Total program service expenses ► 223,417.		
		Form <b>99</b>	<b>(2</b> 019)

Form 990 (2019) DEVELOPMENT, INC.

Part IV | Checklist of Required Schedules

			Yes	No
1	s the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
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	_	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
Ü	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, 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,		₩.	
<b>L</b>	Part VI  Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	11a	Х	
D	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	110		
_	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			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	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	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		3.7	
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	401		v
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional  Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13		X
13 14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	ITA		
~	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	ļ	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v
00-	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		_X_
ь 21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
-1	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
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Form 990 (2019) DEVELOPMENT, INC.

Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			İ
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23_		X
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 25a	24a		_X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	١		
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	05-		х
<b>h</b>	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I  Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	25a		
b	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L. Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	230		
20	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
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).		İ	
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		_X_
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		<u> </u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		<u>X</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			v
00	Schedule N, Part II	32		<u>X</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			X
34	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I  Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33	$\dashv$	
34	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	- C-C-		
_	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36	ŀ	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X_
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		1	$\Box$
	1 1		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable  1a 11			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	_1c_	X	
932004	· 01-20-20	<b>Form</b>	990 (	2019)

Form 990 (2019) DEVELOPMENT, INC.

Part V . Statements Regarding Other IRS Filings and Tax Compliance (continued)

			1		Yes	No			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		l						
	filed for the calendar year ending with or within the year covered by this return	2a	9						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ทร?		2b	_X_				
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)							
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		<u> </u>			
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0		3b					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	autho	rıty over, a						
	financial account in a foreign country (such as a bank account, securities account, or other financial a	accou	nt)?	4a		<u>X</u>			
b	If "Yes," enter the name of the foreign country								
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccou	nts (FBAR)			X_			
5a									
b	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?								
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c					
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ne org	anization solicit						
	any contributions that were not tax deductible as charitable contributions?			6 <u>a</u>		<u> </u>			
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions d	or gifts						
_	were not tax deductible?			_6b					
7	Organizations that may receive deductible contributions under section 170(c).			_					
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices	provided to the payor?	7a					
Þ	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b_					
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was to file Form 8282?	as rec	Juirea	7-					
		74	I	7c					
	If "Yes," indicate the number of Forms 8282 filed during the year  Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit continuous continu	7d	-t2	7e					
e f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contri		J.:	7 <del>f</del>					
' q	If the organization received a contribution of qualified intellectual property, did the organization file Fo		399 as required?	7g					
h									
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained			7h					
	sponsoring organization have excess business holdings at any time during the year?	•		8					
9	Sponsoring organizations maintaining donor advised funds.								
а									
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b					
10	Section 501(c)(7) organizations. Enter								
а	Initiation fees and capital contributions included on Part VIII, line 12	10a							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			-				
11	Section 501(c)(12) organizations. Enter		1		}				
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)	11b							
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		<b>?</b> 	12a					
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	<u> </u>						
	Section 501(c)(29) qualified nonprofit health insurance issuers.								
а	Is the organization licensed to issue qualified health plans in more than one state?			13a					
	Note: See the instructions for additional information the organization must report on Schedule O.				į				
b	Enter the amount of reserves the organization is required to maintain by the states in which the	40L	i		ļ				
_	organization is licensed to issue qualified health plans	13b							
	Enter the amount of reserves on hand  [ Did the organization receive any payments for indeer tanning services during the tax year?	<u>13c</u>	<u> </u>	140		<u>x</u>			
	Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul	ام <u>۱</u>		14a					
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune		or	14b					
13	excess parachute payment(s) during the year?	auoi	OI .	15		х			
	If "Yes," see instructions and file Form 4720, Schedule N								
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	t inco	me?	16		$\mathbf{x}_{-}$			
	If "Yes," complete Form 4720, Schedule O		•						
	,			Form	990 (	(2019)			

SOUTHERN OREGON REGIONAL ECONOMIC **DEVELOPMENT**, INC. 93-1062727 Page 6 Form 990 (2019) 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 on Schedule O See instructions x Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 27 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 27 b Enter the number of voting members included on 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 X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 X of officers, directors, trustees, or key employees to a management company or other person? 3 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Х Did the organization become aware during the year of a significant diversion of the organization's assets? X Did the organization have members or stockholders? 6 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X 7b persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X a The governing body? 8a X b Each committee with authority to act on behalf of the governing body? d8 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the X organization's mailing address? If "Yes," provide the names and addresses on Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No X 10a 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, 10b and branches to ensure their operations are consistent with the organization's exempt purposes? X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c X 13 Did the organization have a written whistleblower policy? 13 Х Did the organization have a written document retention and destruction policy? 14 14 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? a The organization's CEO, Executive Director, or top management official 15a X b Other officers or key employees of the organization 15b 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 X taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed None Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Another's website X Upon request Own website Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial

COLLEEN PADILLA - 541-773-8946 1311 EAST BARNETT ROAD, STE 301, MEDFORD OR 97504

State the name, address, and telephone number of the person who possesses the organization's books and records

Form **990** (2019)

statements available to the public during the tax year

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

Check if Schedule O contains a response or note to any line 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.

