Form **990** 

# $\begin{array}{c} 2949301300109 \\ \text{Return of Organization Exempt From Income Tax} \end{array}$

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2016

Departmen	t of t	he 1	reasur
Internal Re	venue	Se	LAICE

		the Treasury ue Service  Information about Form 990 and its instructions		.(	
_			is at www.irs.gov/ro	09/3	
_	Check		io, and ending		er identification no.
_ ;	applicat	ole TITIMED HALTEN ECONOMIC DELICITO	DPMENT		3154152
		Citalige		_	one number
	Name cl	·		•	3) 837-5280
	Initial re		: ł	G Gross re	
_	Termina		<u>`</u> _	-	310,200.
=		F Name and address of Principal Officer BRUCE LYON	İ	H(a) is this	a group return
ш.	Арр, ре	401 AVENUE B NW			iliates? Yes 🔀 No
		WINTER HAVEN, FL 33881-4606		<b>H(b)</b> Are all	
<u> </u>	Tax Exe		a)(1) or 527	includ	ed? <b>Yes  No</b> 'attach a list (See instructions)
		te: > WWW.WHEDC.COM			exemption no
		organization Corporation Trust Association Other	Year of Formati		M St of legal domicile
	art 18		D	··· 2011	THE OF OTTOGRAP CONTINUE
A	T	<u> </u>			· · · · · · · · · · · · · · · · · · ·
C	1	Briefly describe the organization's mission of most significant activities:	NE EWDANGE	- OF	
t i		CREATING HIGH QUALITY JOBS THROUGH TO			
V	1	BUSINESSES AND INDUSTRY AND BY ATTRA	CTING NEW I	ROSINE	SSES AND
!G	2	INDUSTRY TO THE WINTER HAVEN AREA.			<del></del>
t o		Check this box ▶ ☐ If the organization discontinued its operations or dis	sposed of more that a	25% of it as	35.
еe	3	Number of voting members of the governing body (Part VI, line 1a)		4	35.
sr . n	4	Number of independent voting members of the governing body (Part VI,		5	2.
& n a		Total number of individuals employed in calendar year 2016 (Part V, line 2	2a)	6	0.
n	6   7-	Total number of volunteers (estimate if necessary)		7a	0.
<u>ş</u> e <u>⊃e</u> N	_	Total unrelated business revenue from Part VIII, column (C), line 12		H	<u> </u>
	/ D	Net unrelated business taxable income from Form 990-T, line 34	Prior Year	<u>  7b</u>	Current Year
-©R	8	Cantributions and events (Part VIII line 1b)	149,	000	149,750.
1 E	9	Contributions and grants (Part VIII, line 1h) Program services revenue (Part VIII, line 2g)		000.	160,417.
<u>~</u> ,∨	1 -	Investment Income (Part VIII, column (A), lines 3, 4, and 7d)	143,	68.	101.
N		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c,10c and 11e)		130.	0.
j E O	12	Total revenue-add lines 8 through 11 (must equal Part VIII, Column (A), line 12)	294.		310,268.
j -	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		000.	0.
5 -	14	Benefits paid to or for members (Part IX, column (A), line 4)			
₹ E	15	Salaries, other compensation, employee benefits (Part IX, cl (A), lines 5-10).	205,	818.	205,430.
) P		Professional fundraising-fees-(Part-IX-, column-(A), line 11e)		0.	
N S		Total fundraising expenses (Rart.IX, column (D), line 25)	· · · · · · · · · · · · · · · · · · ·		
Ĕ	I	Other expenses (Part IX, column (A), lines 11a-41d, 11f-24e)	65.	901.	65,081.
S	18	Total Expenses Add lines 13-17 (must equal Part IX, column (A), line 25)			270,511.
	19	Revenue less expenses Subtract line 18 from line 12		479.	39,757.
Α			Beginning of Curre		End of Year
A SSE	20	Total assets (Par X, InnGGDEN, UT	230,	652.	249,085.
ŦĔ	21	Total liabilities (Part X, line 26)	91,	646.	70,322.
Ś	22	Net assets or fund balances Subtract line 21 from line 20	139,	006.	178,763.
P	nt II	Signature Block			
		Uader penalties of perjury, I doclare that I have examined this return, including accom-	npanying schedules and	tatements, a	nd to the best of my knowledge
O: -		and belief this true, correct, and complete. Declaration of preparer (other than office	er) is based on all informa	tion of which	Z/16
Sig		Signature of officer	····	Date //	7/0
He	re	Signature of officer BRUCE LYON (PRESIDENT)			
		Type or print name and title			
Prin	prepa			k if self-	PTIN
TH	OMA			oyed ▶ 📙	P00296526
Pai	d		CPA, PA	Firm's EIN	
Pre	pare		<u></u>	Phone no	
	e On	WINTER HAVEN, FL 33881		<u> </u>	(863) 294-3568
May	the IF	RS discuss this return with the preparer shown above? (see instructions)			Yes No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

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Form **990** (2016)

