EXTENDED TO MAY 15, 2017

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

Α	For the	e 2015 calendar year, or tax year beginning JUL 1, 2015 and ending	<u>JUN</u> 30, 2016	
В	Check if applicable	C Name of organization	D Employer identifi	cation number
۲	Addre	ss KLAMATH CO ECONOMIC DEVELOPMENT ASSN		
Ē	Name chang		93-0	654603
Ē	linitial return	14.1001-14.1001		
	Final	, 205 RIVERSIDE DRIVE	' '	882-9600
	termin ated	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	435,311.
	Ameno return	KLAMATH FALLS, OR 97601	H(a) Is this a group r	eturn
	Application	F Name and address of principal officer GREG O SOLILITYALY	for subordinates	? Yes X No
_	pendii	5684 GLENRIDGE WAY, KLAMATH FALLS, OR 976	03 H(b) Are all subordinates i	ncluded? Yes No
_			If "No," attach a	ı lıst. (see instructions)
		te: ► TEAMKLAMATH.COM	H(c) Group exemption	
			ear of formation: 1975	M State of legal domicile: OR
LP	art I	Summary		
ď	1	Bnefly describe the organization's mission or most significant activities: THE ORGA		
7 2017 Governánce		PROMOTE NEW AND EXISTING BUSINESS DEVELOPMENT		
	2	Check this box if the organization discontinued its operations or disposed of its operations.	1001	
	3	Number of voting members of the governing body (Part VI, line 1a)		13
- `Q	1 .	Number of independent voting members of the governing body (Part Vi dbie 1b) Total number of individuals employed in calendar year 2015 (Part V. line 2a). APR	7 2017 82 4	12
MAY	5		3	5
⋛┋	6	Total number of volunteers (estimate if necessary)	ERI DE 6	0
≥5	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	72.
C	b	Net unrelated business taxable income from Form 990-T, line 34	\7b	0.
Sevenile Revenile	_	0	Prior Year	Current Year
§ \$	8	Contributions and grants (Part VIII, line 1h)	327,211.	435,239.
ランマン Bevenue	9	Program service revenue (Part VIII, line 2g)	0.	0.
) 6	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	$\frac{41}{2}$	72.
7		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	425 211
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	327,252.	435,311.
		Grants and similar amounts paid (Part IX, column (A), lines 1·3)	0.	0.
	1	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
ď.	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	95,483.	219,286.
Fxnenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	<u> </u>	0.
X	} b	Total fundraising expenses (Part IX, column (D), line 25)	06 750	165 007
_	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<u>96,759.</u>	165,907.
	1	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<u> 192,242.</u>	385,193.
=		Revenue less expenses Subtract line 18 from line 12	135,010.	50,118.
ts o	2	T. 1 (0.1) 1.40	Beginning of Current Year	End of Year
SSE	B 20	Total assets (Part X, line 16)	137,686.	176,066.
Net Assets or	21	Total liabilities (Part X, line 26)	<u>17,661.</u>	5,923.
	리 22 Part II	Net assets or fund balances Subtract line 21 from line 20 Signature Block	120,025.	170,143.
		alties of perjury, I declare that I have examined this return, including accompanying schedules and sta	tomante and to the best of n	av knowledge and heliaf it in
		ct, and complete. Declaration of prepares (other than officer) is based on all information of which prep		ly knowledge and belief, it is
	ie, correc	and complete, beginning opposite that one of the man of the minimum of which prep	4-11.	.17
e:	4 n	Signature of officer	Date	7.1
	gn	GREG O'SULLIVAN, EXECUTIVE DIRECTOR		
п	ere	Type or print name and title		
_		Print/Type preparer's name Preparer's signature	Date Check	X PTIN
p.	ıid	TERRY SCROGGIN	3/29/17 self-emplo	
	eparer	Firm's name MOLATORE, SCROGGIN, PETERSON & CO.,	LLP Firm's EIN	93-0428202
	e Only	Firm's address 824 PINE STREET	THE THIRSTIN	77-0440404
U	is Gilly	KLAMATH FALLS, OR 97601	Phone no. (5	41) 884-4164
-	av tha l	RS discuss this return with the preparer shown above? (see instructions)	11 none no. \	X Yes No
	2001 12-			Form 990 (2015)
ಬರ	2001 12-		<i>•</i>	