  See instructions for the order in which to list the persons above

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week	box	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)			than is bot	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) STEVE VINCENT	1.00							_		
PRESIDENT		X		X		<u> </u>		0.	0.	0.
(2) TERRI COPPERSMITH	1.00								_	_
VICE PRESIDENT		X		X			<u> </u>	0.	0.	0.
(3) MICHAEL LYNCH	1.00							<u> </u>	_	_
SECRETARY/TREASURER		X	ļ	Х		ļ		0.	0.	0.
(4) AARON AUSLAND	1.00									
DIRECTOR	1 22	X				ļ		0.	0.	0.
(5) JUDY DUFFY	1.00									•
DIRECTOR	1 00	X	_			-		0.	0.	0.
(6) CHRIS DUBOSE	1.00									•
DIRECTOR	1 00	X		ļ	_	_		0.	0.	0.
(7) LOWELL GIBSON	1.00	,,								0
DIRECTOR	1 00	X				$\vdash$		0.	0.	0.
(8) RON DOAN	1.00									0
DIRECTOR	1 00	X						0.	0.	0.
(9) PAT FAHEY	1.00	x						0.	о.	0
DIRECTOR	1.00	Λ						0.	0.	0.
(10) TOM FISCHER	1.00	x						0.	0.	0.
DIRECTOR	1.00	Λ						<u> </u>		
(11) TONY FLAGOR	1.00	х						0.	0.	0.
DIRECTOR	1.00	Λ						0.	<u> </u>	
(12) DARIN FOWLER DIRECTOR	1.00	х						0.	0.	0.
(13) ADAM HANKS	1.00							•	•	
DIRECTOR	1.00	x						0.	0.	
(14) ROB HERNANDEZ	1.00				-			Ŭ.		
DIRECTOR	1100	x						0.	0.	0.
(15) ALEX POYTHRESS	1.00									<del>-</del>
DIRECTOR		x						0.	0.	0.
(16) JOANNA QUIRKE	1.00									
DIRECTOR		x						0.	0.	0.
(17) DR. CATHY KEMPER-PELLE	1.00									
DIRECTOR		x						0.	0.	<u> </u>
932007 01-20-20										Form <b>990</b> (2019)

932007 01-20-20

Form **990** (2019)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
(A) (B) (C) (D) (E)									(F)				
Name and title	Average	Position Re				Reportable	Reportable		Est	timate	ed		
	hours per	box	(do not check more than one box, unless person is both an		h an	compensation	· · · · · · · · · · · · · · · · · · ·			ount	of		
	week	<u> </u>	cer an	d a d	recto	or/trus	tee)	from	from related		(	other	
	(list any	ecto						the	organizations		comp	oensa	ition
	hours for	튱	as			ate		organization	(W-2/1099-MISC)			om th	
	related	ste	ruste		۱.,	E S		(W-2/1099-MISC)			_	anızat	
	organizations below	al tru	onal (		loye	8 8						l relat	
	line)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former				orga	nızatı	ons
- <del></del>		Ē	Ë	ō	ş.	호등	윤			+			
(18) CHRISTINA KRUGER	1.00	<b>↓</b>				į			_	-			_
DIRECTOR		X				<u> </u>	<u> </u>	0.	0	•			<u>0.</u>
(19) JOAN RESNICK	1.00	1											
DIRECTOR		X						0.	0	•			0.
(20) ROY LINDSAY	1.00	]	li										
DIRECTOR		X						0.	_0				0.
(21) JAMES MENNANBACH	1.00												
DIRECTOR		X						0.	0				0.
(22) SANDRA SLATTERY	1.00												
DIRECTOR		X						0.	0				0.
(23) JEANNE PICKENS	1.00									Ť			
DIRECTOR		x						0.	0				0.
(24) SUSAN SEEREITER	1.00	-								╅			
DIRECTOR	1.00	x						0.	0				0.
(25) BRIAN SJOTHUN	1.00	41								•			
	1.00	х						0.	0				0.
DIRECTOR	1.00	Λ				-	-	-		+			
(26) BOB STROSSER	1.00	X						0.	0				0.
DIRECTOR								0.		_			0.
										0.			
c Total from continuation sheets to Part VI	i, Section A							88,362.	0	_			0.
d Total (add lines 1b and 1c)  2 Total number of individuals (including but no			1	- L						•			<u> </u>
	ot iimitea to tri	iose	iiste	uat	JOVE	;) WI	ЮТ	eceived more than \$100	,000 of reportable				0
compensation from the organization											-	Yes	No
2 Did the organization let any former officer	director trust	ا مما	·0\/ 0	mal	01/0		hia	host componented own	lovos on	Г			
3 Did the organization list any former officer,		ee, r	ey e	mpi	oye	e, or	riig	nest compensated emp	loyee on				X
line 1a? If "Yes," complete Schedule J for si					. 4				No	-	3		
4 For any individual listed on line 1a, is the su									ine organization				Х
and related organizations greater than \$150									4	$\vdash$	4		
5 Did any person listed on line 1a receive or a	•				-		eiat	ed organization or indivi	dual for services		_	1	v
rendered to the organization? If "Yes," com	<u>piete Scheaui</u>	e J t	or su	icn į	oers	on					5		<u> </u>
Section B. Independent Contractors													
Complete this table for your five highest cor	· ·									nsat	tion tr	om	
the organization_Report compensation for t	he calendar y	ear e	endir	ng w	/ith (	or w	ithin		<u>rear</u>				
(A) Name and business	addrass							(B) Description of s	00/1006	<u></u>	(C) mpen		n
Name and business	address	NC	NE	<u>;                                    </u>			-	Description of s	ervices		- Pen	Sauc	
							-						
							-	<del></del>					<del></del>
							_						
							_						
									ĺ				
													<b>-</b> ¢
2 Total number of independent contractors (in	Ī	ot lır	nited	d to	_	_	ted	above) who received m	ore than				
\$100,000 of compensation from the organiz	ration -				(	J			į				

See Part VII, Section A Continuation sheets

Form **990** (2019)

DEVELOPMENT, INC.