For	m 990 (2016) WINTER HAVEN ECONOMIC DEVELOPMENT	45-3154152	Page 2
G	Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in Part III		
1	Briefly describe the organization's mission  CREATING HIGH QUALITY JOBS THROUGH THE EXPANSION OF	EVICATIO	
	BUSINESSES AND INDUSTRY AND BY ATTRACTING NEW BUSINE		
	INDUSTRY TO THE WINTER HAVEN AREA.	DDED AND	
2	Did the organization undertake any significant program services during the year which were not listed of the prior Form 990 or 990-EZ?  If "Yes," describe these new services on Schedule O	on Yes 🛚	X No
3	Did the organization cease conducting or make significant changes in how it conducts any program services?	☐ Yes 🛭	☑ No
4	If "Yes," describe these changes on Schedule O  Describe the exempt purpose achievements for each of the organization's three largest program service Section 501(c)(3) and (4) organization and 4947(a)(1) trusts are required to report the amount of grants others, the total expenses, and revenue, if any, for each service reported		
		venue \$	)
	DEVELOPED PROMOTIONAL MATERIALS TO IMPROVE THE ORGAN	· ·	RESENCE
	IN THE COMMUNITY AND FOSTER EXPANSION OF EXISTING BU	SINESS AND	INDUSTRY
	ATTRACT NEW HIGH-SKILL, HIGH WAGE BUSINESS AND INDUST		
	AND JOB OPPORTUNITIES FOR WINTER HAVEN RESIDENTS; BROWN BASE AND ENHANCE DELATIONSHIPS WITH LOCAL DECIONAL		
	BASE AND ENHANCE RELATIONSHIPS WITH LOCAL, REGIONAL, INTERNATIONAL ECONOMIC DEVELOPMENT ORGANIZATIONS AND		ONAL AND
	INTERMITORAL ECONOMIC DEVELOPMENT ORGANIZATIONS AND	AGENCIES.	
	(Code ) (Expenses \$ including grants of \$ ) (Rev	venue \$	
	/ (Code ) (Expenses 4 including grains of 4 ) (not	venue ψ	,
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4c	(Code ) (Expenses \$ including grants of \$ ) (Rev	venue \$	)
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		···	
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•			
4d			
	(Expenses \$ including granst of \$ )(Revenue \$  ■ Total program service expenses ▶		
46	. I viai program service expenses P		

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Form **990** (2016)

Form 990 (2016) WINTER HAVEN ECONOMIC DEVELOPMENT Part V. 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		х
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instruction)?	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 1	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,			
	assesments, 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 accounts where donors have the right to provide			
	advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schdule D, Part I	6	1	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	1	X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian			-
_	for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation	!		
	services? If "Yes," complete Schedule D, Part IV.	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,			
-	permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part VI,			
•	VII, VIII, IX, or X as applicable			4
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	
ь	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of			
	its total assets reported in Part X, line 16° If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of			
	its total assets reported in Part X, line 16° If "Yes," complete Schedule D, Part VIII	11c		X
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 footenote 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 year? If "Yes," complete			
	Schedule D, Part XI, XII, and XIII	12a	x	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"			
-	and if the organization answered "No" to line 12a, then completing Schedule D, Part XI, XII, and XIII is optional	12b		1
13	Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggeregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
_	business, investment, and program service activities outside the United States, or aggregate foreign investments			
	valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or			
	entity located outside the Unitied States? If "Yes," complete Schedule F, Parts II and IV .	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to			
	individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16_		X
17	Did the organization report more than \$15,000 of expenses for professional fundraising services on Part IX, column (A),			
•	lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		x
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
		_		

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

19

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	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 principle 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
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4) and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? if "Yes," complete Schedule L, Part I	25a		
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 Form 990 or 990EZ? If "Yes,"	ĺ	' I	
	complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
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 a 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)			
а	A current or former officer, director, trustee, or key employee? if "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule			
	L, Part IV	28b		X
С	An entitiy of which a current or former officer, director, trustee, key employee (or a family member therof)			
	was an officer, director, trustee, or direct or indirect owner? 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>X</u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	[	ı	
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section			
	301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV,			
	and V, line 1	34		<u>_x</u>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	i	<u>_x</u>
b	If "Yes,"to line 35a, did the organization receive any payment from or engage in any transaction with a controlled			
	entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u>X</u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related		ĺ	
	organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that			
	is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	[		
	Note, All Form 990 filers are required to complete Schedule O	38	ΧI	

Form 990 (2016)

