For	rm <b>9</b> 1	ရက် မှ	՝∛ /Return o	of Organization	Exemp	t From Inco	ome Ta	<b>ax</b>   OMB No 1545-0047				
		<b>34</b> (3,	J.	c), 527, or 4947(a)(1) of the	-			2017				
_		_	▶Do not enter	Social Security numbers				Open to Public				
		of the Trea <i>s</i> : nue Service	ary	vw.irs.gov/Form990 for ins		•	17/	Inspection				
A	For ti	he 2017 c	alendar year, or tax y			17, and ending	09/3					
	Check		С				D Employ	er identification no.				
	applica Addres	s change	WINTER	HAVEN ECONOMI	C DEVEL	OPMENT	45-3	3154152				
	Name c	hange	COUNCIL	I, INC.			E Telepho	one number				
	Initial re	eturn	401 AVE	ENUE B NW			(863	3) 837-5280				
	Termina	ation	WINTER	HAVEN, FL 33	881-460	6	<b>G</b> Gross re	eceipts \$ 285,790.				
	Amende	ed return	F Name and address of P	rincipal Officer								
	Арр. ре	inding	BRUCE LYON	Ŋ				a group return				
			401 AVENUE				H(b) Are all					
				VEN, FL 33881-		$  \Lambda_{\bullet}$	includ					
		mpt Status		501(c)(6 ) (insert no.)	) 4947	(a)(1) or 427	1	" attach a list (See instructions)				
			WW.WHEDC.CO				<del></del>	exemption no				
_	K Form of organization  Corporation  Trust  Association  Other ► L Year of Formation 2011 M St. of legal domicile											
<del></del> -	<b>—</b>	a Juliuna	ai y	· · · · · · · · · · · · · · · · · · ·								
A C	1	-	_	n's mission of most significa								
t i				UALITY JOBS TH								
٧				INDUSTRY AND B		CTING NEW	BOSINE	SSES AND				
ļG				WINTER HAVEN		assass of mars that	0E9/ of it or					
ίο	3			anization discontinued its o	•	sposed of more that	25% OF IL AS	28.				
еe	4		_	the governing body (Part VI members of the governing		line 1h)	4	28.				
sr &n			· -	ployed in calendar year 201			5	2.				
а	6		nber of volunteers (est	• •	ro (r art v, mic		6	0.				
n C	l <u> </u>			ue from Part VIII, column (C	C), line 12		7a	0.				
_ e							7b					
							O V					
						Prior Year		Current Year				
R		Contribut	tions and grants (Part	VIII, line 1h)	,	149	,750.	150,567.				
E	9		tions and grants (Part services revenue (Part			149	,417.	150,567. 135,050.				
E V E	9	Program	services revenue (Par		d)	149	,417. 101.	150,567. 135,050. 173.				
E V E N U	9 10 11	Program Investme Other rev	services revenue (Par int Income (Part VIII, co venue (Part VIII, column (A	t VIII, line 2g) olumn (A), lines 3, 4, and 7d A), lines 5, 8d, 8c, 9c,10c and 11e)	1	149 160	,417. 101. 0.	150,567. 135,050. 173. 0.				
E V E	9 10 11 12	Program Investme Other rev Total reve	services revenue (Part int Income (Part VIII, co renue (Part VIII, column (A enue-add lines 8 through	t VIII, line 2g) . olumn (A), lines 3, 4, and 7d \), lines 5, 6d, 8c, 9c,10c and 11e) i 11 (must equal Part VIII, Column	(A), fine 12)	149 160	,417. 101. 0. ,268.	150,567. 135,050. 173. 0. 285,790.				
E V E N U	9 10 11 12 13	Program Investme Other rev Total reve Grants an	services revenue (Part int Income (Part VIII, co renue (Part VIII, column (A enue-add lines 8 through and similar amounts pai	t VIII, line 2g) olumn (A), lines 3, 4, and 76 A), lines 5, 6d, 8c, 9c,10c and 11e) i 11 (must equal Part VIII, Column id (Part IX, column (A), lines	(A), line 12) S 1-3)	149 160	,417. 101. 0.	150,567. 135,050. 173. 0.				
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EVENUE	9 10 11 12 13 14	Program Investme Other rev Total reve Grants an Benefits   Salaries,	services revenue (Part VIII, covenue (Part VIII, covenue (Part VIII, column (Alenue-add lines 8 through and similar amounts paid paid to or for members other compensation, e	t VIII, line 2g)  olumn (A), lines 3, 4, and 70  A), lines 5, 6d, 8c, 9c, 10c and 11e)  11 (must equal Part VIII, Column  Id (Part IX, column (A), lines  s (Part IX, column (A), line 4  employee benefits (Part IX, c)	(A), line 12) 5 1-3) 1) (A), lines 5-10)	149 160 310	,417. 101. 0. ,268.	150,567. 135,050. 173. 0. 285,790.				
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EVENUE EXPERSES	9 10 11 12 13 14 15 16a b 17 18 19	Program Investme Other rev Total revo Grants an Benefits I Salaries, Professio Total fund Other exp Total Exp Revenue	services revenue (Part VIII, corenue (Part VIII, corenue (Part VIII, column (Asenue-add lines 8 through and similar amounts paid to or for members other compensation, equal fundraising fees (Part IX, columners Add lines 13-1	t VIII, line 2g)  olumn (A), lines 3, 4, and 76  A), lines 5, 6d, 8c, 9c, 10c and 11e)  i 11 (must equal Part VIII, Column  id (Part IX, column (A), lines  s (Part IX, column (A), line 4  employee benefits (Part IX, c)  Part IX, column (A), line 11e  art IX, column (D), line 25)  IN (A), lines 11a, 111, 1112  7 (must edual Part IX, column  act line 18 from line 12	(A), line 12) (5 1-3) (I) (A), lines 5-10) (A), lines 5-10) (A) (A) (A) (A) (A) (B) (B) (B) (B) (B) (B) (B) (B) (B) (B	149 160 310 205 65 270 39 Beginning of Curr 249	,417. 101. 0. ,268. 0. ,430. ,081. ,511. ,757. ent Year ,085.	150,567. 135,050. 173. 0. 285,790. 0. 204,371. 62,939. 267,310. 18,480. End of Year 268,293.				
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Form **990** (2017)