93-1062727

Part VII Section A. Officers, Directors, (A)	(B)	<u></u>	, , e <del>c</del>	. <u>, a</u>	(1) (C)		-31	(D)	(E)	(F)	
Name and title	Average hours per	(cl		Pos	ition that		ly)	Reportable compensation from	Reportable compensation from related	Estimated amount of other	
	week (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	
(27) DR SUE WALSH DIRECTOR	1.00	X						0.	0.	0	
(28) COLLEEN PADILLA EXECUTIVE DIRECTOR	40.00			x				88,362.	0.	_ 0	
										_	
,											
·										<del>.</del>	
			_  			_					
						_					
otal to Part VII, Section A, line 1c								88,362.			

Form 990 (2019)

Page 9

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D) Related or exempt Unrelated Revenue excluded Total revenue from tax under function revenue business revenue sections 512 - 514 1 a Federated campaigns 1a 345,927. 1b b Membership dues Fundraising events 1c 1d d Related organizations e Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above 1f 1g \$ g Noncash contributions included in lines 1a-1f 345,927 Total. Add lines 1a-1f **Business Code** 115,154. 115,154 2 a INTEREST FROM LOAN PRO 900099 Program Service Revenue ь <u>PLANNING & DEVELOPMENT</u> 900099 79,200. 79,200. 75,000. c JOB GROWTH & BUSINESS 900099 75,000. 2,601 FEES FROM LOAN PROGRAM 900099 2,601 f All other program service revenue 271,955 Total. Add lines 2a-2f Investment income (including dividends, interest, and 108,208. 108,208. other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (II) Personal (i) Real 6 a Gross rents 6a 6b Less. rental expenses 6¢ Rental income or (loss) d Net rental income or (loss)  $\triangleright$ (i) Securities (II) Other 7 a Gross amount from sales of assets other than inventory 7a b Less cost or other basis Other Revenue and sales expenses 7b 7с c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ contributions reported on line 1c) See 8a 107,846 Part IV. line 18 0 b Less direct expenses 107,846. 107,846 c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 <u>9a</u> 9b **b** Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances 10a b Less cost of goods sold c Net income or (loss) from sales of inventory **Business Code** Miscellaneous 900099 19,519 19,519. 11 a OTHER INCOME d All other revenue 19,519 Total. Add lines 11a-11d Total revenue. See instructions 853,455 <u>235,573.</u> 12

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

	Check if Schedule O contains a respon		this Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	88,362.	16,612.	71,750.	
6	Compensation not included above to disqualified		i		
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	298,956.	138,523.	160,433.	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	30,390.		30,390.	
9	Other employee benefits				
10	Payroll taxes	39,044.	14,917.	24,127.	
11	Fees for services (nonemployees)				
а	Management				<u> </u>
b	Legal	125.	125.		
С	Accounting	54,775.		54,775.	
d	· · · · F		-		
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g		10 100		10 100	
	column (A) amount, list line 11g expenses on Sch 0.)	18,138.		18,138.	
12	Advertising and promotion	6,143.		6,143.	
13	Office expenses	12,431.		12,431.	
14	Information technology			· · · · · · · · · · · · · · · · · · ·	
15	Royalties	20 074	0 550	10 504	
16	Occupancy	28,074.	8,550.	19,524.	
17	Travel	9,441.	3,321.	6,120.	
18	Payments of travel or entertainment expenses		•		
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	7,241.	7,241.		
20	Interest	1,441.	/,241.		
21	Payments to affiliates	1,996.		1,996.	
22	Depreciation, depletion, and amortization	4,355.		4,355.	
23	Other expanses Itemize expanses not covered	4,333.		4,333.	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
•	SPECIAL PROJECTS	200,679.		200,679.	
a b	OTHER EXPENSES	32,602.	2,260.	30,342.	
c	BAD DEBTS	30,406.	30,406.	30/3121	
d	REPAIRS AND MAINTENANCE	10,609.	30,4000	10,609.	
	All other expenses	20,241.	1,462.	18,779.	
25 25	Total functional expenses Add lines 1 through 24e	894,008.	223,417.	670,591.	0
<u>25</u> 26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2019)
Part X Balance Sheet DEVELOPMENT, INC.