## Form 990 (2016) WINTER HAVEN ECONOMIC DEVELOPMENT Page 7 Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V					
	Fig. 1. O. A. Francisco C. A.	1.0		1	Yes	No
1a b	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable  Enter the number of Forms W-2G included in Line 1a Enter -0- if not applicable	1a 1b		0.		
c	Did the organization comply with backup withholding rules for reportable payments to vendors a				,	
·	(gambling) winnings to prize winners?	and ic	portable garring	1c		Х
2a	Enter the number of employees reported on Form W-3, Transmittal of Wages and Tax					
	Statements filed for the calendar year ending with or within the year covered by this return	2a		2.		· .
b	If at least one is reported in 2a, did the organization file all required federal employment tax retuin	rns?	<del></del>	2b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return	(see	nstructions)			y.c.
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b		<u> </u>
4a	At any time during the calander year, did the organization have an interest in, or a signature or c	ther a	uthority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial	ancial	account)?	4a		X
b	If "Yes," enter the name of the foreign country					
	See the instructions for exeptions and filing requirements for FinCEN Form 114, Report of Foreign	on Bar	ik and	3.3		
	Financial Accounts (FBAR)	<b>-</b> 0		5a	. : - <i>5</i> # 1	X
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year		10.00	5a 5b		X
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trail "Yes," to 5a or 5b, did the organization file Form 8886-T?	ansacı	lott,	5c		
c 6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and organization have annual gross receipts that are normally greater than \$100,000, and organization have annual gross receipts that are normally greater than \$100,000, and organization have annual gross receipts that are normally greater than \$100,000, and organization have annual gross receipts that are normally greater than \$100,000, and organization have annual gross receipts that are normally greater than \$100,000 and organization have annual gross receipts that are normally greater than \$100,000 and organization have annual gross receipts that are normally greater than \$100,000 and organization have annual gross receipts that are normally greater than \$100,000 and organization have annual gross receipts that are normally greater than \$100,000 and organization have annual gross receipts that are normally greater than \$100,000 and organization have annual gross receipts that are normally greater than \$100,000 and organization have annual gross receipts that are normally greater than \$100,000 and organization have annual gross receipts that are normally greater than \$100,000 and organization have annual gross receipts that are normally greater than \$100,000 and organization have annual gross receipts that are normally greater than \$100,000 and organization have annual gross receipts the greater than \$100,000 and organization have annual gross receipts the grown and the	did the	organization	50		
ou	solicit any contributions that were not tax deductible as charitable contributions?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Organization	6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contr	butior	s or gifts were			
	not tax deductible?		Ū	6b		
7	Organizations that may receive deductible contributions under section 170(c).				· .^./	33
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly	for g	oods and		1	
	services provided to the payor?			7a		<u> </u>
þ	If "Yes," did the organization notify the doner 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	ıt wa	s required	-		•
	to file Form 8282?  If "Yes," indicate the number of Forms 9292 filed during the year.	7d		7c	A. 43	X
ď	If "Yes," indicate the number of Forms 8282 filed during the year	_/u_	<u> </u>			75.7
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal ben	efit co	ntract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit			<b>7</b> †		X
g	If the organization received a contribution of qualified intellectual property, did the organization f	le For	m 8899 as requi	red? <b>7g</b>		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the org	file a	Form 1098-C?	7h		X
8	Sponsoring organizations maintaining donor advised funds.					37
	Did a donor advised fund maintained by the sponsoring organization have excess				[ - [ ]	
	business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.  Did the organization make any taxable distributions under section 4966?			9a		
a b	Did the organization make a distribution to a donor, donor advisor or related person?			9b		
10	Section 501(c)(7) organizations. Enter	1 1		,		
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			1	
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		120		
12a	Section 4947(a)(1) Non-exempt charitable trusts. Is the organization filing Form 990 in lieu of	12b	1041?	12a		100
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		L		1	
13 a	Section 501(c)(29) qualified nonprofit health insurance issuers.  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 C	)			ذكو	
b	Enter the amount of reserves the organization is required to maintain by the states in which the					
	organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Sch	eaule	U	14b		

Form 990 (2016) WINTER HAVEN ECONOMIC DEVELOPMENT 45-3154152 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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 Section A. Governing Body and Management Yes No 35 Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Scheule O Enter the number of voting members included in line 1a, above who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 officer, director, trustee, or key employee? 3 Did the organization delegate control over managment duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? X 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a material diversion of the organization's assets? 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who may elect one or more members of the X governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? Each committee with authority to act on behalf of the governing body? 8b X Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the 9 organization's mailing address? If "Yes," provide the names and addresses in Schedule O X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Service Code) No X 10a Does the organization have local chapters, branches, or affiliates? 10a b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates and branches to ensure their operations are consistent with those of the organization's exempt purposes? 10b 11 11a Has the organization provided a copy of the Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, the organization uses to review the Form 990 Does the organization have a written conflict of interest policy? If "No," go to line 13 12a Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to 12b conflicts? Does the organization regularly and consistently monitor and enforce compliance with policy? If "Yes," Describe in X Schedule O how this is done 12c 13 X 13 Does the organization have a written whistleblower policy? 14 14 Does the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16a X 16a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's 16b 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 FL IRC Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply ▼ Upon request Other (explain in Schedule O) Another's website Own website Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records

See schedule

	*******		E0011011E0	
Form 990 (2016)	WINTER	HAVEN	ECONOMIC	DEVELOPMENT

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Form **990** (2016)

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

Check if Schedule O contains a response to any questions 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. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key **employee**) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if the organization did		<u> </u>		(C)	<u> </u>	<del></del>		(D)	(E)	(F)
(A) Name and Title	(B) Average	_ ا			-11 414			Reportable	(E) Reportable	(F) Estimated
	hours per week (describe hours for related org below line)	l ton rr dud void void void void void void void voi	sition ( I t I T I S I T I T I T I T I T I T I T I T I T I T	O f f c e r	K e y e m p l o y	He I m g p h l e o s y t e c o m P	F o r m e r	compensation from the organization (W-2/1099-MISC)	ompensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(1) DR EILEEN HOLDEN	1		<u> </u>		ļ	<del> </del>			_	
PAST CHAIR				X				0	이	C
(2) STEVEN ELIAS	1			7,7				0	0	
VICE CHAIR		l		X				"	0	
(3) CINDY PRICE	1			v			ĺ	0	o	C
SECRETARY				X					0	
(4) NICOLE IRBY	1			x				0	О	
TREASURER		]				J			0	
(5) MERLE BISHOP	1	x						o	o	(
DIRECTOR		^			<u> </u>		L			
(6) INGRAM LEEDY	_ 1	x						o	o	(
DIRECTOR										
(7) STEVE BOYINGTON	1	x		l				l 0	o	(
DIRECTOR							<u> </u>			
(8) MIKE COMPTON	1	x				1		l 0	o	. (
DIRECTOR		^					<u> </u>			
(9) JAKE CREWS	11	x				İ	ł	o	l	(
DIRECTOR							<u> </u>			
(10)BRYAN KARSKY	1	x			ļ			l 0	o	(
DIRECTOR				ļ		1	<u> </u>			
(11)JEFF KINCART	11	x	ŀ				l	0	0	(
DIRECTOR			<u> </u>	<u> </u>		<u> </u>	↓			
(12)GREG LITTLETON	1	x		_/				l 0	0	(
CHAIR			L_			<b> </b>	<u> </u>			
(13)MAGGIE MARIUCCI	1	x						o	o	(
DIRECTOR		ļ <u>.</u>	<u> </u>	<u> </u>	<u> </u>	-	<u> </u>	ļ		
(14)STEVEN NIERMAN	11	x						0	0	(
DIRECTOR			l	<u> </u>		1	<u> </u>			000 (0016)