Forr	n 990 (2017) WINTER HAVEN ECONOMIC DEVELOPMENT	4.	5-31	541	52	Page	2
Рa	rtilli Statement of Program Service Accomplishments						
	Check if Schedule O contains a response to any question in Part III			<u>.                                    </u>			$\supseteq$
1	Briefly describe the organization's mission	<del></del> .					
	CREATING HIGH QUALITY JOBS THROUGH THE EXPANSION						
	BUSINESSES AND INDUSTRY AND BY ATTRACTING NEW BUS	SINESSI	ES A	ND_			
اِ	INDUSTRY TO THE WINTER HAVEN AREA.						
2	Did the organization undertake any significant program services during the year which were not	listed on					
•	the prior Form 990 or 990-EZ?	listed on		Yes	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 progressivities?	ıram		Yes	X	No	
	If "Yes," describe these changes on Schedule O			163		NO	
4	Describe the exempt purpose achievements for each of the organization's three largest program Section 501(c)(3) and (4) organization and 4947(a)(1) trusts are required to report the amount of others, the total expenses, and revenue, if any, for each service reported						
4a	(Code ) (Expenses \$ including grants of \$	) (Revenue	e \$		_		)
	DEVELOPED PROMOTIONAL MATERIALS TO IMPROVE THE OR	, ,		N'S	PR	ESE	NCE
1	IN THE COMMUNITY AND FOSTER EXPANSION OF EXISTING	BUSIN	VESS	ANI	) I	NDU	STRY
_	ATTRACT NEW HIGH-SKILL, HIGH WAGE BUSINESS AND IND						
_	AND JOB OPPORTUNITIES FOR WINTER HAVEN RESIDENTS;						
	BASE AND ENHANCE RELATIONSHIPS WITH LOCAL, REGION					NAL	AND
7	INTERNATIONAL ECONOMIC DEVELOPMENT ORGANIZATIONS	AND A	<u>ENC</u>	TES.	·		
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_					-		_
-							
4b	(Code ) (Expenses \$ including grants of \$	) (Revenue	≘\$				)
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4c	(Code ) (Expenses \$ including grants of \$	) (Revenue	<b>3</b> \$				)
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7-4	Other average convece (Decembe in Schedule C.)						
4d	Other program services (Describe in Schedule O ) (Expenses \$ including granst of \$ )(Revenue \$	1					
4e	(Expenses \$ including granst of \$ )(Revenue \$  Total program service expenses ▶						
	Copyright 2017 Saxon Tax Software			For	n <b>99</b>	0 (201	7)