Pa	rt X	Balance Sheet			<u> </u>		
		Check if Schedule O contains a response or not	e to a	ny line in this Part X			
	•				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			44,020.	1	45,396
	2	Savings and temporary cash investments			2,569,216.	2	2,523,843
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			4		
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subst					
		controlled entity or family member of any of thes	e pers	sons		5	
	6	Loans and other receivables from other disqualif	ied pe	rsons (as defined			
		under section 4958(f)(1)), and persons described	in se	ction 4958(c)(3)(B)		6	
ß	7	Notes and loans receivable, net			2,959,622.	7	2,877,229
Assets	8	Inventories for sale or use				8	
Ä	9	Prepaid expenses and deferred charges			10,393.	9	2,951
	10a	Land, buildings, and equipment cost or other					
		basis Complete Part VI of Schedule D	10a	21,932.		1	
	b	Less: accumulated depreciation	10b	14,878.	4,301.	10c	7,054
	11	Investments - publicly traded securities				11	
	12	Investments - other securities See Part IV, line 1	1			12	
	13	Investments - program-related See Part IV, line	•		13		
	14	Intangible assets		14			
	15	Other assets See Part IV, line 11	26,061.	15	34,559		
	16	Total assets. Add lines 1 through 15 (must equa	5,613,613.	16	5,491,032		
	17	Accounts payable and accrued expenses	176,601.	17	165,268		
	18	Grants payable	• •				
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete F	art IV	of Schedule D		21	
ွှ	22	Loans and other payables to any current or form	er offi	cer, director,			
≝∣		trustee, key employee, creator or founder, subst	antıal	contributor, or 35%			
Liabilities		controlled entity or family member of any of thes	e pers	ons		22	
<b>-</b>	23	Secured mortgages and notes payable to unrela	ted th	ird parties	642,363.	23	571,668
	24	Unsecured notes and loans payable to unrelated	l third	parties		24	
	25	Other liabilities (including federal income tax, pay	/ables	to related third			
		parties, and other liabilities not included on lines	17-24	) Complete Part X			
		of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			<u>818,964.</u>	26	736,936
,,		Organizations that follow FASB ASC 958, che	ck hei	e ▶ X			
-Net Assets or Fund Balances		and complete lines 27, 28, 32, and 33.					
lan	27	Net assets without donor restrictions			1,995,900.	27	1,952,707
B B	28	Net assets with donor restrictions			2,798,749.	28	2,801,389
un		Organizations that do not follow FASB ASC 95	58, ch	eck here 🕨 🔲			
<u>ב</u>		and complete lines 29 through 33.					
s	29	Capital stock or trust principal, or current funds			<u></u>	29	
ise	30	Paid-in or capital surplus, or land, building, or eq	uipme	nt fund	·	30	
Ž	31	Retained earnings, endowment, accumulated ind	come,	or other funds		31	
ğ	32	Total net assets or fund balances			4,794,649.	32	4,754,096
١	33	Total liabilities and net assets/fund balances		<u> </u>	5,613,613.	33	5,491,032

Forn	1990 (2019) DEVELOPMENT, INC.	93-	10627	127	Pa	ge 12			
Pa	rt XI Reconciliation of Net Assets								
	Check if Schedule O contains a response or note to any line in this Part XI								
	•								
1	Total revenue (must equal Part VIII, column (A), line 12)	1		85	3,4	<u>55.</u>			
2	Total expenses (must equal Part iX, column (A), line 25)	2		89	4,0	08.			
3	Revenue less expenses Subtract line 2 from line 1	3		<4	0,5	53.			
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	4,	<u>79</u>	4,6	49.			
5	Net unrealized gains (losses) on investments	5							
6	Donated services and use of facilities	6							
7	Investment expenses	7							
8									
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 32,								
	column (B))								
Part XII Financial Statements and Reporting									
	Check if Schedule O contains a response or note to any line in this Part XII					<u>x</u>			
			_		Yes	No			
1	Accounting method used to prepare the Form 990 Cash X Accrual Other								
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0							
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		L	2a		X			
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	l on a							
	separate basis, consolidated basis, or both								
	Separate basis Consolidated basis Both consolidated and separate basis								
b	Were the organization's financial statements audited by an independent accountant?			2b	X				
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basıs,							
	consolidated basis, or both								
	X Separate basis Consolidated basis Both consolidated and separate basis								
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,	1						
	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 on Sch								
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	igle Aud	ıt						
	Act and OMB Circular A-133?		-	3a	<u>_x</u>				
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	red aud	ıt	- 1					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b	X	L			

Form **990** (2019)

# SCHEDULE C (Form 990 or 990-EZ)

# **Political Campaign and Lobbying Activities**

OMB No	1545-0047
20	119

Open to Public Inspection

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

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

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

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

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

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy

	, (See Separate mod detrone), then				
•	Section 501(c)(4), (5), or (6) organiza	tions Complete Part III.			
Nar	ne of organization SOUTHER	N OREGON REGIONAL	ECONOMIC	Emp	oloyer identification number
	DEVELOP	MENT, INC.			93-1062727
Pa	art I-A Complete if the org	ganization is exempt unde	er section 501(c)	or is a section 527	organization.
L		•			
_	Drawda a dagawatina af the arrange			in Doct IV	
	Provide a description of the organization	•	ii campaign activities		*
	Political campaign activity expendit				\$
3	Volunteer hours for political campa	ign activities			· · · · · · · · · · · · · · · · · · ·
Pa	art I-B Complete if the org	ganization is exempt unde	er section 501(c)	(3).	<del></del>
1	Enter the amount of any excise tax	incurred by the organization unde	er section 4955	<b>&gt;</b>	\$
2	Enter the amount of any excise tax	incurred by organization manage	rs under section 495	5	\$
	If the organization incurred a section				Yes No
	a Was a correction made?	,,			Yes No
	o If "Yes," describe in Part IV				
_		ganization is exempt unde	er section 501(c)	, except section 501	(c)(3).
1	Enter the amount directly expended	d by the filing organization for sec	tion 527 exempt fund	ction activities	\$
	Enter the amount of the filing organ				
	exempt function activities			<b>&gt;</b> :	\$
3	Total exempt function expenditures	s Add lines 1 and 2 Enter here an	d on Form 1120-POL	<b>-</b> ,	
	line 17b			<b>&gt;</b> :	6
4	Did the filing organization file Form	1120-POL for this year?			Yes No
5	Enter the names, addresses and er	•	l) of all section 527 pe	olitical organizations to whi	
Ū	made payments For each organiza	•		<del>-</del>	
	contributions received that were pr	•			
	political action committee (PAC) If	• •	• •	,	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	(a) Name	(b) Address	(0) 2.114	filing organization's	contributions received and
				funds If none, enter -0-	promptly and directly
					delivered to a separate
					political organization. If none, enter -0-
					it florie, eriter to
					<u> </u>
				1	