(A)	(B)				(C)			(5)		
Mama and Title		1			(0)			(D)	(E)	(F)
Name and Title	Average		Positi	on (che	ck all th	at apply	)	Reportable	Reportable	Estimated
	hours per week (describe hours for related org s below	I to nrr du I s v t v t d e		O f f c e r	K e y E m p	HE m g p h e o s e t	F o r m e	compensation from the organizations (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
	line)	u t a o	t 0 n a		o y e e	e c o m p				
(15)ANITA STRANG	1							0	0	
DIRECTOR		X	_	├┈				<del>-</del>		
(16)BUD STRANG	1		ļ	ļ				o	0	,
DIRECTOR		X		-						
(17)BAXTER TROUTMAN	1							o	0	
DIRECTOR		X		-						(
(18)MARK TURNER	11_					i				
DIRECTOR		X		-				0	0	(
(19)RYAN WHITEHEAD	11							О	0	
DIRECTOR	<u> </u>	X		<u> </u>				0	U	
(20)KATIE WORTHINGTON	11_							إ	) 0	C
DIRECTOR		X		<u> </u>					,	
(21)BRUCE LYON	40	ł						140190		,
EXECUTIVE DIRECTOR	<del></del>					X		140190	0	
(22)NATHANIEL BIRDSONG	11							o	o	C
DIRECTOR		X		-				<u>_</u>		
(23)STEPHANIE LANE	1							o	o	C
DIRECTOR (24)ALEX NIKDEL	1	X				-				
DIRECTOR	<del> </del>	x						o	o	C
(25)TOM PHILLIPS	1					$\vdash$				
DIRECTOR		x						ol	o	c
1b Sub-total		1 12	L			I	•	140190		
c Total from continuation sheets to Part V	/IL Section A									
d Total (add lines 1b and 1c)	,	-					•	140190		
<ul> <li>Total number of individuals (including but from the organization ▶ 1</li> </ul>	not limited to	those	listed	abov	e) who	recei	ved n	nore than \$100,0	00 in reportable	<del></del>
3 Did the organization list any <b>former</b> office Lline 1a? If "Yes," complete Schedule J for	•		, key e	emplo	yee, o	r high	est co	ompensated emp	oloyee	Yes No  3 X
4 For any individual listed on line 1a, is the s organization and related organizations gre	•		-							4 X
5 Did any person listed on line 1a receive or	accrue comp	ensati	on fro	m any	unrel					5 X
rendered to the ogranization? If "Yes," con	npiete Sched	ule J to	or suc	n per	son				<del>-::</del>	5 X
Complete this table for your five highest confrom the organization. Report compensation.										nsation
(A)								(B)		(C)
Name and business addr	ress					_	De	scription of services	Con	pensation

Total number of independent contractors (including but not limited to those listed above) who received more

Pi	Statement of Revenue		- the Bort	/III		
۵,	Check if Schedule O contains		(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512–514
	1a Federated campaigns b Membership Dues c Fundraising events d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, & similar amounts not included above  1a 1b 1c 1c 1d 1e 1f	149,750.				
ŀ	g Noncash contributions included in In 1a-1f \$ h Total. Add lines 1a-1f	<u>}</u>	149,750.			
7	Program Service Revenue	Business Code				
	2a BOARD MEMBER DUES b	926110	160,417.		0.	160,417.
	d				-	
	f All other program service revenue				يعان فالنب بيسرويين	الموسي ومروب
_	9 Total. Add lines 2a-2f		160,417.			
	<ul> <li>Investment income (including dividend other similar amounts)</li> <li>Income frm investment of tax-exempt</li> </ul>	<b>&gt;</b>	101.		0.	101.
	5 Royalties (1) Real	(II) Personal			<del></del>	1738.98
	6a Gross Rents b Less rental expenses	(II) Tersonal		***************************************	-	
0	C Rental income or (loss)				<del></del>	
t h e r	d Net rental income or (loss)  7a Gross amount from sales of assets other than inventory  b Less cost or other basis and sales expenses	(II) Other				
R	c Gain or (loss)					10 5 2
e v e n u	d Net gain or (loss)  8a Gross amount from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 a b Less direct expenses b					
е	c Net income or (loss) from fundraising	events •				
	9a Gross income from gaming activities See Part IV, line 19 a b Less direct expenses b					
	c Net income or (loss) from gaming acti	vites •				
	10a Gross sales of inventory, less returns and allowance a b Less cost of goods sold b					
-	c Net income or (loss) from sales of inve	<del>                                     </del>	<del></del>			
	Miscellaneous Revenue	Business Code				
	b					
	c	<del> </del>				
	d All other revenue				<del></del>	
	e Total. Add lines 11a-11d  12 Total Revenue See instructions		310,268.		0.	160,518.
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	Section 501(c)(3) and 501(c)(4) organizations mus	st complete all colun	nns All other orga	nizations must comp	lete column (A)
	Check if Schedule O contains a response to any question	in this Part IX	•		. 📉
	Do not include amounts reported on line 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S See Part IV, line 21				
2	Grants and other assistance to individuals in the				
	U S See Part IV, line 22				24 5 1 2 5 A 1 4 5 A 1 4 5 A 1 4 5 A 1 4 5 A 1 4 5 A 1 4 5 A 1 4 5 A 1 4 5 A 1 4 5 A 1 4 5 A 1 4 5 A 1 4 5 A 1 5 A
3	Grants and other assistance to governments,				COLUMN TO SERVICE STATE OF THE
	organizations, and individuals outside the U.S. See				
	Part IV, lines 15 and 16 .				
4	Benefits paid to or for members			984	· 李· · · · · · · · · · · · · · · · · ·
5	Compensation of current officers, directors, trustees				
	and key employees	140190		<del>_</del>	
6	Compensation not included above, to disqualifed persons				
	(as defined under section 4958(f)(1)) and persons				
	described in section 4958(c)(3)(B)			<del>-</del>	
7	Other salaries and wages	47081			
8	Pension plan contributions (include section 401(k) and				
	section 403(b) employer contributions)	5474			
9	Other employee benefits				
10	Payroti taxes	12685		<del> </del>	
11	Fees for services (non-employees)				
а	Management				_
b	Legal				
C	Accounting	5790		<del></del>	
d	Lobbying .				<del></del>
e	Professional fudraising See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,	6000			
	col (A) amount, list line 11g expenses on Schedule O)	6900 2332			
12	Advertising and promotion	2047	<del></del>		
13	Office Expenses	2047		<del>                                     </del>	<del></del> -
14 15	Information technology			+	
16	Royalties	12756			
17	Travel	12,30			
18	Payments of travel or entertainment expenses for any				
10	Federal, state or local public officials				
19	Conferences, conventions, and meetings .				
20	Interest				-
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	867			
23	Insurance	2850			
24	Other expenses-itemize expenses not covered above				and the second s
	(List miscellaneous expenses in line 24e If line 24e	;		,	<i>→</i> 💱
	amount exceeds 10% of line 25, column (A) amount,	:			7
	list line 24e expenses on schedule O )				
а	POSTAGE AND DELIVERY	59			
b	AUTO MILEAGE	302	·		
C	DUES AND SUBSCRIPTIONS	311			
d	PRINTING	778			
e	All other expenses	30089	<del> </del>		<del> </del>
25	Total functional expenses.Add lines 1 through 24e .	270511			
26	Joint Costs. Check ▶ ☐ if following SOP 98-2				
	(ASC 958-720) Complete this line only if the organization				
	reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