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	rt IV Checklist of Required Schedules	02		aye .
	, Oneckies of frequired scriedules		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation) If "Yes," complete			<u> </u>
2	Schedule A	1 2	├	X
3	Is the organization required to complete Schedule B, Schedule of Contributors? (see instruction)?	-	1	^
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part 1	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities or have a section 501(h) election in	<u> </u>		^
7	effect during the tax year? If "Yes," complete Schedule C, Part II	4		l
5	Is the organization a Section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	-		ļ
•	assesments, or similar amounts as defined in Revenue Procedure 98–19? If "Yes," complete Schedule C, Part III	5	x	i
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide		<del>  **</del>	
	advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schdule D, Part I	6	ł	x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the		<del>                                     </del>	
•	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		t	
•	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,	3, 2,	. ~ .	. %
	VII, VIII, IX, or X as applicable	23	, , , y	ئىنىد
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI	11a	X	
b	Did the organization report an amount for investmentsother 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
C	Did the organization report an amount for investmentsprogram related in Part X, line 13 that is 5% or more of	l		
	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		**
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		<u> </u>
b	Did the organization have aggeregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	1		
	business, investment, and program service activities outside the United States, or aggregate foreign investments			v
	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	45	Ì	v
	entity located outside the Unitied States? If "Yes," complete Schedule F, Parts II and IV	15_		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to	16		v
7	Individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report more than \$15,000 of expenses for professional fundraising services on Part IX, column (A),	17		x
	lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)  Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,	"		42
8	Land day and One Mill Mark III assembled a California III.	18	l	x
	lines 1c and 8a? if "Yes," complete Schedule G, Part II			

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

19

PartilVs Checklist of Required Schedules (Continued)

			Yes	NO
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		х
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		Х
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		Х
b	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			
	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,"			
	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		ŀ	
	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,	·		4
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)		3.0	ر <u>بارت</u> در الشديد
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
C	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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
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>X</u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section			
	301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	-	X
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> </u>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u>X</u>
b	If "Yes," to line 35a, did the organization receive any payment from or engage in any transaction with a controlled			77
	entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	_		
	organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that		- 1	₩
00	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 11 and 19?	38	y l	

# Form 990 (2017) WINTER HAVEN ECONOMIC DEVELOPMENT Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V

	Check in Schedule O Contains a response to any question in this hart v			
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	. 133,000	Yes	No
b	Enter the number of Forms W-2G included in Line 1a Enter -0- if not applicable . 1b 0			100
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		14.1	1
	(gambling) winnings to prize winners?	1c		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wages and Tax		持機	增生
	Statements filed for the calendar year ending with or within the year covered by this return 2a 2			1
b	If at least one is reported in 2a, did the organization file all required federal employment tax returns?	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 instructions)	300-1		30
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	<u> </u>	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	ļ	ļ
4a	At any time during the calander year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
þ	If "Yes," enter the name of the foreign country		7	200
	See the instructions for exeptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and			影響
_	Financial Accounts (FBAR)	220.23	113.0	- 35
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	-	X
C	If "Yes," to 5a or 5b, did the organization file Form 8886-T?	5c	<del></del>	<del>                                     </del>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		x
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were	Ua_	_	1
	not tax deductible?	6b		1
7	Organizations that may receive deductible contributions under section 170(c).	OF.	11625	1536
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and			TAKE.
	services provided to the payor?	7a		X
b	If "Yes," did the organization notify the doner of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	İ		
	to file Form 8282?	7c	, a c	X
d	If "Yes," indicate the number of Forms 8282 filed during the year		E.	
			1.00	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required	1		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the org_file a Form 1098–C?	7h	14.	X
8	Sponsoring organizations maintaining donor advised funds.	3		1
	Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	ال المستنافقة	<i>ىلىنىڭىللى</i>
9	Sponsoring organizations maintaining donor advised funds.	11 20		Tark.
а	Did the organization make any taxable distributions under section 4966?	9a		14-14-4
b	Did the organization make a distribution to a donor, donor advisor or related person?	9b		
10	Section 501(c)(7) organizations. Enter		Ĭ,	CHETT
а	Initiation fees and capital contributions included on Part VIII, line 12	44		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			概念
1	Section 501(c)(12) organizations. Enter.		7	6.1
а	Gross income from members or shareholders		1.7	10 A
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them )	120	5.167.A	
12a	Section 4947(a)(1) Non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes" enter the amount of tax-exempt interest received or accrued during the year 12b	12a 3⊁5%	14. Tr	1.55 (n <sup>2</sup> );
b				
∣3 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	W.S.C.	dai T.E.
а	Note. See the instructions for additional information the organization must report on Schedule O	27. C	1. 12. 14. 14. 14. 14. 14. 14. 14. 14. 14. 14	
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	1		
С	Enter the amount of reserves on hand	119		統裁
4a	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 Schedule O	14b		

Form 990 (2017) WINTER HAVEN ECONOMIC DEVELOPMENT Page 6 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 X Section A. Governing Body and Management Yes No 28 Enter the number of voting members of the governing body at the end of the tax year 1a 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 b Enter the number of voting members included in line 1a, above who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 officer, director, trustee, or key employee? 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? 3 X 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 5 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? 6 7a Did the organization have members, stockholders, or other persons who may elect one or more members of the X governing body? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or b persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year 8 by the following X The governing body? Ra Each committee with authority to act on behalf of the governing body? 8b X b 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the 9 X organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Service Code) Yes No X 10a 10a Does the organization have local chapters, branches, or affiliates? If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates b 10b and branches to ensure their operations are consistent with those of the organization's exempt purposes? Has the organization provided a copy of the Form 990 to all members of its governing body before filing the form? 11 X 11a 地名 不知 外官 b 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 X 12a Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to 12b X conflicts? Does the organization regularly and consistently monitor and enforce compliance with policy? If "Yes," Describe in 12c X Schedule O how this is done 13 X 13 Does the organization have a written whistleblower policy? X 14 14 Does the organization have a written document retention and destruction policy? Did the process for determining componsation of the following persons include a review and approval by independent 15 persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X 15a The organization's CEO, Executive Director, or top management official 15b Other officers or key employees of the organization b

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 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 exempt status with respect to such arrangements?

