

Form **990**
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public
Information about Form 990 and its instructions is at www.irs.gov/form990

OMB No 1545-0047
2016
Open to Public Inspection

A For the 2016 calendar year, or tax year beginning 10-01-2016, and ending 09-30-2017

- B** Check if applicable
 Address change
 Name change
 Initial return
 Final
 Return/terminated
 Amended return
 Application pending

C Name of organization
ECONOMIC DEVELOPMENT COMMISSION OF FLORIDA'S SPACE COAST INC
Doing business as
Number and street (or P O box if mail is not delivered to street address) Room/suite
6525 3RD STREET NO 304
City or town, state or province, country, and ZIP or foreign postal code
ROCKLEDGE, FL 32955

D Employer identification number
59-2946685
E Telephone number
(321) 638-2000
G Gross receipts \$ 2,754,519

F Name and address of principal officer
LYNDA WEATHERMAN
6525 3RD STREET NO 304
ROCKLEDGE, FL 32955

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
If "No," attach a list (see instructions)
H(c) Group exemption number ▶

I Tax-exempt status 501(c)(3) 501(c) (6) ◀ (insert no) 4947(a)(1) or 527

J Website: ▶ WWW SPACECOASTEDC.ORG

K Form of organization Corporation Trust Association Other ▶

L Year of formation 1989

M State of legal domicile FL

Part I Summary

1 Briefly describe the organization's mission or most significant activities
FOSTER ECONOMIC AND INDUSTRIAL DEVELOPMENT IN BREVARD COUNTY, FLORIDA

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a)	168
4 Number of independent voting members of the governing body (Part VI, line 1b)	168
5 Total number of individuals employed in calendar year 2016 (Part V, line 2a)	14
6 Total number of volunteers (estimate if necessary)	320
7a Total unrelated business revenue from Part VIII, column (C), line 12	0
7b Net unrelated business taxable income from Form 990-T, line 34	0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	1,893,499	2,657,935
9 Program service revenue (Part VIII, line 2g)	942,778	90,660
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	6,582	2,842
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	17,251	3,082
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,860,110	2,754,519
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0	0
14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,416,460	1,469,496
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 0		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,348,416	1,204,232
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	2,764,876	2,673,728
19 Revenue less expenses Subtract line 18 from line 12	95,234	80,791

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	2,841,355	2,565,964
21 Total liabilities (Part X, line 26)	1,703,861	1,347,679
22 Net assets or fund balances Subtract line 21 from line 20	1,137,494	1,218,285

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here
Signature of officer: *****
Date: 2018-07-11
LYNDA WEATHERMAN PRESIDENT
Type or print name and title

Paid Preparer Use Only
Print/Type preparer's name: JAMES A HALLERAN
Preparer's signature: JAMES A HALLERAN
Date: 2018-07-11
Check if self-employed
PTIN: P00005496
Firm's name: JAMES MOORE & CO PL
Firm's EIN: 59-3204548
Firm's address: 121 EXECUTIVE CIR
DAYTONA BEACH, FL 321141180
Phone no: (386) 257-4100

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

1 Briefly describe the organization's mission

FOSTER ECONOMIC AND INDUSTRIAL DEVELOPMENT IN BREVARD COUNTY, FLORIDA

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 2,185,454 including grants of \$) (Revenue \$ 93,742)
See Additional Data

















4b (Code) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 2,185,454

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>		No
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? 	Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> 		No
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? <i>If "Yes," complete Schedule C, Part II</i>		
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i> 	Yes	
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> 		No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> 		No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> 		No
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? <i>If "Yes," complete Schedule D, Part IV</i> 		No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> 		No
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> 	Yes	
b 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? <i>If "Yes," complete Schedule D, Part VII</i> 		No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i> 		No
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? <i>If "Yes," complete Schedule D, Part IX</i> 		No
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> 		No
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i> 	Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> 	Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> 		No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		No
14a Did the organization maintain an office, employees, or agents outside of the United States?		No
b Did the organization have aggregate 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? <i>If "Yes," complete Schedule F, Parts I and IV</i>		No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)		No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		No

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>		No
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? <i>If "Yes," complete Schedule I, Parts I and III</i>		No
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? <i>If "Yes," complete Schedule J</i>	Yes	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		No
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>		
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		
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? <i>If "Yes," complete Schedule L, Part II</i>		No
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		No
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	Yes	
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		No
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		No
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		No
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		No
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		No
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		No
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		No
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
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? <i>If "Yes," complete Schedule R, Part VI</i>		No
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

Table with columns for question ID, question text, and Yes/No response boxes. Includes sections for backup withholding, employee reporting, foreign accounts, prohibited transactions, charitable contributions, and 501(c)(7), (12), and (29) organizations.