## PartX Balance Sheets

2,24	R) ZA	Check if Schedule O contains a response to any	question in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing		197,019.	1	196,576.
	2	Savings and temporary cash investments .			2	
	3	Pledges and grants receivable, net		30,000.	3	50,000.
	4	Accounts receivable, net .			4	
	5	Loans and other receivables from current and for	rmer officers, directors,			<b>1</b>
		trustees, key employees, and highest compensat	ted employees Complete	·	1	
		Part II of Schedule L			5	
	6	Loans and other receivables from other disqualifi	ed persons (as defined under			·
		section 4958(f)(1)) persons described in section	4958(c)(3)(B), and	•		
Α		contributing employers and sponsoring organization	tions of section 501(c)(9)		1	1.3
s		voluntary employees' beneficiary organizations (s	see instructions) Complete			
S		Part II of Schedule L			6	
7	7	Notes and loans receivable, net		7		
s	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		1,769.	9	1,512.
	10 a	Land, buildings, and equipment cost or other	10a 9,187.	. /· :		
		basis Complete Part VI of Schedule D				
	b	Less accumulated depreciation	[10b] 8,190.	1,864.	10c	997.
	11	Investments-publicly-traded securities		11		
	12	Investments-other securities See Part IV, line 11		12		
	13	Investments-program-related See Part IV, line 1		13		
	14	Intangible assets		14		
	15	Other assets See Part IV, line 11	000 650	15	0.40 0.05	
$\dashv$	16	Total assets. Add 1 through 15 (must equal line	230,652.	16	249,085.	
	17	Accounts payable and accrued expenses	•	19,979.	17	14,072.
	18	Grants payable		71 667	18	F6 250
L	19	Deferred revenue .	•	71,667.	19	56,250.
A	20	Tax-exempt bond liabilities			20	
B	21	Escrow or custodial account liability Complete P			21	
뷥	22	Payables to current and former officers, directors				
ł		highest compensated employees, and disqualifie	d persons Complete		22	S S S S S S S S S S S S S S S S S S S
i l		Part II of Schedule L			23	
E S	23	Secured Mortgages and notes payable to unrelat		ļ <del> </del>	24	
ا	24	Unsecured notes and loans payable to unrelated Other liabilities (including federal income tax, pay				
	25	parties, and other liabilities not included on lines				
		of Schedule D	17-24) Complete Fall X		25	
	26	Total liabilities. Add lines 17 through 25	•	91,646.	26	70,322.
		Organizations that follow SFAS 117 (ASC 958) complete lines 27 through 29, and lines 33 and	, check here ▶ 🛣 and 1 34.	,		7. A
N F E U T N	27	Unrestricted net assets .		134,580.	27	174,337.
TND	28	Temporarily restricted net assets		4,426.	28	4,426.
	29	Permanently restricted net assets		29		
A S BALAN		Organizations that do not follow SFAS 117 (AS	SC 958), check here ▶ 🔲 and			
S A		complete lines 30 through 34.				
ĮĀ	30	Capital stock or trust principal, or current funds		30		
Ň	31	Paid-in or capital surplus, or land, building, and	equipment fund		31	
OE RS	32	Retained earnings, endowment, accumulated inc	come, or other funds	100 000	32	170 762
5	33	Total net assets or fund balances	• • •	139,006.	33	178,763.
	34	Total liabilities and net assets/fund balances		230,652.	34	249,085. Form 990 (2016)
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Form 990	(2016) WINTER HAVEN ECONOMIC DEVELOPMENT	45-3154	152	Pag	e <b>12</b>
Part X	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)	11	310	. 26	<b>.</b> 8
2	Total Expenses (must equal Part IX, column (A), line 25)	2	270		
3	Revenue less expenses Subtract line 2 from line 1	3			57.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	139		
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			
10	Net assets or fund balances at the end of year Combine lines 3 through 9 (Must equal Part X, line				
	33, column (B))	10	178	.76	33.
Part XI	Financial Statements and Reporting	-			
	Check if Schedule O contains a response to any question in this Part XII		_		
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			T.Y	
	If the organization changed its method of accounting from a prior year or checked "Other," explain i	n Schedule O		, P	2 2 3
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled	or			ĺ
	reviewed on a separate basis, consolidated basis, or both				1
	Separate basis Consolidated basis Both consolidated and separate basis	SIS			1
b	Were the organization's financial statements audited by an independent accountant?		2b	x	L
	If "Yes," check a box below to indicate whether the financial statements for the year were audited or	n a			Į
	separate basis, consolidated basis, or both				l
	Separate basis Consolidated basis Both consolidated and separate basis	SIS			l
c	If "Yes" to 2a or 2b, does the organization have a committee that assumes responsibility for oversight	nt of the audit,			l
	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, exp	laın ın			1
	Schedule O			1	4
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set for	th in the Single	,		
	Audit 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	go the required	.		
	audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
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Schedule Ç (Form 990 or 990-EZ) 2016