LHA

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

Schedule C (Form 990 or 990-EZ) 2019

932041 11-26-19

Schedule C (Form 990 or 990-EZ) 2019  Part II-A   Complete if the org	DEVELOPMEN	T, INC.	- F01(a)(2) and fil	93-	1062727 Pa	ige 2
Part II-A Complete if the org section 501(h)).	ganization is ex	empt under sectio	on 50 I(c)(3) and fil	ea Form 3/08 (6	election under	
	tion holongs to an a	 Iffiliated group (and list i	n Part IV each affiliated	group member's na	To oddrose FIN	
	re of excess lobbying	= ' '	TI Fall IV each annated	group member s nai	ne, address, chi,	
. —	•	and "limited control" pr	ovisions annly			
Limi	ts on Lobbying Exp		-	(a) Filing organization's totals	(b) Affiliated gro	oup
			· 	totais		
1a Total lobbying expenditures to infl	uence public opinio	n (grassroots lobbying)			<del></del>	
b Total lobbying expenditures to infl	uence a legislative b	ody (direct lobbying)			<del> </del>	
c Total lobbying expenditures (add I	ines 1a and 1b)				ļ	
d Other exempt purpose expenditur	es				<u></u>	
e Total exempt purpose expenditure	es (add lines 1c and	1d)				
f Lobbying nontaxable amount Ent					<u> </u>	
If the amount on line 1e, column (a) o	or (b) is: The le	obbying nontaxable am	nount is:			
Not over \$500,000	20%	of the amount on line 1e	·			
Over \$500,000 but not over \$1,00	<u>0,000                                 </u>	000 plus 15% of the exc	cess over \$500,000			
Over \$1,000,000 but not over \$1,5	500,000 \$175,	000 plus 10% of the exc	cess over \$1,000,000.			
Over \$1,500,000 but not over \$17	,000,000 \$225,	000 plus 5% of the exce	ess over \$1,500,000			
Over \$17,000,000	\$1,00	0,000				
	=					
g Grassroots nontaxable amount (er	nter 25% of line 1f)					
h Subtract line 1g from line 1a if zer	o or less, enter -0-					
i Subtract line 1f from line 1c If zero	o or less, enter -0-					
j If there is an amount other than ze reporting section 4911 tax for this	_	or line 1i, did the organiz	ation file Form 4720		Yes	] No
	4-Year A	veraging Period Under	Section 501(h)			
(Some organizations t		501(h) election do not arate instructions for li	•	of the five columns	oelow.	
		enditures During 4-Ye				
		T				
Calendar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) Total	
2a Lobbying nontaxable amount						
b Lobbying ceiling amount						
(150% of line 2a, column(e))		_				
c Total lobbying expenditures						
d Grassroots nontaxable amount						
e Grassroots ceiling amount						
(150% of line 2d, column (e))					-	

Schedule C (Form 990 or 990-EZ) 2019

Schedule C (Form 990 or 990-EZ) 2019 DEVELOPMENT, INC. 93-1062727 Page 3

Part II-B | Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 5 Section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, answered "Yes."  1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 4 Current year 5 Carryover from last year 7 Cotal 8 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 9 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 9 Taxable amount of lobbying and political expenditures (see instructions) 9 Taxable amount of lobbying and political expenditures (see instructions)	or each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(I	b)
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of a Volunteers?  b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  c Media advertisements?  d Mailings to members, legislators, or the public?  e Publications, or published or broadcast statements?  f Grants to other organizations for lobbying purposes?  g Direct contact with legislators, their staffs, government officials, or a legislative body?  h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  i Other activities?  lother activities?  lot the activities in line 1 cause the organization to be not described in section 501(c)(3)?  b if "ves," enter the amount of any tax incurred under section 4912  c if "ves," enter the amount of any tax incurred by organization managers under section 4912  d if the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  2art III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?  3 Did the organization agree to carry over lobbiving and political campaign activity expenditures from the prior year?  1 Dues, assessments and similar amounts from members  501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, answered "Yes."  1 Dues, assessments and similar amounts from members  5 Section 162(e) nondeductible lobbying and political expenses for which the section 527(f) tax was paid).  a Current year  2 Description of the excess of the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?  5 Taxable amount of lobbying and political expenditures (see instructions)	the lobbying activity	Yes	No	Amo	ount
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a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did if file Form 4720 for this year?  2art III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Did the organization agree to carry over lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  2 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenses for which the section 527(f) tax was paid). 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expend	local legislation, including any attempt to influence public opinion on a legislative matter				
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501(c)(6).    Vere substantially all (90% or more) dues received nondeductible by members?   1	d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
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1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 5 D1(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, answered "Yes."  1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  a Current year b Carryover from last year c Total 2 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) 5	001(0)(0).			Yes	N
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# **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public

OMB No 1545-0047

Inspection

SOUTHERN OREGON REGIONAL ECONOMIC Name of the organization DEVELOPMENT. INC.