Part VI 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 or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a (168), 1b (168), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

Table with 3 columns: Question, Yes, No. Rows include: 17, 18, 19, 20.

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b	499,250				
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	2,158,685				
	f All other contributions, gifts, grants, and similar amounts not included above	1f					
	g Noncash contributions included in lines 1a-1f \$ _____						
	h Total. Add lines 1a-1f		2,657,935				
Program Service Revenue		Business Code					
	2a MEETINGS AND FUNCTIONS	900099	48,815	48,815			
	b PROGRAM SPONSORSHIPS	900099	41,845	41,845			
	c _____						
	d _____						
	e _____						
	f All other program service revenue						
g Total. Add lines 2a-2f		90,660					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		2,842			2,842	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents	(i) Real	(ii) Personal				
		b Less rental expenses					
		c Rental income or (loss)					
		d Net rental income or (loss)					
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b Less cost or other basis and sales expenses					
		c Gain or (loss)					
		d Net gain or (loss)					
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a					
		b Less direct expenses	b				
		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 activities							
10a Gross sales of inventory, less returns and allowances	a						
	b Less cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue	Business Code						
11a MISC REVENUE	900099	3,082	3,082				
b _____							
c _____							
d All other revenue							
e Total. Add lines 11a-11d		3,082					
12 Total revenue. See Instructions		2,754,519	93,742	0	2,842		

Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2 Grants and other assistance to domestic individuals See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	331,542	298,388	33,154	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	796,590	569,169	227,421	
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	112,655	81,455	31,200	
9 Other employee benefits	157,159	118,863	38,296	
10 Payroll taxes	71,550	54,656	16,894	
11 Fees for services (non-employees)				
a Management				
b Legal	4,674		4,674	
c Accounting	20,069		20,069	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12 Advertising and promotion	141,116	141,116		
13 Office expenses	73,338	9,590	63,748	
14 Information technology	27,204	20,781	6,423	
15 Royalties				
16 Occupancy	106,419	84,071	22,348	
17 Travel	7,146	7,146		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	42,018	42,018		
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	19,054	16,197	2,857	
23 Insurance	4,435	3,388	1,047	
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.)				
a EXPENSES UNDER GRANTS	704,154	704,154		
b DATA & RESEARCH SERVICE	19,729	19,729		
c BAD DEBT EXPENSES	17,625		17,625	
d EDUCATION & TRAINING	10,662	8,144	2,518	
e All other expenses	6,589	6,589		
25 Total functional expenses. Add lines 1 through 24e	2,673,728	2,185,454	488,274	0
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part IX

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	269,342	1	125,373
	2 Savings and temporary cash investments	2,324,017	2	2,221,159
	3 Pledges and grants receivable, net	48,101	3	61,341
	4 Accounts receivable, net	93,125	4	98,722
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	31,624	9	3,277
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 149,763		
	b Less accumulated depreciation	10b 103,799	65,018	10c 45,964
	11 Investments—publicly traded securities		11	
	12 Investments—other securities See Part IV, line 11		12	
	13 Investments—program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11	10,128	15	10,128
16 Total assets. Add lines 1 through 15 (must equal line 34)	2,841,355	16	2,565,964	
Liabilities	17 Accounts payable and accrued expenses	166,786	17	146,924
	18 Grants payable		18	
	19 Deferred revenue	1,537,075	19	1,200,755
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	1,703,861	26	1,347,679
Net Assets or Fund Balances	27 Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets	1,137,494	27	1,218,285
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	30 Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34. Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	1,137,494	33	1,218,285
	34 Total liabilities and net assets/fund balances	2,841,355	34	2,565,964

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,754,519
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,673,728
3	Revenue less expenses Subtract line 2 from line 1	3	80,791
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,137,494
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,218,285

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

		Yes	No
1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a Were the organization's financial statements compiled or reviewed by an independent accountant? 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 <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a		No
b Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	Yes	
c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Additional Data

Software ID:

Software Version:

EIN: 59-2946685

Name: ECONOMIC DEVELOPMENT COMMISSION OF
FLORIDA'S SPACE COAST INC

Form 990 (2016)