	1990 (2015) KLAMATH CO ECONOMIC DEVELOPMENT ASSN 93-0	654603 Page 2
Pai	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	. 🗀
1	Briefly describe the organization's mission:	
	THE ORGANIZATION'S MISSION IS TO PROMOTE NEW AND EXISTING BU	SINESS
	DEVELOPMENT IN SOUTHERN OREGON.	
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 X No
	If "Yes," describe these new services on Schedule O	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	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 measure	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the to	ital expenses, and
	revenue, if any, for each program service reported	
4a	(Code) (Expenses \$	<u>435,239.</u>)
	PROMOTE ECONOMIC DEVELOPMENT IN NEW AND EXISTING INDUSTRIES	IN KLAMATH
	COUNTY, OREGON	
		
		·
4b	(Code) (Expenses \$)
4c	(Code) (Expenses \$)
70	/Code / (expenses a) //vevenue a / /vevenue a	/
		
		
		
		
		
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$)
4.	Total program senice expenses 270, 685	

Form 990 (2015)

			Yes	No
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		_ <u>X</u> _
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			v
	public office? If "Yes," complete Schedule C, Part I	3	-	<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	4		
3	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			37
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	10		_X_
11	as applicable.			
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
u	Part VI	11a	x	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VIII	11c		_X_
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		<u>X</u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40-		v
L	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year?	12a		<u> X</u>
D	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have 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? 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 other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	-	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			,.
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		₹.
40	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,"	18	-	<u>X</u> _
19	complete Schedule G, Part III	19		х
	Sompliste Contocute of Late III		990	

KLAMATH CO ECONOMIC DEVELOPMENT ASSN 93-0654603 Form 990 (2015) Part IV | Checklist of Required Schedules (continued) Yes No 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 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 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 X 22 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 principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No", go to line 25a X 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I Х 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 Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I Х 25b 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 X 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 X Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 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 Х c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L. Part IV 28c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M X 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 Schedule N, Part II X 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I Х 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

X

Х

X

34

35a

35b

36

37

Part V line 1

If "Yes," complete Schedule R, Part V, line 2

Note. All Form 990 filers are required to complete Schedule O

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?

Form 990 (2015)

Statements Regarding Other IRS Filings and Tax Compliance Part V Check if Schedule O contains a response or note to any line in this Part V Yes No 0 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 0 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 5 filed for the calendar year ending with or within the year covered by this return 2a b If at least one is reported on line 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 (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? X За b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a X financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a b If "Yes." enter the name of the foreign country ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 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 c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5с 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit Х any contributions that were not tax deductible as charitable contributions? คิล b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). X a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7<u>a</u> b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7с X d If "Yes," indicate the number of Forms 8282 filed during the year 7d e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7е f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? 9a b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b Section 501(c)(7) organizations. Entera Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders 11a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the 13b organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c X 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

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

	to mile da, da, or rob below, desenbe the directions, proceeded, or changes in contents of contents.			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 13			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.			
p	Enter the number of voting members included in line 1a, above, who are independent 1b 12			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other		j	
	officer, director, trustee, or key employee?	2		<u>X</u> _
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision		ı	
	of officers, directors, or trustees, or key employees to a management company or other person?	3		<u>x</u>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	<u> </u>	X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		<u>X</u>
6	Did the organization have members or stockholders?	6		<u>X</u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a_		X
þ	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		<u>X</u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	The governing body?	8a	<u>X</u>	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9_		_X_
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a		11a	_X_	
þ	Describe in Schedule O the process, if any, used by the organization to review this Form 990)		
12a		12a		X
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			ĺ
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	1 5b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		L
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availab	le	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	i fınan	cial	
	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:			
	TERRENCE J SCROGGIN, CPA - 541-882-9600			
	824 PINE STREET, KLAMATH FALLS, OR 97601			