Se	ction	C	Dis	cl	ns	ıır	P
20	CUVII	·-			vJ	u	

List the States with which a copy of this Form 990 is required to be filed ▶ FL 17

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 18 for public inspection. Indicate how you make these available. Check all that apply

Other (explain in Schedule O) Another's website W Upon request

Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and 19 financial statements available to the public during the tax year

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

▶See schedule

16a

2017)	WINTER	HAVEN	ECONOMIC	DEVELOPMENT

45-3154152 Page 7

### Form 990 (2017)

## 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	ala not co	mpensate	any current c	micer, director,	or trustee
	ĭ	ĭ			

(A)	(B)			(C)	)			(D)	(E)	(F)	
Name and Title	Average hours per	Po	sition (	check	all that	apply)		Reportable	Reportable	Estimated	
	week (describe hours for related org below line)	I t o n r r d u d v s i d e e a e c i o r	nr su ts tt e ue	O f f c e r	K e y e m p i o y e	H e m g p h e o y t e c o m p	F o r m e r	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations	
(1) STEVEN ELIAS	1			x				0	0	0	
VICE CHAIR				^					U		
(2) NICOLE IRBY	1			$ _{\mathbf{x}}$			1	٥ ا	o	o	
TREASURER											
(3) MERLE BISHOP	1	x						0	o	0	
DIRECTOR		^				ļ			Ŭ		
(4) INGRAM LEEDY	1	x		ļ				۰ ا	0.	o	
DIRECTOR											
(5) STEVE BOYINGTON	1	x				1		О .	o	О	
DIRECTOR								ŭ			
(6) MIKE COMPTON	1	х					[	o	o	o	
DIRECTOR											
(7) JAKE CREWS	1_	x						o	o	0	
DIRECTOR		^									
(8) BRYAN KARSKY	1	x						0	o	0	
DIRECTOR		Α.									
(9) JEFF KINCART	1	х			•			0	o	0	
DIRECTOR		7.									
(10)GREG LITTLETON	1			x				o	ol	0	
CHAIR											
(11)STEPHEN NIERMAN	1	x						o	ol	0	
DIRECTOR											
(12)ANITA STRANG	1	x	i					o	o	0	
DIRECTOR											
(13)BUD STRANG	111	x						o	o	0	
DIRECTOR		Λ									
(14)BECKY TROUTMAN	11	x						o	ol	0	
DIRECTOR		41									