Form 990, Part III, Line 4a:

ECONOMIC AND INDUSTRIAL DEVELOPMENT IN BREVARD COUNTY, FLORIDA

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
DANIEL EVANS AT-LARGE REP OF ALL MEMBERS	1 00	X						0	0	0
BRIAN LIGHTLE AT-LARGE REP OF ALL MEMBERS	1 00	X						0	0	0
MARK MALEK AT-LARGE REP OF ALL MEMBERS	1 00	X						0	0	0
GILBERT RUSSELL AT-LARGE REP OF ALL MEMBERS	1 00	X						0	0	0
ARTHUR BECKER BOARD OF ADVISOR LEVEL	1 00	X						0	0	0
CINDY DITTMER BOARD OF ADVISOR LEVEL	1 00	X						0	0	0
JOSH FIELD BOARD OF ADVISOR LEVEL	1 00	X						0	0	0
BART GAETJENS BOARD OF ADVISOR LEVEL	1 00	X						0	0	0
DAVID KORNICK BOARD OF ADVISOR LEVEL	1 00	X						0	0	0
PHIL KRULL BOARD OF ADVISOR LEVEL	1 00	X						0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
GARY PALMER BOARD OF ADVISOR LEVEL	1 00	X						0	0	0
DINA REIDER-HICKS BOARD OF ADVISOR LEVEL CHAMBER OF COMMERCE	1 00	X						0	0	0
DANA KILBORNE CHAIRMAN ELECT	1 00	X		X				0	0	0
PHILLIP HAYES CHAIRMAN OF THE BOARD CORPORATE LEVEL	1 00	X		X				0	0	0
GWENDOLYN ANELLO CHAIRMAN'S LEVEL	1 00	X						0	0	0
MATT ASHLEY CHAIRMAN'S LEVEL	1 00	X						0	0	0
KRISTIN BAKKE CHAIRMAN'S LEVEL	1 00	X						0	0	0
COURTNEY BARKER CHAIRMAN'S LEVEL	1 00	X						0	0	0
CHARLES R BERRY II CHAIRMAN'S LEVEL	1 00	X						0	0	0
BARNEY BISHOP III CHAIRMAN'S LEVEL	1 00	X						0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JERI BLANCO CHAIRMAN'S LEVEL	1 00	X						0	0	0
JULIE BRAGA CHAIRMAN'S LEVEL	1 00	X						0	0	0
THOMAS BRANDON CHAIRMAN'S LEVEL	1 00	X						0	0	0
LINDA BRANDT CHAIRMAN'S LEVEL	1 00	X						0	0	0
ADAM BROADWAY CHAIRMAN'S LEVEL	1 00	X						0	0	0
KIM BROWN CHAIRMAN'S LEVEL	1 00	X						0	0	0
COLLEEN BROWNE CHAIRMAN'S LEVEL	1 00	X						0	0	0
LAURA CHIESMAN CHAIRMAN'S LEVEL	1 00	X						0	0	0
ROZ CLARK CHAIRMAN'S LEVEL	1 00	X						0	0	0
ERIK COSTIN CHAIRMAN'S LEVEL	1 00	X						0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
BILL DAVIS CHAIRMAN'S LEVEL	1 00	X						0	0	0
CRAIG DAY CHAIRMAN'S LEVEL	1 00	X						0	0	0
STEPHANY ELEY CHAIRMAN'S LEVEL	1 00	X						0	0	0
BARRY FORBES CHAIRMAN'S LEVEL	1 00	X						0	0	0
KEVIN GHOLSTON CHAIRMAN'S LEVEL	1 00	X						0	0	0
DON GUST CHAIRMAN'S LEVEL	1 00	X						0	0	0
RICH HALL CHAIRMAN'S LEVEL	1 00	X						0	0	0
RANDALL HARRIS CHAIRMAN'S LEVEL	1 00	X						0	0	0
DEBBIE HARVEY CHAIRMAN'S LEVEL	1 00	X						0	0	0
BILL HENDRICKSON CHAIRMAN'S LEVEL	1 00	X						0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
DAN HENN CHAIRMAN'S LEVEL	1 00	X						0	0	0
TOM HERMANSEN CHAIRMAN'S LEVEL	1 00	X						0	0	0
STEVEN R HICKS CHAIRMAN'S LEVEL	1 00	X						0	0	0
JOHN HOFFER CHAIRMAN'S LEVEL	1 00	X						0	0	0
TREY HUY CHAIRMAN'S LEVEL	1 00	X						0	0	0
STEPHEN JOHNSON CHAIRMAN'S LEVEL	1 00	X						0	0	0
JOAN JUNKALA CHAIRMAN'S LEVEL	1 00	X						0	0	0
GARY H KREISLER CHAIRMAN'S LEVEL	1 00	X						0	0	0
GARY KRUEGER CHAIRMAN'S LEVEL	1 00	X						0	0	0
TREVOR LEWIS CHAIRMAN'S LEVEL	1 00	X						0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JONI C LUCE CHAIRMAN'S LEVEL	1 00	X						0	0	0
JORDAN LUHN CHAIRMAN'S LEVEL	1 00	X						0	0	0
CHRISTOPHER MAROT CHAIRMAN'S LEVEL	1 00	X						0	0	0
DAWN MAYS CHAIRMAN'S LEVEL	1 00	X						0	0	0
LINDA MIEDEMA CHAIRMAN'S LEVEL	1 00	X						0	0	0
JASON MILLER CHAIRMAN'S LEVEL	1 00	X						0	0	0
LAUREN MILLER CHAIRMAN'S LEVEL	1 00	X						0	0	0
LAURA MINTON YOUNG CHAIRMAN'S LEVEL	1 00	X						0	0	0
TODD MORLEY CHAIRMAN'S LEVEL	1 00	X						0	0	0
PAUL NEWMAN CHAIRMAN'S LEVEL	1 00	X						0	0	0