Page 3

Pa	Complete if the organization is exempt under section 501(c)(3) an 5768 (election under section 501(h)).	d h	as N	IOT filed	Form	
For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the					)	
lobbying activity			No	Am	ount	-
1	During the year, did the filing organization attempt to influence foreign, national, state or 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 managment (include compensation in expenses reported on lines 1c through 1i)?			<del></del>		
	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?					
ŀ	n Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other similar means?  i Other activities?					
	Total lines 1c through 1i	-			7-16-5	Zin Late
	a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			AL VALUE OF		
	o if "Yes," enter the amount of any tax incurred under section 4912	. 1				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912	- 4	10.00			A CONTENTS
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		- E	11/2\/S		
41.54	Complete if the organization is exempt under section 501(c)(4), se section 501(c)(6).		n 50	) i (c)(s), c	Г 	
				<del></del>	Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?					X
2	Did the organization make only in-house lobby expenditures of \$2,000 or less?			2	X	
3	<u> </u>			<u> </u>		X
Pa	Complete if the organization is exempt under section 501(c)(4), se section 501(c)(6) if BOTH Part III–A, lines 1 and 2 are answered "I line 3 is answered "Yes."	ctio No"	n 50 OR	)1(c)(5), o if Part III-	r -A,	
1	Dues, assessments and similar amounts from members		_1_			
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political	tical	3 . 2			
	expenses for which the section 527(f) tax was paid).					
а	a Current year .		2a			
Ł	Carryover from last year		2b			
c	: Total	.	2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	ess				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and					
_	political expenditure next year?	-	4	·		
5	Taxable amount of lobbying and political expenditures (see instructions)	1	5			

Rart IV Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see separate instructions), and Part II-B, line 1. Also, complete this part for any additional information