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KLAMATH CO ECONOMIC DEVELOPMENT ASSN

93-0654603

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

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

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

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

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

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and Title	(B) Average hours per	(do	not c	(CPOS heck ss pe	c) ition more	than	one h an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	Individual trustee or director	Institutional frustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) LAUREN JESPERSEN	1.00									
PRESIDENT	1 00	X		X	-	-	-	0.	0.	0.
(2) MARK WENDT	1.00	37		3,7					_	•
VICE PRESIDENT	1 00	X		X	-		_	0.	0.	0.
(3) ALBERT WEDAM	1.00	٠,		4,-						•
SECRETARY	1 00	X	ļ	X		├		0.	0.	0.
(4) ANN CAVANAUGH	1.00	.,								•
TREASURER	1 00	X		X				0.	0.	0.
(5) JASON NASH	1.00				ļ	-				•
DIRECTOR	1 00	X			-	_	<u> </u>	0.	0.	0.
(6) MATT HURLEY	1.00	٦,								0
DIRECTOR	1.00	X				}—	-	0.	0.	0.
(7) RANDY SHAW	1.00	x							٥ ا	0
DIRECTOR	1.00	Λ				├		0.	0.	0.
(8) RUSS CARTER	1.00	X				ļ		0.	0.	0
DIRECTOR	1.00	^	-			╁─	\vdash			0.
(9) DONNIE BOYD	1.00	x				ŀ		0.	0.	0.
DIRECTOR (10) STAN GILBERT	1.00	-				 				
DIRECTOR	1.00	X						0.	0.	0.
(11) TODD ANDRES	1.00				 	\vdash				
DIRECTOR		x						0.	0.	0.
(12) KENDALL BELL	1.00				-	T				
DIRECTOR		x						0.	0.	0.
(13) GREG O'SULLIVAN	40.00				1	İ				
MANAGER/OFFICER		ĺ		Х				47,934.	0.	0.
					ĺ					
							Γ			
_		}				1	1	}		
				L						

KLAMATH CO ECONOMIC DEVELOPMENT ASSN

93-0654603

Page 8

		Check if Schedule O cont	ains a response	or note to any line	e 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
ts	1 a	Federated campaigns	1a					
E Z	b		1b	171,833.				
اغ اغ	c		1c					
a it	d		1d					
0 E	e	0						
Sig	f	All other contributions, gifts, gran						
돌	•	similar amounts not included abo		263,406.				
草	~		·	203, ±00.				
Contributions, Gifts, Grants and Other Similar Amounts	g h	Total, Add lines 1a-1f	1 Ia-11 \$		435,239.			
		TOTAL TITLE TO THE		Business Code	100,200			
ارو	2 a							
5	b							
Sel	c							
e e	ď	. 					· · · · · · · ·	
Program Service Revenue	e							
P.	f	All other program service reve	enue					
ĺ	g			•				
	3	Investment income (including	dividends, intere	est, and				
	Ŭ	other similar amounts)	,,	>	72.		72.	1
}	4	Income from investment of ta	x-exempt bond r	proceeds				
}	5	Royalties .	A OXOMIPE BOMO P					
1	J	Noyamoo :	(i) Real	(II) Personal				
1	6 a	Gross rents	(91104)	(1) 1 01001141				
ł	ь							
ļ		Rental income or (loss)						
	٦	Net rental income or (loss)	L					
[7.0	Gross amount from sales of	(ı) Securities	(ii) Other				
į	/ a	assets other than inventory	(I) Gecunites	(ii) Other				и
ł	L		ļ	 				1
	b			1		ļ		1
	_	and sales expenses	 					1
ı	C	` '	L			[
ł	d		a ayanta (nat					
ine	ва	Gross income from fundraisin	-	ļ [
Ş		including \$ contributions reported on line		İ				
Other Reven		Part IV, line 18	-			,		
her			a b					1
ŏ		 Less: direct expenses Net income or (loss) from fund 	-					
ļ		Gross income from gaming at	_					
ļ	s a	Part IV, line 19		1				
-		Less: direct expenses	a b					
1		: Net income or (loss) from gan						
1		Gross sales of inventory, less						<u> </u>
[10 a	and allowances		,				
l			а					
		Less: cost of goods sold	b of muchtons					
		Net income or (loss) from sale		Business Onda				
	44	Miscellaneous Revenu		Business Code		ļ		
	11 a							
	b			 		 		
	C			-				
	_	All other revenue						
	_	Total. Add lines 11a-11d	•		12E 211	0.	70	
	12	Total revenue. See instructions.			435,311.	<u> </u>	72.	0.