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JOHN COLE OLIVER CHAIRMAN'S LEVEL	1 00	X						0	0	0
DAN POLLOCK CHAIRMAN'S LEVEL	1 00	X						0	0	0
TRAVIS PROCTOR CHAIRMAN'S LEVEL	1 00	X						0	0	0
JIM RIDENOUR CHAIRMAN'S LEVEL	1 00	X						0	0	0
ANTHONY ROMERO CHAIRMAN'S LEVEL	1 00	X						0	0	0
WENDY ROMEU CHAIRMAN'S LEVEL	1 00	X						0	0	0
JACK RYALS CHAIRMAN'S LEVEL	1 00	X						0	0	0
MEL SCOTT CHAIRMAN'S LEVEL	1 00	X						0	0	0
MICHAEL SJUGGERUD CHAIRMAN'S LEVEL	1 00	X						0	0	0
FORREST SMALLEY CHAIRMAN'S LEVEL	1 00	X						0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
SUSAN SMITH CHAIRMAN'S LEVEL	1 00	X						0	0	0
NATASHA CARTAGENA SPENCER CHAIRMAN'S LEVEL	1 00	X						0	0	0
STEPHEN C THOMAS CHAIRMAN'S LEVEL	1 00	X						0	0	0
JOHN TICE CHAIRMAN'S LEVEL	1 00	X						0	0	0
TODD TWACHTMANN CHAIRMAN'S LEVEL	1 00	X						0	0	0
AMANDA TYNAN CHAIRMAN'S LEVEL	1 00	X						0	0	0
MATTHEW VAZQUEZ CHAIRMAN'S LEVEL	1 00	X						0	0	0
DAVID J VOLK CHAIRMAN'S LEVEL	1 00	X						0	0	0
KEN WELSH CHAIRMAN'S LEVEL	1 00	X						0	0	0
BRADLEY WHITE CHAIRMAN'S LEVEL	1 00	X						0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
BILL WILLIAMS CHAIRMAN'S LEVEL	1 00	X						0	0	0
KIRK HALL CHAIRMAN'S LEVEL EDC COUNCIL CHAIRMAN	1 00	X						0	0	0
TODD J STARKEY CHAIRMAN'S LEVEL EDC COUNCIL CHAIRMAN	1 00	X						0	0	0
NEAL JOHNSON CHAIRMAN'S LEVEL, EDC COUNCIL CHAIRMAN, AT-LARGE REP	1 00	X						0	0	0
ROBERT SALONEN CHAMBER OF COMMERCE	1 00	X						0	0	0
BILLY SPECHT CHAMBER OF COMMERCE	1 00	X						0	0	0
ROBERT F ADAMS CORPORATE LEVEL	1 00	X						0	0	0
JUSTIN BARNHILL CORPORATE LEVEL	1 00	X						0	0	0
JEAN ANN BOWMAN CORPORATE LEVEL	1 00	X						0	0	0
SANDRA BURGE CORPORATE LEVEL	1 00	X						0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
BRIAN CURTIN CORPORATE LEVEL	1 00	X						0	0	0
GLENN DUNCAN CORPORATE LEVEL	1 00	X						0	0	0
DEBBIE GOODE CORPORATE LEVEL	1 00	X						0	0	0
WAYNE E JUSTICE CORPORATE LEVEL	1 00	X						0	0	0
JEFF KIEL CORPORATE LEVEL	1 00	X						0	0	0
LESLIE LAKE CORPORATE LEVEL	1 00	X						0	0	0
RICK MATTHEWS CORPORATE LEVEL	1 00	X						0	0	0
MARCI MURPHY CORPORATE LEVEL	1 00	X						0	0	0
JO LYNN NELSON CORPORATE LEVEL	1 00	X						0	0	0
MIKE RUGGIERO CORPORATE LEVEL	1 00	X						0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JESSICA RYE CORPORATE LEVEL	1 00	X						0	0	0
LINDA STOUT CORPORATE LEVEL	1 00	X						0	0	0
EMMANUEL TORMES CORPORATE LEVEL	1 00	X						0	0	0
LISA WILDER CORPORATE LEVEL	1 00	X						0	0	0
MICHAEL WILLIAMS SR CORPORATE LEVEL	1 00	X						0	0	0
HOLLY CARVER COUNTY COMMISSION REP	1 00	X						0	0	0
DANIEL CIURO COUNTY COMMISSION REP	1 00	X						0	0	0
WAYNE COOPER COUNTY COMMISSION REP	1 00	X						0	0	0
PETER FUSSCAS COUNTY COMMISSION REP	1 00	X						0	0	0
MICHAEL HARTMAN COUNTY COMMISSION REP	1 00	X						0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
TRUDIE INFANTINI COUNTY COMMISSION REP	1 00	X						0	0	0
MICHAEL ENNIS EDC COUNCIL CHAIRMAN	1 00	X						0	0	0
LUKE MIORELLI EDC COUNCIL CHAIRMAN	1 00	X						0	0	0
MATTHEW SUSIN EDC COUNCIL CHAIRMAN	1 00	X						0	0	0
ABRAM WALTON-LEAD BREVARD 4 UNDER 4 EDC COUNCIL CHAIRMAN, EX-OFFICIO BOARD MEMBER	1 00	X						0	0	0
MARK F BUSALACCHI LEADERSHIP LEVEL	1 00	X						0	0	0
GORDY HOUSER LEADERSHIP LEVEL	1 00	X						0	0	0
WILLIAM JOHNSON LEADERSHIP LEVEL	1 00	X						0	0	0
CLAUDIA JONES LEGAL COUNSEL	1 00	X						0	0	0
MARK MIKOLAJCZYK PAST CHAIRMAN OF THE BOARD BOARD OF ADVISOR LEVEL	1 00	X						0	0	0