Part VIII Section A. Officers, Directors, Tr	ustees, Ke	y Emp	oloyee			nest C	omp	Y	ees (continued)	) 
(A)	(B)				(C)			(D)	(E)	(F)
Name and Title	Average		Posit	ion (che	eck all th	at apply	)	Reportable	Reportable	Estimated
	hours per	l t c	l t	0	к	ΗE	F	compensation	compensation	amount of
`	week	nrr		f	е	l m	٥	from the	from related organizations	other compensation
	(describe hours for	d u	l s u	f	ј у -	9 p	r	organizations	(W-2/1099-MISC)	from the
	related	'	1 1	c	E	h I	m e	(W-2/1099-MISC)	(11 2 1000 111100)	organization
	org s	ı e r	t e	e	m p	e o	ľ			and related
	below	d e e	l u e	г	[	t e	1			organizations
	line)	u t	l t	1	0	c e	l			ł
		a o			y e	o m				
		' '	n		ě	ρ̈̈́				
	l		a			ì				
(15)MARK TURNER	1	1	†	<b>†</b>	<del> </del>		-			
SECRETARY		1		x	ł			0	o	
	1			<u> </u>	-	<del>                                     </del>				
(16)RYAN WHITEHEAD	1		ĺ	ĺ			1		_	
DIRECTOR		X	ļ			ļ		0	0	
(17)KATIE W. DECKER	1									
DIRECTOR		X	<u> </u>			į		0	0	
(18)BRUCE LYON	40									
PRESIDENT/CEO		]	Ì	İ		X		136855	0	
(19)KEVIN ASPERGREN	1	i –								
DIRECTOR		x						o	o	
(20)ALEX NIKDEL	1	1								
		<b>₩</b>						ا ا	0	
DIRECTOR		X	-	<del>                                     </del>		-	<u> </u>		, 0	
(21)LARRY D. TUCKER	1	4							_	
DIRECTOR		X						0	0	
(22)CATHY KLUYTENAAR	1									
DIRECTOR		X						0	0	
(23)REX JACKSON	1									
DIRECTOR		x						l ol	0	
(24)TODD DANTZLER	1									
DIRECTOR		x						o	o	
	-	-								-
(25)WILL CARSON	1	l						ol	0	
DIRECTOR		X		l				_	0	
1b Sub-total								136855		
<ul> <li>Total from continuation sheets to Part VII,</li> </ul>	Section A	١.					▶			
d Total (add lines 1b and 1c)	•						•	136855		
2 Total number of individuals (including but no	t limited to	those	listed	abov	e) who	recei	ved n	nore than \$100,0	00 ın reportable	compensatio
from the organization $\triangleright$ 1										
										Yes No
3 Did the organization list any former officer, of	lirector or t	tructee	kov s	amolo	wee c	r biah	aet cr	mnensated emr	Novee	
			, KCy (	SITIPIO	yee, e	ı ıngı	031 01	impensated emp	oloyee	3 X
Lline 1a? If "Yes," complete Schedule J for si	ich individ	uai				•				
4 For any individual listed on line 1a, is the sun	-								-	
organization and related organizations greate	r than \$15	0,000?	If "Ye	es," co	mplet	e Sche	edule	J for such indivi	dual	4 X
5 Did any person listed on line 1a receive or ac	crue comp	ensati	on fro	m any	y unre	ated o	rgan	zation for service	es	W 12 3
rendered to the ogranization? If "Yes," compl							·			5 X
Section B. Independent Contractors										
Complete this table for your five highest complete this table.	neneated ii	ndene	ndent	contr	actors	that re	CEIVE	ed more than \$10	00 000 of compe	nsation
from the organization Report compensation f										nounon
nom the organization ricport compensation i	or the date	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Cui Çi	lumg	*******			0.942400	J. , J. J.	
		-						<b>(D)</b>		(5)
(A)							0-	(B)		(C)
Name and business address						_	De	scription of services	Com	pensation
					_					
						[				
	_					$\neg$				
2 Total number of independent contractors (inc	ludina but	not lin	nted to	n thes	e liete	d abo	va) w	ho received mor		

than \$100,000 in compensation from the organization

Form 990 (2017) WINTER HAVEN ECONOMIC DEVELOPMENT 45-3154152 Page 9 Statement of Revenue Check if Schedule O contains a response to any question in this Part VIII (A) (B) (C) (D) Related or Unrelated Revenue **Total Revenue** Exempt Excluded from Business Function Tax under IRC Revenue Contributions, gifts, grants and other similar amounts Revenue 512-514 1a Federated campaigns 1a **b** Membership Dues 1b c Fundraising events 1c d Related organizations 1d 150,567 e Government grants (contributions) 1e f All other contributions, gifts, grants, & similar amounts not included above 1f g Noncash contributions included in In 1a-1f \$ h Total. Add lines 1a-1f 150,567 Program Service Revenue Business Code 132,083. 2a BOARD MEMBER DUES 926110 132,083 b EVENT SPONSORSHIP 926110 2,967. 2,967 f All other program service revenue 9 Total. Add lines 2a-2f 135,050 3 Investment income (including dividends, interest and other similar amounts) . 173 0 173 4 Income frm investment of tax-exempt bond proceeds ▶ 5 Royalties (i) Real (ii) Personal 6a Gross Rents **b** Less rental expenses 0 C Rental income or (loss) d Net rental income or (loss) (II) Other (ı) Securities h 7a Gross amount from sales of assets other е than inventory b Less cost or other basis and sales expenses R c Gain or (loss) d Net gain or (loss) > 8a Gross amount from fundraising events (not including \$\_ of contributions reported on line 1c) n See Part IV, line 18 **b** Less: direct expenses . . . . . . b c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 **b** Less<sup>-</sup> direct expenses c Net income or (loss) from gaming activities . 10a Gross sales of inventory, less returns and allowance а b Less cost of goods sold b c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11a MISCELLANEOUS d All other revenue

285,790

2,967

132,256. Form 990 (2017)

e Total. Add lines 11a-11d

Form **990** (2017)