Secti	on 501(c)(3) and 501(c)(4) organizations must com Check if Schedule O contains a respon			mplete column (A).	
Do r	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D) Fundraising
7b, i	Bb, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	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	1			
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	0.4 653		04 670	
	trustees, and key employees	84,673.		84,673.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	100 401	00 522	10 040	
7	Other salaries and wages	109,481.	98,533.	10,948.	
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions) Other employee benefits	7,101.	6,390.	711.	
9	Payroll taxes	18,031.	16,228.	1,803.	
10 11	Fees for services (non-employees).	10,031.	10,220.	1,003.	
	Management				
b	Legal				
	Accounting	9,749.		9,749.	
	Lobbying				
e					
f	Investment management fees				
q	Other. (If line 11g amount exceeds 10% of line 25,				
-	column (A) amount, list line 11g expenses on Sch O.)	12,709.	12,413.	296.	
12	Advertising and promotion	64,943.	12,413. 64,943.		
13	Office expenses	15,234.	13,711.	1,523.	
14	Information technology				
15	Royalties				
16	Occupancy	8,812.	7,931.	881.	
17	Travel	7,973.	7,176.	797.	
18	Payments of travel or entertainment expenses	1			
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest .	60.		60.	
21	Payments to affiliates	1 010		1 010	
22	Depreciation, depletion, and amortization	1,810.	4 450	1,810.	
23	Insurance	4,947.	4,452.	495.	
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	MEDIA	18,346.	18,346.		
b	DIEG 130 GID GGD TD 010	14,574.	14,574.		
c	THE TRUCKS THE TAXABLE TO THE	6,653.	5,988.	665.	
ď		97.		97.	
-	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	385,193.	270,685.	114,508.	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 rf following SOP 98-2 (ASC 958-720)				

Form 990 (2015)
Part X | Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X		 -	
	•		(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	135,169.	1	151,197.
	2	Savings and temporary cash investments	_ 	2	
1	3	Pledges and grants receivable, net		3	
- {	4	Accounts receivable, net		4	21,533
- }	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			
22		employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
₹	8	Inventories for sale or use		8	
ſ	9	Prepaid expenses and deferred charges		9	1,025
1	10a	Land, buildings, and equipment, cost or other			
}		basis Complete Part VI of Schedule D 10a 59,931.			
- {	b	Less: accumulated depreciation 10b 57,620.	2,517.	10c	2,311
- (11	Investments - publicly traded securities		11	
ļ	12	Investments - other securities See Part IV, line 11		12	
l	13	Investments - program-related See Part IV, line 11		13	
[14	Intangible assets .		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	137,686.	16	176,066
ĺ	17	Accounts payable and accrued expenses	17,661.	17	45
ĺ	18	Grants payable .		18	
)	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
1	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ŝ	22	Loans and other payables to current and former officers, directors, trustees,			
≝∣		key employees, highest compensated employees, and disqualified persons			
Liabilities		Complete Part II of Schedule L		22	
-	23	Secured mortgages and notes payable to unrelated third parties		23	
ł	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		Ì	
1		Schedule D	0.	25	5,878
	26_	Total liabilities. Add lines 17 through 25	17,661.	26	5,923
		Organizations that follow SFAS 117 (ASC 958), check here		1	
Sa		complete lines 27 through 29, and lines 33 and 34.			
ŭ	27	Unrestricted net assets	120,025.	27	170,143
3ale	28	Temporarily restricted net assets		28	
d E	29	Permanently restricted net assets		29	
בַּ ו		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐			
ō		and complete lines 30 through 34.			
ts	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund	,	31	
Asse	i .	Data and a survivar and decreased and completed in compare of other funds		32	
et Asse	32	Retained earnings, endowment, accumulated income, or other funds	 	 -	
Net Assets or Fund Balances	32 33	Total net assets or fund balances	120,025. 137,686.	33	170,143 176,066