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WINSTON SCOTT PAST CHAIRMAN OF THE BOARD CHAIRMAN'S LEVEL	1 00	X		X				0	0	0
JOE T MAYER SECRETARY LEADERSHIP LEVEL EDC COUNCIL CHAIRMAN	1 00	X		X				0	0	0
JULIE K SONG TREASURER	1 00	X		X				0	0	0
JEFF BAILEY DIRECTOR	1 00	X						0	0	0
JIM BARFIELD DIRECTOR	1 00	X						0	0	0
STEPHANIE BEDNAREK DIRECTOR	1 00	X						0	0	0
BONNY BLOCK DIRECTOR	1 00	X						0	0	0
WILLIAM CAPOTE DIRECTOR	1 00	X						0	0	0
PAMELA CARROLL DIRECTOR	1 00	X						0	0	0
JOANNE CREECH DIRECTOR	1 00	X						0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
PEGGY CROOKS DIRECTOR	1 00	X						0	0	0
ELLA CROW DIRECTOR	1 00	X						0	0	0
CYNTHIA DROPSKI DIRECTOR	1 00	X						0	0	0
JARIN EISENBERG DIRECTOR	1 00	X						0	0	0
CAREY GLEASON DIRECTOR	1 00	X						0	0	0
MICHAEL GRAHAM DIRECTOR	1 00	X						0	0	0
GWEN GRIFFIN DIRECTOR	1 00	X						0	0	0
PAUL HANSON DIRECTOR	1 00	X						0	0	0
LYNNETTE HENDRICKS DIRECTOR	1 00	X						0	0	0
PACO HERNANDEZ DIRECTOR	1 00	X						0	0	0