### WINTER HAVEN ECONOMIC DEVELOPMENT

45-3154152

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):  a		nedule D (Form 990) 2016									Page	e <b>Z</b>
Check all that apply    a	P	Organizations Maintaining Collection	ns of Art, H	istorical T	reasure	s, or	Other Sim	ilar Assets	(Continue	ed)		
Scholarly research   City   Preservation to future organizations	3		and other re	ecords, che	eck any o	of the	following t	hat are a si	gnificant u	se of its co	llection	ıtems
b	а	Public exhibition			d		Loan or ex	kchange pr	ograms			
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII  During the year, did the organization solicit or receive donations of air, historical treasures, other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Part IV. Escrow and Custodial Arrangements Complete if the organization aniswered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21  Is the organization an agent, instee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21  Is the organization an agent, instee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21, for escrow or custodial account liability?  Beginning belance  Beginning belance  Beginning of year balance  Contributions during the year  Endowment Funds Complete if the explanation has been provided in Part XIII  Beginning of year balance  (a) Current year  (b) Prior year (c) To Form 990, Part IV, line 10  Contributions  Note the restinated percentage of the year end balance (line 1y) held as a Board designated or quasi-endowment	b	Scholarly research			е							
During the year, did the organization solicit or receive donations of art, historical treasures, of other similar assets to be sold to raise funds rather than to be mentialized as part of the organization?   Yes   No	C	Preservation for future generations										
to be sold to rase funds rather than to be maintained as part of the organization's collection?    Part IV    Escrow and Custodial Arrangements   Complete if the organization answered "Yes" to Form 990, Part X! line 9, or reported an amount on Form 990, Part X, line 21   1a   Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?   b   if "Yes," explain why in Part XIII and complete the following table   Lie	4	Provide a description of the organization's colle	ctions and e	xplain how	they fur	ther t	the organiz	ation's exer	npt purpos	se in Part )	(III	
Part IV. Ine 9, or reported an amount on Form 990, Part X, line 21   1a   Is the organization an algent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21   1a   Is the organization an algent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21   Ir "ves," explain why in Part XIII and complete the following table	5	During the year, did the organization solicit or re	eceive donat	ions of art,	historica	al trea	asures, ot o	ther similar	assets			
Part IV, line 9, or reported an amount on Form 990, Part X, line 21    The is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?   The intermediary for contributions or other assets not included on Form 990, Part X?   The intermediary for contributions or other assets not included on Form 990, Part X, line 21, for escrew or custodial account liability?   Yes   No   If Yes, explain why in Part XIII and omplete the following table   Intermediary   Intermediar		to be sold to raise funds rather than to be maint	tained as pai	rt of the org	ganızatıo	n's c	ollection?		[	Yes		No
Part IV, line 9, or reported an amount on Form 990, Part X, line 21    The is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?   The intermediary for contributions or other assets not included on Form 990, Part X?   The intermediary for contributions or other assets not included on Form 990, Part X, line 21, for escrew or custodial account liability?   Yes   No   If Yes, explain why in Part XIII and omplete the following table   Intermediary   Intermediar	Pa	ift IV Escrow and Custodial Arra	ngement	S Complet	e if the c	rgan	zation ans	wered "Yes	" to Form !	990.		
No   Form 990, Part X?   Yes   No   No   No   No   No   No   No   N	-					_						
b if "Yes," explain why in Part XIII and complete the following table    Beginning balance	1a		or other inte	rmediary fo	or contrib	oution	ns or other	assets not	included			•••
Amount   1c	b	•	he following	table					L	res	Ш	No
Additions during the year   1d   1e   1e   1e   1e   1e   1e   1e										Amount		
d Additions during the year    Distributions during the year	c	Beginning balance						1c				
tending Balance  tending Balance  three years are provided an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes No b if "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII  FartX**  Endowment Funds Complete if the organization answered "Yes" to Form 990, Part X, line 10  (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (organization answered "Yes" to Form 990, Part X, line 10  Three years back (e) Four years back (d) Three years back (e) Four years back (organization answered "Yes" to Form 990, Part X, line 11 See Form 990, Part X, line 11 See Form 990, Part X, line 11 See Form 990, Part X, line 11 See Form 990, Part X, line 11 See Form 990, Part X, line 11 See Form 990, Part X, line 11 See Form 990, Part X, line 10  Description of investment  (a) Cest or other basis (cheer)  Buildings  Land  Land  Description of investment  (a) Cest or other basis (cheer)  Buildings  Land  Description of investment  (b) Cest or sther basis (cheer)  Description of investment  (c) Depreciation  (d) Book value  (d) Book value  Description of investment  (e) Depreciation  (d) Book value  Description of investment  (e) Depreciation  (f) Page 2  Description of investment  (d) Equipment  Description of investment  (e) Depreciation  (f) Depreciation  (d) Book value  Description of investment  Description of investment  (e) Depreciation  (f) Depreciation  (f) Depreciation  (d) Book value  Description of investment  (e) Depreciation  (f) Depreciatio	d	· -						1d				
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Ves No b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII  Part XII Endowment Funds Complete if the organization answered "Yes" to Form 990, Part IV, line 10  (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (e) Four years back (f) Two years back (f) Three years back (e) Four years back (f) Two years back (f) Three	е	Distributions during the year						1e				
Description of Investment   Part XIII   Check here if the explanation has been provided in Part XIII	f	Ending Balance						1 <b>f</b>				
b if "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII	2a	Did the organization include an amount on Form	n 990, Part X	(, line 21, fo	or escrov	v or c	custodial ac	count liabil	ity?	Yes		No
(a) Current year   (b) Prior year   (c) Two years back   (d) Three years back   (e) Four years back	þ	If "Yes," explain the arrangement in Part XIII Ch	neck here if t	he explana	tion has	beer	n provided	ın Part XIII	-			
(a) Current year   (b) Prior year   (c) Two years back   (d) Three years back   (e) Four years back	Pa	Endowment Funds Complete	f the organiz	ation answ	ered "Y	es" to	Form 990,	Part IV, III	ne 10			
b Contributions  c Net Investment earnings, gains, and losses  d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance  2 Provide the estimated percentage of the year end balance (line 1g) held as a Board designated or quasi-endowment ▶										ck <b>(e)</b> Fo	ur years	back
c Net Investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs 1 Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance (line 1g) held as a Board designated or quasi-endowment \( \)	1a	Beginning of year balance .										
d Grants or scholarships e Other expenditures for facilities and programs  1 Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance (line 1g) held as a Board designated or quasi-endowment ▶	b	Contributions										
e Other expenditures for facilities and programs  1 Administrative expenses 9 End of year balance 2 Provide the estimated percentage of the year end balance (line 1g) held as a Board designated or quasi-endowment	c											
and programs  1 Administrative expenses  9 End of year balance  2 Provide the estimated percentage of the year end balance (line 1g) held as  a Board designated or quasi-endowment ▶	d	Grants or scholarships										
## Administrative expenses ## End of year balance    Provide the estimated percentage of the year end balance (line 1g) held as   Board designated or quasi-endowment   %   %   %   %   %   %   %   %   %	е	Other expenditures for facilities				1						
g End of year balance  2 Provide the estimated percentage of the year end balance (line 1g) held as  a Board designated or quasi-endowment ▶	_	· · ·				<u> </u>						
2 Provide the estimated percentage of the year end balance (line 1g) held as  a Board designated or quasi-endowment ▶		· · · · · · · · · · · · · · · · · · ·				-						
a Board designated or quasi-endowment ▶	_	· · · · · · · · · · · · · · · · · · ·	- 1 1 - 1 //		-1	}	-	l	<del></del>			
b Permanent endowment					a as							
Temporarily restricted endowment				70								
The percentages in lines 2a, 2b, and 2c should equal 100%  Are there endowment funds not in the possession of the organization that are held and administered for the organization by.  (i) unrelated organizations  (ii) related organizations  (iii)  related organizations  (iii) rel		·	<b>%</b>									
Are there endowment funds not in the possession of the organization that are held and administered for the organization by.  (i) unrelated organizations (ii) related organizations (ii) related organizations (iii) related organ	·	· · · · · · · · · · · · · · · · · · ·	<del></del>									
organization by.  (i) unrelated organizations (ii) related organizations (iii) related	За		•	ianization t	hat are h	neld a	and adminis	stered for th	ne			
(ii) unrelated organizations (iii) related organizations (ii) related organizations (ii) related organizations (iii) related organizations (ii		·	3					• •			Yes	No
b If "Yes" to 3a (II), are the related organizations listed as required on Schedule R?  Describe in Part XIV the Inteneded uses of the organization's endowment funds  Part VI Land, Buildings, and Equipment  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a See Form 990, Part X, line 10  Description of Investment  (a) Cost or other basis (b) Cost or other basis (investment)  (investment)  b Buildings  c Leasehold improvements.  d Equipment		(i) unrelated organizations .								3a(ı)		
Describe in Part XIV the intended uses of the organization's endowment funds  Part XI  Land, Buildings, and Equipment  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a See Form 990, Part X, line 10  Description of Investment  (a) Cost or other basis (Investment)  (b) Cost or other basis (other)  (c) Depreciation  (d) Book value  Buildings  Leasehold improvements  Equipment  9,187.  8,190.  997.		(ii) related organizations								3a(ii)		
Complete if the organization answered "Yes" to Form 990, Part IV, line 11a See Form 990, Part X, line 10  Description of Investment  (a) Cost or other basis (Investment)  (b) Cost or other basis (other)  (c) Depreciation  (d) Book value basis (other)  b Buildings  c Leasehold improvements  d Equipment  Other	þ	If "Yes" to 3a (II), are the related organizations list	sted as requ	ired on Sci	nedule F	?				3b		
Complete if the organization answered "Yes" to Form 990, Part IV, line 11a See Form 990, Part X, line 10  Description of Investment  (a) Cost or other basis (b) Cost or other basis (other)  1a Land	_		rganization's	s endowme	ent funds	3						
Description of Investment  (a) Cost or other basis (b) Cost or other basis (c) Depreciation  (d) Book value  (d) Book value  (d) Book value  (e) Depreciation  (d) Book value  (e) Depreciation  (f) Depreciation  (g) Depreciation  (h) Cost or other basis (c) Depreciation  (h) Book value	Pa	<b>it VI</b> Land, Buildings, and Equipr	nent									
College		Complete if the organization answered	"Yes" to Fo	rm 990, Pa	rt IV, line	e 11a	See Form	990, Part	X, line 10			
b Buildings c Leasehold improvements d Equipment 9,187. 8,190. 997. e Other		Description of Investment	1 * ' /					(c) Deprecia	ation	( <b>d</b> ) Boo	k value	
c Leasehold improvements         9,187.         8,190.         997.           e Other         9,187.         997.	1a	Land						Egrand Control				
d Equipment 9,187. 8,190. 997. e Other	þ	_	<u> </u>					·				
e Other	C	•		107					100		007	<del></del>
			<del></del>	<u>, 18/.</u>					190.		99	<u>' •                                     </u>
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Schedule D (Form 990) 2016