#### Partix: Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) X Check if Schedule O contains a response to any question in this Part IX ... (A) (B) Do not include amounts reported on line 6b, Program service 7b, 8b, 9b, and 10b of Part VIII. Total expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV. lines 15 and 16 . . Benefits paid to or for members Compensation of current officers, directors, trustees 136855 and key employees Compensation not included above, to disqualifed persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 48455 7 Other salaries and wages Pension plan contributions (include section 401(k) and 5662 section 403(b) employer contributions) 9 Other employee benefits 13399 10 Payroll taxes Fees for services (non-employees) Management b Legal 5853 Accounting Lobbying Professional fudraising See Part IV, line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25, 3175 col (A) amount, list line 11g expenses on Schedule O) 2472 12 Advertising and promotion 2213 13 Office Expenses Information technology 14 15 Royalties 12756 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any Federal, state or local public officials 19 Conferences, conventions, and meetings Interest 20 Payments to affiliates 21 702 22 Depreciation, depletion, and amortization 3213 23 Insurance 24 Other expenses-itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on schedule O) 50 POSTAGE AND DELIVERY 497 AUTO MILEAGE 61 c DUES AND SUBSCRIPTIONS 344 d PRINTING 31603 All other expenses Total functional expenses. Add lines 1 through 24e 267310 25 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