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DALE HOWLETT DIRECTOR	1 00	X						0	0	0
KARIN JAMISON DIRECTOR	1 00	X						0	0	0
LYNN JONES DIRECTOR	1 00	X						0	0	0
ROBERT JORDAN DIRECTOR	1 00	X						0	0	0
THOMAS L KIRK DIRECTOR	1 00	X						0	0	0
TAMMY KISER DIRECTOR	1 00	X						0	0	0
MICA LAYNE DIRECTOR	1 00	X						0	0	0
CAMI LEECH-FLORIO DIRECTOR	1 00	X						0	0	0
JOLEE MARTIN DIRECTOR	1 00	X						0	0	0
MICHELLE MASLINE DIRECTOR	1 00	X						0	0	0

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TROY MCNICHOLS DIRECTOR	1 00	X						0	0	0
GEORGE MIKITARIAN DIRECTOR	1 00	X						0	0	0
BRENT PEOPLES DIRECTOR	1 00	X						0	0	0
JEFF PIERSALL DIRECTOR	1 00	X						0	0	0
RITA PRITCHETT DIRECTOR	1 00	X						0	0	0
JOHN SAGER DIRECTOR	1 00	X						0	0	0
KIMBERLY SANTIAGO DIRECTOR	1 00	X						0	0	0
REBECCA SHIREMAN DIRECTOR	1 00	X						0	0	0
JEN SNELSON DIRECTOR	1 00	X						0	0	0
SCOTT SORENSEN DIRECTOR	1 00	X						0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JASON C STANLEY DIRECTOR	1 00	X						0	0	0
AARON THALWITZER DIRECTOR	1 00	X						0	0	0
JOHN THOMAS DIRECTOR	1 00	X						0	0	0
WEIMAR TUDELA DIRECTOR	1 00	X						0	0	0
JACQUELYN WHITTAKER DIRECTOR	1 00	X						0	0	0
KEN WHITTAKER DIRECTOR	1 00	X						0	0	0
PETER D WOODS DIRECTOR	1 00	X						0	0	0
RICHARD YOUNT DIRECTOR	1 00	X						0	0	0
LYNDA WEATHERMAN PRESIDENT	40 00			X				303,200	0	48,505
GREG WEINER SENIOR DIRECTOR BUSINESS	40 00					X		120,043	0	27,138

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TRUDY MCCARTHY SENIOR DIRECTOR MARKETING	40 00					X		117,833	0	34,908

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

2016

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶ **Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.**
▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at**
www.irs.gov/form990.

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

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

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

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

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

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization ECONOMIC DEVELOPMENT COMMISSION OF FLORIDA'S SPACE COAST INC	Employer identification number 59-2946685
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV
- 2 Political expenditures ▶ \$ _____
- 3 Volunteer hours _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file Form 1120-POL for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
2				
3				
4				
5				
6				

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B** Check if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures
(The term "expenditures" means amounts paid or incurred.)

(a) Filing organization's totals	(b) Affiliated group totals
----------------------------------	-----------------------------

- 1a** Total lobbying expenditures to influence public opinion (grass roots lobbying)
- b** Total lobbying expenditures to influence a legislative body (direct lobbying)
- c** Total lobbying expenditures (add lines 1a and 1b)
- d** Other exempt purpose expenditures
- e** Total exempt purpose expenditures (add lines 1c and 1d)
- f** Lobbying nontaxable amount Enter the amount from the following table in both columns

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over \$500,000	20% of the amount on line 1e
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000
Over \$17,000,000	\$1,000,000

- g** Grassroots nontaxable amount (enter 25% of line 1f)
- h** Subtract line 1g from line 1a If zero or less, enter -0-
- i** Subtract line 1f from line 1c If zero or less, enter -0-
- j** If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? Yes No

4-Year Averaging Period Under section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity

	(a)		(b)
	Yes	No	Amount
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 management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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	No
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	Yes
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	No

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

1 Dues, assessments and similar amounts from members	1
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	
a Current year	2a
b 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 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 (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Return Reference	Explanation
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SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047
2016
Open to Public Inspection

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

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

Name of the organization
ECONOMIC DEVELOPMENT COMMISSION OF
FLORIDA'S SPACE COAST INC