Employer identification number 93-1062727

Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, Iin	ne 6	·
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		<del></del>
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advise	ed funds
-	are the organization's property, subject to the organization's	_	☐ Yes ☐ No
6	Did the organization inform all grantees, donors, and donor a	•	
Ū	for charitable purposes and not for the benefit of the donor of		-
	impermissible private benefit?		Yes No
Pa		ganization answered "Yes" on Form 990, P	
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (for example, recrea		historically important land area
•	Protection of natural habitat		a certified historic structure
	Preservation of open space	<del></del> -	
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form o	of a conservation easement on the last
	day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
ь	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic str	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired	• •	
_	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re-	leased, extinguished, or terminated by the	
_	year >	,	
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the per	·	
	violations, and enforcement of the conservation easements if	• •	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing conse	ervation easements during the year
	<b>&gt;</b>		
7	Amount of expenses incurred in monitoring, inspecting, hand	iling of violations, and enforcing conservati	on easements during the year
	<b>▶</b> \$		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h	n)(4)(B)(ı)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservati	on easements in its revenue and expense s	statement and
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial stateme	nts that describes the
	organization's accounting for conservation easements		
Pai	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or Ot	her Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8	
1a	If the organization elected, as permitted under FASB ASC 95	8, not to report in its revenue statement ar	nd balance sheet works
	of art, historical treasures, or other similar assets held for public.	olic exhibition, education, or research in fur	therance of public
	service, provide in Part XIII the text of the footnote to its finar	ncial statements that describes these items	3.
b	If the organization elected, as permitted under FASB ASC 95	8, to report in its revenue statement and b	alance sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furthe	erance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		<b>&gt;</b> \$
2	If the organization received or held works of art, historical treatments	asures, or other similar assets for financial	gaın, provide
	the following amounts required to be reported under FASB A	SC 958 relating to these items	
а	Revenue included on Form 990, Part VIII, line 1	<del>-</del>	<b>&gt;</b> \$
ь	Assets included in Form 990, Part X		<b>▶</b> \$

932051 10-02-19

Schedule D (Form 990) 2019

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

Sche		MENT, INC.								Page 2
Pa	t III Organizations Maintaining (	Collections of A	rt, His	torical Tr	easures,	or Othe	er <u>Simi</u>	lar Asse	ts(continu	ied)
3	Using the organization's acquisition, access	ion, and other recor	ds, chec	k any of the	following the	at make s	significan	t use of its		
	collection items (check all that apply)									
а	Public exhibition	•	d $\square$	Loan or exc	hange progr	am				
b	Scholarly research		e 🔲	Other						
С	Preservation for future generations							_		
4	Provide a description of the organization's c	ollections and expla	un how tl	ney further t	he organizat	ion's exe	mpt purp	ose in Par	t XIII	
5	During the year, did the organization solicit									
	to be sold to raise funds rather than to be m	aintained as part of	the orga	nization's c	ollection?				Yes	☐ No
Pai	t IV Escrow and Custodial Arrar					"Yes" on	Form 99	0, Part IV,	line 9, or	
	reported an amount on Form 990, Pa	urt X, line 21.		•						
1a	Is the organization an agent, trustee, custoo	lian or other interme	diary for	contribution	ns or other as	ssets not	ıncluded			
	on Form 990, Part X?		•						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing	table <sup>.</sup>						
		·	·						Amount	
С	Beginning balance						1c			
	Additions during the year						1d			
	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on F	Form 990. Part X. line	e 21. for	escrow or c	ustodial acco	ount liabil			Yes	□ No
	If "Yes," explain the arrangement in Part XIII									
Pai										
		(a) Current year	Τ.	rior year	(c) Two year			years back	(e) Four v	ears back
1a	Beginning of year balance	10,000,000	1-7-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	107 72		1,	<b>,</b> , ,	147	
h	Contributions		<u> </u>							
0	Net investment earnings, gains, and losses		<u> </u>							
ا	Grants or scholarships	-	<del>  -</del>							
u	Other expenditures for facilities									
е	·	ļ				1				
	and programs		<del>                                     </del>	_					-	
Ţ	Administrative expenses	<del></del>	1							
g	End of year balance		() 1		  -\\  - - -				<u> </u>	
2	Provide the estimated percentage of the cur	rent year end baland	-	g, column (a	a)) neid as.					
a	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
С		%								
	The percentages on lines 2a, 2b, and 2c sho									
3a	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are held a	ind administe	ered for the	ne organi	zation		
	by									es No
	(i) Unrelated organizations								3a(i)	
	(ii) Related organizations								3a(ii)	
b	If "Yes" on line 3a(ii), are the related organization	=							3b	
4	Describe in Part XIII the intended uses of the		owment	funds						
Pai	t Ⅵ									
	Complete if the organization answere	d "Yes" on Form 99	0, Part I\	/, line 11a. S	See Form 990	D, Part X,	line 10			
	Description of property	(a) Cost or o		· · ·	or other	(c) A	ccumulat	ed	(d) Book v	√alue
		basis (invest	ment)	basis	(other)	der	preciation	1		
1a	Land									
b	Buildings									
	Leasehold improvements									
	Equipment									
	Other			2	1,932.		14,8	78.	7	,054.
	. Add lines 1a through 1e (Column (d) must e	egual Form 990, Part	X, colur					<b>&gt;</b>		,054.