Part X Balance Sheets

AS SETS	7 8 9	Cash-non-interest-bearing Savings and temporary cash investments Pledges and grants receivable, net Accounts receivable, net Loans and other receivables from current and for trustees, key employees, and highest compensat Part II of Schedule L Loans and other receivables from other disqualific section 4958(f)(1)) persons described in section 4 contributing employers and sponsoring organizati voluntary employees' beneficiary organizations (s Part II of Schedule L Notes and loans receivable, net Inventories for sale or use	rmer officers, dited employees led persons (as 4958(c)(3)(B), attons of section	rectors, Complete defined under and 501(c)(9)	50	of year 5,576.	1 2 3 4	(B) End of year 226,630. 35,000.
AS SETS	2 3 4 5 6	Savings and temporary cash investments  Pledges and grants receivable, net  Accounts receivable, net  Loans and other receivables from current and for trustees, key employees, and highest compensat  Part II of Schedule L  Loans and other receivables from other disqualific section 4958(f)(1)) persons described in section 4 contributing employers and sponsoring organizat voluntary employees' beneficiary organizations (s  Part II of Schedule L  Notes and loans receivable, net Inventories for sale or use	ted employees led persons (as 4958(c)(3)(B), a tions of section	Complete defined under and 501(c)(9)	196 50	of year 5,576.	3 4	226,630.
AS SETS	2 3 4 5 6	Savings and temporary cash investments  Pledges and grants receivable, net  Accounts receivable, net  Loans and other receivables from current and for trustees, key employees, and highest compensat  Part II of Schedule L  Loans and other receivables from other disqualific section 4958(f)(1)) persons described in section 4 contributing employers and sponsoring organizat voluntary employees' beneficiary organizations (s  Part II of Schedule L  Notes and loans receivable, net Inventories for sale or use	ted employees led persons (as 4958(c)(3)(B), a tions of section	Complete defined under and 501(c)(9)	50		3 4	
AS SETS	3 4 5 6	Pledges and grants receivable, net Accounts receivable, net Loans and other receivables from current and for trustees, key employees, and highest compensat Part II of Schedule L Loans and other receivables from other disqualific section 4958(f)(1)) persons described in section 4 contributing employers and sponsoring organizat voluntary employees' beneficiary organizations (s Part II of Schedule L Notes and loans receivable, net Inventories for sale or use	ted employees led persons (as 4958(c)(3)(B), a tions of section	Complete defined under and 501(c)(9)		,000.	3 4	35,000.
A S S E T S	4 5 6 7 8 9	Accounts receivable, net Loans and other receivables from current and for trustees, key employees, and highest compensat Part II of Schedule L Loans and other receivables from other disqualifit section 4958(f)(1)) persons described in section 4 contributing employers and sponsoring organizat voluntary employees' beneficiary organizations (s Part II of Schedule L Notes and loans receivable, net Inventories for sale or use	ted employees led persons (as 4958(c)(3)(B), a tions of section	Complete defined under and 501(c)(9)		0,000.	4	35,000.
A S S E T S	5 6 7 8 9	Loans and other receivables from current and for trustees, key employees, and highest compensate Part II of Schedule L. Loans and other receivables from other disqualific section 4958(f)(1)) persons described in section 4 contributing employers and sponsoring organization voluntary employees' beneficiary organizations (see Part II of Schedule L. Notes and loans receivable, net Inventories for sale or use	ted employees led persons (as 4958(c)(3)(B), a tions of section	Complete defined under and 501(c)(9)				
A S S E T S	6 7 8 9	trustees, key employees, and highest compensate Part II of Schedule L. Loans and other receivables from other disqualific section 4958(f)(1)) persons described in section 4 contributing employers and sponsoring organization voluntary employees' beneficiary organizations (see Part II of Schedule L. Notes and loans receivable, net Inventories for sale or use	ted employees led persons (as 4958(c)(3)(B), a tions of section	Complete defined under and 501(c)(9)			5	
A S S E T S	7 8 9	Part II of Schedule L Loans and other receivables from other disqualific section 4958(f)(1)) persons described in section 4 contributing employers and sponsoring organization voluntary employees' beneficiary organizations (section 4) part II of Schedule L Notes and loans receivable, net Inventories for sale or use	ied persons (as 4958(c)(3)(B), a tions of section	defined under and 501(c)(9)			5	
A S S E T S	7 8 9	Loans and other receivables from other disqualific section 4958(f)(1)) persons described in section 4 contributing employers and sponsoring organization voluntary employees' beneficiary organizations (section 1) of Schedule L.  Notes and loans receivable, net	4958(c)(3)(B), a tions of section	ind 501(c)(9)			5	
A S S E T S	7 8 9	section 4958(f)(1)) persons described in section 4 contributing employers and sponsoring organization voluntary employees' beneficiary organizations (separt II of Schedule Leuron Notes and loans receivable, net linventories for sale or use	4958(c)(3)(B), a tions of section	ind 501(c)(9)			7.7	
SETS	8 9	contributing employers and sponsoring organization voluntary employees' beneficiary organizations (s Part II of Schedule L Notes and loans receivable, net Inventories for sale or use	tions of section	501(c)(9)				<b>[建设的是2762]</b> 第25章
S S E T S	8 9	voluntary employees' beneficiary organizations (s Part II of Schedule L Notes and loans receivable, net Inventories for sale or use					THE STATE OF SHIP	10000000000000000000000000000000000000
S E T S	8 9	Part II of Schedule L  Notes and loans receivable, net Inventories for sale or use	see instructions	) Complete	34100 C	SECTION APPROX	<b>克克斯</b>	
E T S	8 9	Notes and loans receivable, net . Inventories for sale or use			TO THE STATE OF TH			
S	8 9	Inventories for sale or use					6	
	9						7	
					-	F10	8	4 706
1	10 a	Prepaid expenses and deferred charges	14001	0 270		,512.	9	4,786.
1		Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	9,379.				
	h	Less accumulated depreciation	10Ь	7,502.		997.	10c	1,877.
		Investments-publicly-traded securities				11		
		Investments-other securities See Part IV, line 11			12			
		Investments-program-related See Part IV, line 1				13		
		Intangible assets					14	
- 1	15	Other assets See Part IV, line 11					15	
		Total assets. Add 1 through 15 (must equal line 3	34)		249	,085.	16	268,293.
1	17	Accounts payable and accrued expenses .			14	,072.	17	11,883.
1		Grants payable	revenue					
1	19	Deferred revenue						59,167.
- 1	20	Tax-exempt bond liabilities						
A 2	21	Escrow or custodial account liability Complete Pa	art IV of Sched	ule D	President de la Contra de la Co	HOUSE THE WINDOW	21 865786	THE THEFT DISCHALL SECOND SECO
	22	Payables to current and former officers, directors,	, trustees, key e	employees,				
1		highest compensated employees, and disqualified	d persons Cor	nplete				
Ţ		Part II of Schedule L	. ,				22	
	23	Secured Mortgages and notes payable to unrelate	ted third parties	:			23	
S 2		Unsecured notes and loans payable to unrelated					24	
2		Other liabilites (including federal income tax, paya						
		parties, and other liabilities not included on lines	17-24) Compi	ete Part X			25	
		of Schedule D  Total liabilities. Add lines 17 through 25			70	,322.	26	71,050.
-   2		Organizations that follow SFAS 117 (ASC 958),	shock boro	▼ and	AND THE REAL PROPERTY.		<b>W.W.</b>	
NF		complete lines 27 through 29, and lines 33 and	1 34.	മ ബ				
- 111		Unrestricted net assets				,337.	27	192,817.
D 2		Temporarily restricted net assets			<del>- 4</del>	,426.	28 29	4,426.
a   2		Permanently restricted net assets		_	WANTE MATERIAL	GATORICA TO	29	Maria Maria Maria Maria
S B S A B S		Organizations that do not follow SFAS 117 (AS	SC 958), check	here ▶ ∐and				
ÉĈ		complete lines 30 through 34.			ALCO TO THE SECOND	and the same	30	S. Difference of the second se
TA 3		Capital stock or trust principal, or current funds					31	-
14 3		Paid-in or capital surplus, or land, building, and e			·		32	<del></del>
₹el		Retained earnings, endowment, accumulated inco	ome, or other fo	unas	179	,763.	33	197,243.
٦		Total net assets or fund balances  Total liabilities and net assets/fund balances				, <del>085.</del>	34	268,293.
		right 2017 Saxon Tax Software		<del></del>		<del>,</del>		Form <b>990</b> (2017)