Employer identification number
59-2946685

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

Preservation of land for public use (e g , recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

(ii) Assets included in Form 990, Part X ▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

- 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** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, 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? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table
- | | Amount |
|--|--------|
| c Beginning balance | |
| d Additions during the year | |
| e Distributions during the year | |
| f Ending balance | |
- 2a** Did the organization include 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

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a)Current year	(b)Prior year	(c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance					
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 current year end balance (line 1g, column (a)) held as
- a** Board designated or quasi-endowment ▶
 - b** Permanent endowment ▶
 - c** Temporarily restricted endowment ▶
- The percentages on lines 2a, 2b, and 2c should equal 100%
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- | | | |
|--|------------|-----------|
| (i) unrelated organizations | Yes | No |
| 3a(i) | | |
| (ii) related organizations | Yes | No |
| 3a(ii) | | |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | | |
| 3b | | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		34,987	6,414	28,573
d Equipment		88,128	70,737	17,391
e Other		26,648	26,648	0
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				45,964

Part VII Investments—Other Securities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		

Part VIII Investments—Program Related. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)		

Part IX Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)	

Part X Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	2,789,683
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b	35,164	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	35,164
3	Subtract line 2e from line 1		3	2,754,519
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1 :			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	0
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)		5	2,754,519

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	2,708,892
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a	35,164	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	35,164
3	Subtract line 2e from line 1		3	2,673,728
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	0
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)		5	2,673,728

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, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 59-2946685

Name: ECONOMIC DEVELOPMENT COMMISSION OF
FLORIDA'S SPACE COAST INC

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	THE COMMISSION HAS REVIEWED AND EVALUATED THE RELEVANT TECHNICAL MERITS OF EACH OF ITS TAX POSITIONS IN ACCORDANCE WITH ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA FOR ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, AND DETERMINED THAT THERE ARE NO UNCERTAIN TAX POSITIONS THAT WOULD HAVE A MATERIAL IMPACT ON THE FINANCIAL STATEMENTS



**Schedule J
(Form 990)**

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ▶ Attach to Form 990.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

Name of the organization
ECONOMIC DEVELOPMENT COMMISSION OF FLORIDA'S SPACE COAST INC

Employer identification number
59-2946685

Part I Questions Regarding Compensation

	Yes	No
<p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</p> <p><input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Housing allowance or residence for personal use</p> <p><input type="checkbox"/> Travel for companions <input type="checkbox"/> Payments for business use of personal residence</p> <p><input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Health or social club dues or initiation fees</p> <p><input type="checkbox"/> Discretionary spending account <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</p>		
<p>b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.</p>	Yes	
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?</p>		No
<p>3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</p> <p><input type="checkbox"/> Compensation committee <input type="checkbox"/> Written employment contract</p> <p><input type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Compensation survey or study</p> <p><input type="checkbox"/> Form 990 of other organizations <input type="checkbox"/> Approval by the board or compensation committee</p>		
<p>4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization:</p> <p>a Receive a severance payment or change-of-control payment?</p>		No
<p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p>		No
<p>c Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>		No
<p>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</p>		
<p>5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:</p> <p>a The organization?</p>		
<p>b Any related organization?</p> <p>If "Yes," on line 5a or 5b, describe in Part III.</p>		
<p>6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:</p> <p>a The organization?</p>		
<p>b Any related organization?</p> <p>If "Yes," on line 6a or 6b, describe in Part III.</p>		
<p>7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.</p>		
<p>8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.</p>		
<p>9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column(B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 LYNDIA WEATHERMAN PRESIDENT	(i)	200,400 -----	92,000 -----	10,800 -----	38,512 -----	9,993 -----	351,705 -----	0 -----
	(ii)	0	0	0	0	0	0	0
2 TRUDY MCCARTHY SENIOR DIRECTOR MARKETING	(i)	108,833 -----	9,000 -----	0 -----	17,274 -----	17,634 -----	152,741 -----	0 -----
	(ii)	0	0	0	0	0	0	0

Part III **Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
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Schedule L (Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

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

Attach to Form 990 or Form 990-EZ.

Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2016

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization ECONOMIC DEVELOPMENT COMMISSION OF FLORIDA'S SPACE COAST INC

Employer identification number 59-2946685

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only) Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

Table with 5 columns: (a) Name of disqualified person, (b) Relationship between disqualified person and organization, (c) Description of transaction, (d) Corrected? (Yes/No)

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 \$
3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization \$

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

Table with 9 columns: (a) Name of interested person, (b) Relationship with organization, (c) Purpose of loan, (d) Loan to or from the organization? (To/From), (e) Original principal amount, (f) Balance due, (g) In default? (Yes/No), (h) Approved by board or committee? (Yes/No), (i) Written agreement? (Yes/No)

Total \$

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

Table with 5 columns: (a) Name of interested person, (b) Relationship between interested person and the organization, (c) Amount of assistance, (d) Type of assistance, (e) Purpose of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) BRANDT RONAT & COMPANY	ENTITY MORE THAN 35% OWNED BY BOARD MEMBER LINDA BRANDT	35,357	MARKETING FEES		No

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference	Explanation

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

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/form990.

2016

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

ECONOMIC DEVELOPMENT COMMISSION OF
FLORIDA'S SPACE COAST INC

Employer identification number

59-2946685

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART I, LINE 6	MEMBERS OF THE BOARD OF DIRECTORS AND OTHERS IN THE COMMUNITY, TOTALING APPROXIMATELY 320 VOLUNTEERS, PROVIDED SERVICE DURING FISCAL 2016-2017

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	A DRAFT OF THE FORM 990 AND REQUIRED ATTACHMENTS IS PRESENTED TO THE FINANCE COUNCIL AND SENIOR EDC STAFF BY THE CPA PREPARING THE RETURN, PRIOR TO FILING THE FINANCE COUNCIL APPROVES THE RETURN FOR THE FILING

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	PRIOR TO A VOTE FOR ACTION BY THE EDC WHICH MAY RESULT IN A CONFLICT OF INTEREST, MEMBERS ARE ASKED TO IDENTIFY ANY POTENTIAL CONFLICT RELATED TO THE ITEM IF A CONFLICT IS PRESENT, THEY ARE ASKED TO DISMISS THEMSELVES FROM THE DISCUSSION/VOTE

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	<p>PRESIDENTS REVIEW COMMITTEE- EACH YEAR, A COMMITTEE OF AT LEAST FOUR SHALL BE SELECTED BY THE IMMEDIATE PAST CHAIRMAN OF THE BOARD TO REVIEW THE PRESIDENTS PERFORMANCE AND RECOMMEND ADJUSTMENTS TO THE PRESIDENTS COMPENSATION PACKAGE THE COMMITTEE SHALL BE CHAIRED BY THE IMMEDIATE PAST CHAIRMAN OF THE BOARD OF THE EDC AND SHALL INCLUDE THE CURRENT CHAIRMAN OF THE BOARD THE REMAINDER SHALL BE COMPOSED OF PREVIOUS CHAIRPERSONS OF THE EDC A SALARY COMPARISON/BENCHMARK OF AREA ECONOMIC DEVELOPMENT ORGANIZATIONS WILL BE CONDUCTED AS REQUESTED BY THE IMMEDIATE PAST CHAIRMAN OF THE BOARD AT MINIMUM, EVERY THREE YEARS, CONSIDERATIONS FOR THE COMPARABLE ORGANIZATIONS SHALL INCLUDE BUDGET, STAFF SIZE AND COMPETITIVE POSITION PRIOR TO THE FIRST MEETING, A PERFORMANCE QUESTIONNAIRE SHALL BE DISTRIBUTED TO THE EXECUTIVE COMMITTEE MEMBERS REQUESTING FEEDBACK REGARDING THE PRESIDENTS PERFORMANCE FOR THE YEAR THIS WILL SERVE AS A BASIS FOR REVIEW DISCUSSIONS AND DEVELOPMENT OF ANNUAL GOALS RESPONSES WILL BE DIRECTED TO THE IMMEDIATE PAST CHAIRMAN OF THE BOARD OR HIS/HER DESIGNEE STAFF SALARY REVIEWS - STAFF SALARIES ARE REVIEWED ANNUALLY AND ADJUSTED BASED ON PERFORMANCE, LEVEL OF RESPONSIBILITIES, AND SALARY COMPARISONS THE PRESIDENT AND CEO APPROVES ALL SALARIES</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	GOVERNING DOCUMENTS, CORPORATE POLICIES, AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST AT THE EDC'S OFFICE

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XII, LINE 2(C)	THE PROCESS FOR THE SELECTION AND SUPERVISION OF THE ORGANIZATION'S INDEPENDENT AUDITOR HAS REMAINED CONSISTENT WITH THE PRIOR YEAR