Schedule D (Form 990) 2019

Schedule	D (Form	990)	2019

		Other Securities.	TIVE
Schedule [	) (Form 990) 2019	DEVELOPMENT,	TNC

Complete if the organization answered "Yes" ( (a) Description of security or category (including name of security)	on Form 990, Part IV, line (b) Book value	11b See Form 990, Part X, line 12 (c) Method of valuation: Cost or end	-Of-vear market value
	(b) Book value	(c) Metriod of Valuation Cost of end	-or-year market value
(1) Financial derivatives			
(2) Closely held equity interests			<del></del>
(3) Other	·		<u> </u>
(A)	-		<u> </u>
(B)			<u> </u>
(C)			
(D)		<del>-</del> ::	
(E)	·		<del></del>
<u>(F)</u>			<del>_</del>
(G)		<del> </del>	
(H)	****		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			<del></del>
	F 000 D-+ IV I	11. Can Farm 000 Part V Ivan 10	
Complete if the organization answered "Yes" (a) Description of investment	on Form 990, Part IV, line (b) Book value	(c) Method of valuation Cost or end	of year market value
	(b) book value	(c) Metriod of Valuation Cost of end	or year market value
(1)		-	
(2)			
(3)			
(4)		-	
(5)			
(6)			
(8)	•		
(9)			<del></del> ,
Total (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets.	<del></del>	1	
	F 000 Dort IV line	11d Cas Form 000 Dark V line 15	
Complete if the organization answered "Yes" o	on Form 990, Part IV, line Description	11d See Form 990, Part X, line 15	(b) Book value
			(b) Book Value
(1)	<del>-</del>		
(2)			
(3)			
(4)	·		
(5)			
(6)			· <u> </u>
(7)			
(8)	-		
(9)	45)		
Total. (Column (b) must equal Form 990, Part X, col (B) line  Part X Other Liabilities.	15)		
<b></b>	on Form 000 Ded 1/ Im-	110 or 11f Coo Form 000 Dark V line 05	
Complete if the organization answered "Yes" of a Description of liability	on rorm 990, Part IV, line	THE OFFITE SEE FORM 990, Part X, line 25	(b) Book value
			(b) DOOK VAIGE
(1) Federal income taxes	<u> </u>		
(2)			
(3)			
<u>(4)</u>			
(5)			
(6)			
(7)			
(8)	<del>-</del>		
(9)	as 1		<del></del>
Total. (Column (b) must equal Form 990, Part X, col (B) line	25.1	▶	
2. Liability for uncertain tax positions in Part XIII, provide		a the ergonization's financial statements to	not roports the

932053 10-02-19

Schedule D (Form 990) 2019

	edule D (Form 990) 2019 DEVELOPMENT, INC.			0627 <u>27 Page 4</u>
Pai	rt XI Reconciliation of Revenue per Audited Financial Sta	atements With Rever	nue per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, II	ne 12a		
1	Total revenue, gains, and other support per audited financial statements	<del></del>	1	853,455.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII )	2d		
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	853,455.
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		
c	Add lines 4a and 4b	<u> </u>	4c	0.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12	.)	5	853,455.
Par	rt XII Reconciliation of Expenses per Audited Financial St		nses per Return	
	Complete if the organization answered "Yes" on Form 990, Part IV, III	·		
1	Total expenses and losses per audited financial statements	10 724	1	894,008.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			031/0000
٤,	Donated services and use of facilities	2a		
а ь		2b		
0	Prior year adjustments			
C	Other losses	2c		
a	Other (Describe in Part XIII )	2d	<del></del>	0
e	Add lines 2a through 2d		2e	<u>0.</u> 894,008.
3	Subtract line 2e from line 1		3	094,000.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	1 . 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII )	4b		•
-	Add lines 4a and 4b		4c	0.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 1 AXIII Supplemental Information.	8.)	5	894,008.
lines	de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide a ct X, Line 2:		Part V, line 4, Part X,	iine 2; Part XI,
	NAGEMENT BELIEVES IT HAS APPROPRIATE SU	PPORT FOR ANY	TAX POSITI	ONS
			<u>-</u>	
				<del></del>
	<del>.</del>			

# **SCHEDULE G**

(Form 999 or 990-EZ)