Form 990	<u>- , , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	<u>45-3</u>	1541!	<u>52                                    </u>	Pag	e 12
Part XI	Reconciliation of Net Assets					
	Check if Schedule O contains a response to any question in this Part XI					
. 1	Total revenue (must equal Part VIII, column (A), line 12)	1	3	05	70	90.
2	Total Expenses (must equal Part IX, column (A), line 25)	2				10.
3	Revenue less expenses Subtract line 2 from line 1	3				30.
4		4	1		•	50. 53.
5	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) .	5		. 70	, / (	<u>,,</u>
	Net unrealized gains (losses) on investments .	6				
6	Donated services and use of facilities	7				
7	Investment expenses	<u> </u>				
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	40	_			
Pode Co	33, column (B))	10		97	, 24	<u>. 3 .</u>
Part XII						_
	Check if Schedule O contains a response to any question in this Part XII					اللج
					Yes	NO
1	Accounting method used to prepare the Form 990 Cash X Accrual Other	0.1				1 1 1 1 1 1
_	If the organization changed its method of accounting from a prior year or checked "Other," explain it	n Sched	ule O	1.07	AU.	1.23
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled	or				
	reviewed on a separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate basis	SIS				
b	Were the organization's financial statements audited by an independent accountant?		•	2b	X	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited or	ı a				
	separate basis, consolidated basis, or both					ĺ
	Separate basis					
	If "Yes" to 2a or 2b, does the organization have a committee that assumes responsibility for oversigh	it of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?	_		2c	X	75 1
	If the organization changed either its oversight process or selection process during the tax year, exp	lain in		1	N.	小雪
	Schedule O			1 2	7.77	T.
	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 re	quired			
	audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		
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											9
Part II-B	Complete	if the organiza	ion is e	exempt under	section	501(c)(3)	and has	NOT '	filed F	Form	
	5768 (elec	tion under sec	tion 501	1(h)).							

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)?  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 other similar means?  I Other activities?  I Total lines 1c through 1i	1)	(b)	
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)?  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 other similar means?  I Other activities?	No	Amount	
b Paid staff or managment (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 other similar means?  I Other activities?			
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 other similar means?  I Other activities?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?  h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other similar means?  l Other activities?			
I Other activities?			
I Total 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 it file Form 4720 for this year?	1 1 25	No. of the state o	

### Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	_1_		Χ
2	Did the organization make only in-house lobby expenditures of \$2,000 or less?	2	Χ	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?	3		X

#### Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes."

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	, 1	
	expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
t	Carryover from last year	2b	
	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
	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?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

#### Part 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 (affilated 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

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| 1 |

Description of Investment	(a) Cost or other basis (Investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value	
1a Land			TANK AND WAY		
<b>b</b> Buildings	<u></u>				
c Leasehold improvements					
d Equipment	9,379.		7,502.	<u>1,877.</u>	
e Other					
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c) )					

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WINTER	HAVEN	ECONOMIC	DEVEL	ОРМЕ ИТ

ichedule D	(Form 990)	2017
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45-3154152 Page 4

Pa	Reconciliation of Revenue per Audited Financial Statements With Revenue Complete if the organization answered "Yes" to Form 990, Part IV, line 12a	enue	per Return
1.	Total revenue, gains and other support per audited financial statements	1	285,790.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on investments		
Ь	Donated services and use of facilities 2b		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII) 2d		•
е	Add lines 2a through 2d	2e	•
3	Subtract line 2e from line 1	3	285,790.
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		
ь	Other (Describe in Part XIII)	I i	
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	285,790.
Pa	IttXIII Reconciliation of Expenses per Audited Financial Statements With Exp	ens	e per Return
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a		
1	Total expenses and losses per audited financial statements	1	267,310.
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)		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1 .	3	267,310.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1.		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII) . 4b		
	Add lines 4a and 4b	4c	
5	Fotal expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	267,310.

Part XIII Supplemental Information

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

m3

#### Schedule O

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(Form 990 or 990-EZ)

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047
2017
Open to Public

Name of the organization

WINTER HAVEN ECONOMIC DEVELOPMENT

Employer identification number 45-3154152

Part VI, Line 3 - Organization delegated customary officer management duties

AN EXECUTIVE COMMITTEE IS APPOINTED BY THE BOARD TO RUN THE ORGANIZATION.

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 15a/15b - Compensation review process

THE PRESIDENT'S SALARY IS BASED UPON A RANGE AND FRAMEWORK GIVEN BY THE CONSULTING GROUP THAT DID THE FEASIBILITY STUDY FOR THE CREATION OF THE ORGANIZATION. IT IS REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS.

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

Name of the organization

WINTER HAVEN ECONOMIC DEVELOPMENT

Employer identification number

45-3154152

Part IX,	Line 24 - Other Ex	xpenses			
Descripti	.on	Program services	Management & general	Fundraising	Total
COMPUTER TELEPHONE MEETINGS EVENTS	PROCESSING FEES OF EXP/WEB HOSTING				1,033. 3,186. 2,868. 5,244. 3,665. 15,607.
,	Totals:	0.	0.	0.	31,603.