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R	Reconciliation of Revenue per Audited Fina Complete if the organization answered "Yes" to Form 990, Pro-		With Revenue pe	er Return
1	Total revenue, gains and other support per audited financial statemen	its	1	310,268.
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	
3	Subtract line 2e from line 1		3	310,268.
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	-	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I	, line 12 )	5	310,268.
På	Reconciliation of Expenses per Audited Fin	ancial Statements	With Expense p	er Return
	Complete if the organization answered "Yes" to Form 990, Pa	art IV, line 12a		
1	Total expenses and losses per audited financial statements		1	270,511.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	270 <b>,</b> 511.
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		

5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

Part XIII Supplemental Information

b Other (Describe in Part XIII)e Add lines 4a and 4b

Provide the descriptions required for Part II, lines 3, 5 and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, line 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

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

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990~EZ) and its instructions is at www irs gov/forms990.

2016

OMB No 1545-0047

Openito Public Hinspection

Name of the organization

Department of the Treasury

Internal Revenue Service

WINTER HAVEN ECONOMIC DEVELOPMENT

**Employer Identification number** 45-3154152

Part VI, Line 11b - Process used by the organization to review this 990 return THE FORM 990 IS REVIEWED BY THE EXECUTIVE COMMITTEE PRIOR TO BEING FILED.

Part VI, Line 12c - Monitoring and enforcement of conflict of interest policy THE BOARD DISCLOSES ANY RELATIONSHIPS BY FILLING OUT A CONFLICT OF INTEREST FORM BY MEMBERS ON AN ANNUAL BASIS.

Part VI, Line 19 - How Org. makes Documentation, Policies & Statements public GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE MADE AVAILABLE UPON REQUEST.

Part VI, Section C, Line 20 - Person in charge of books and records

JULIE SANDS (863)837-5280

401 AVE B NW WINTER HAVEN, FL 33881

Part IX, Line 24 - Other Expenses

Description	services	& general	Fundraising	Total
PAYROLL PROCESSING FEES COMPUTER EXP/WEB HOSTING TELEPHONE MEETINGS EVENTS BUSINESS DEVELOPMENT				964. 2,974. 3,135. 3,408. 3,735. 15,873.
Totals:	0.	0.	0.	30,089.