# **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service	<b>▶</b> Go	Attach to Form 990 to www.irs.gov/Form990 for instr				tion.		Open to Public Inspection
Name of the organization		N OREGON REGIONAL					oloyer id	entification number
		MENT, INC.				93	-1062	2727
	-	Complete if the organization answer	ered "Y	'es" o	n Form 990, Part IV,	line 17 Fo	rm 990-E	Z filers are not
·	complete this par							<del></del>
	=	sed funds through any of the follow	-					
a Mail solicitat					overnment grants			
	email solicitations			-	nment grants			
c Phone solicit		g Special	tundra	using	events			
d In-person so					£6			
-		or oral agreement with any individua						. 🗆
		art VII) or entity in connection with p			-		Ye:	
	-	viduals or entities (fundraisers) pursi	Jant to	agree	ements under which	tne fundra	iser is to	be
compensated at le	ast \$5,000 by the	e organization	_					
(2) Name and address			(ıii) fundr	Did	<i>"</i> . 0	(v) Amou	ınt paid	(vi) Amount paid
(i) Name and address or entity (fund		(ii) Activity	have c	aiser ustody	(iv) Gross receipts from activity	to (or reta		to (or retained by)
or ording (rand			contrib	utions?		listed in	col (i)	organization
			Yes	No				
<u> </u>			<u> </u>					<u> </u>
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			<u> </u>					+
						-		<del> </del>
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<del></del>			1					<del>                                     </del>
otal								
	ch the organizatio	n is registered or licensed to solicit	contrib	utions	or has been notified	d it is exem	not from r	registration
or licensing	on the organizatio							- Jon Line IV
			*****					
			-					
						_		
					<del></del>			

932081 09-11-19

Schedule G (Form 990 or 990-EZ) 2019

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

F	irt i	Fundraising Events. Complete if the of fundraising event contributions and grant properties.				
	•		(a) Event #1 BUSINESS DEVELOPMENT	(b) Event #2	(c) Other events None	(d) Total events (add col (a) through
e			(event type)	(event type)	(total number)	col (c))
Revenue	1	Gross receipts	107,846.			107,846
	2	Less Contributions				
	3	Gross income (line 1 minus line 2)	107,846.			107,846
	4	Cash prizes				
S	5	Noncash prizes			<del></del>	
Direct Expenses	6	Rent/facility costs				
rect E	7	Food and beverages				
۵	8 9	Entertainment Other direct expenses				
	10	Direct expense summary Add lines 4 through Net income summary Subtract line 10 from I				107,846.
Pa	rt I			1 990, Part IV, line 19, or	reported more than	107,040
		\$15,000 on Form 990-EZ, line 6a	1	(L) Dull taba (instant		(-1) Total carrier (add
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add coi (a) through col (c)
	1	Gross revenue				
ses	2	Cash prizes				
xper	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				,
	5	Other direct expenses				,
	6	Volunteer labor	Yes % No	Yes % No	Yes % No	
	7	Direct expense summary Add lines 2 through	n 5 ın column (d)		•	
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
9	Ent	er the state(s) in which the organization condu	icte gaming activities			
а	ls ti	he organization licensed to conduct gaming an	ctivities in each of these	states?		Yes No
		re any of the organization's gaming licenses re Yes," explain	·	•	year?	Yes No
						rm 990 or 990-EZ) 2019

Sch	nedule G (Form 990 or 990-EZ) 2019 DEVELOPMENT, INC.	93-1	062	727	Page 3
11	Does the organization conduct gaming activities with nonmembers?		$\overline{}$	Yes	□ No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed				
	to administer charitable gaming?			Yes	☐ No
13	Indicate the percentage of gaming activity conducted in				
á	a The organization's facility		13a		%
t	b An outside facility	Ī	13b		%
	Enter the name and address of the person who prepares the organization's gaming/special events books and recor	ds	·		
	Name ►				
	Address >				
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		<u> </u>	Yes	☐ No
t	o If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amo	unt			
	of gaming revenue retained by the third party > \$				
•	o If "Yes," enter name and address of the third party				
	Name				
	Address				
16	Gaming manager information				
	Name				
	Gaming manager compensation > \$				
	Description of services provided				
	<del></del>				
	Director/officer Employee Independent contractor				
17	Mandatory distributions				
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to				
	retain the state gaming license?		\	es (	☐ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent	n the			
_	organization's own exempt activities during the tax year > \$				
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v);	and Part	III, lin	es 9,	9b, 10b,
	15b, 15c, 16, and 17b, as applicable Also provide any additional information. See instructions.				
	<del></del>				
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# SOUTHERN OREGON REGIONAL ECONOMIC DEVELOPMENT, INC. 93-1062727 Page 4 Schedule G (Form 990 or 990-EZ) Part IV | Supplemental Information (continued)

# **SCHEDULE 0**

(Form 990.or 990-EZ)

Department of the Treasury

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. ► Go to www.irs.gov/Form990 for the latest information. **Open to Public** 

Inspection

Internal Revenue Service Name of the organization

SOUTHERN OREGON REGIONAL ECONOMIC

**Employer identification number** 

DEVELOPMENT, INC
Form 990, Part VI, Section B, line 11b:
FORM 990, PART VI, LINE6b - ORGANIZATION'S PROCESS TO REVIEW FORM 990
THE EXECUTIVE DIRECTOR REVIEWS THE 990 PRIOR TO FILING
Form 990, Part VI, Section B, Line 12c:
PARTIES ARE REQUIRED TO REVIEW AND SIGN POLICY ON AN ANNUAL BASIS.
Form 990, Part VI, Section C, Line 19:
GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
GOVERNING DOCUMENTS ARE MADE AVAILABLE UPON REQUEST.
FORM 990 PART XII LINE 2C
THE OVERSIGHT PROCESS AND SELECTION PROCESS OF INDEPENDENT ACCOUNTANTS
HAS NOT CHANGED FROM THE PRIOR YEAR.