Form	990 (2015) KLAMATH CO ECONOMIC DEVELOPMENT ASSN	93- <u>0</u> 65	4603	Page 12
Par	rt XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			
	•			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>, 311.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2		<u>,193.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3		,118.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	120	<u>,025.</u>
5	Net unrealized gains (losses) on investments			
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Prior period adjustments			
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,		150	
Da	column (B))	10	170	<u>,143.</u>
Pa	rt XII Financial Statements and Reporting			Г
	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 Cash X Accrual Other			163 110
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.		
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			
b	Were the organization's financial statements audited by an independent accountant?		2b	X_
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,	1 1	
	consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,		1
	review, or compilation of its financial statements and selection of an independent accountant?		2c	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	igie Audit		
	Act and OMB Circular A-133?	الحادث والمحدد	3a	X
Þ	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits?	rea auait	26	
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	990 (2015)
			rorm :	7 3U (2015)

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

on 527 **2015**

OMB No 1545-0047

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

-	(see separate instructions), then				
	Section 501(c)(4), (5), or (6) organizat	ions Complete Part III.		·	manlaren idankifization mushar
Nam	e of organization			L	mployer identification number
Da	KLAMATH	CO ECONOMIC DEV	ELOPMENT AS:	orio o costion 52	93-0654603
Pai	rt I-A Complete if the org	anization is exempt und	er section 50 r(c)	or is a section 52	7 Organization.
	Provide a description of the organiz	ation's direct and indirect neitic	al campaign activities i	n Part IV	
	•	ation's direct and indirect politic	ai campaign activities i		> \$
	Political expenditures Volunteer hours			•	Ψ
3	volunteer nours				
Pa	rt I-B Complete if the org	anization is exempt und	er section 501(c)		
1	Enter the amount of any excise tax	incurred by the organization und	ler section 4955	ļ	> \$
2	Enter the amount of any excise tax	incurred by organization managi	ers under section 4955	!	> \$
3	If the organization incurred a section	n 4955 tax, did it file Form 4720	for this year?		Yes Mo
4a	Was a correction made?				└─ Yes └─ No
	If "Yes," describe in Part IV				0.4/ \/0\
Pa	rt I-C∣ Complete if the org	janization is exempt und	er section 501(c),	except section 5	U1(c)(3).
1	Enter the amount directly expended	by the filing organization for se	ction 527 exempt func	tion activities	▶ \$
2	Enter the amount of the filing organ	ization's funds contributed to ot	her organizations for se	ection 527	
	exempt function activities				> \$
3	Total exempt function expenditures	. Add lines 1 and 2. Enter here a	ind on Form 1120-POL		
	line 17b				
	ine 170				> \$
4	Did the filing organization file Form	1120-POL for this year?			▶ \$ Yes
5	Did the filing organization file Form Enter the names, addresses and en	nployer identification number (El		olitical organizations to	Yes No which the filing organization
5	Did the filing organization file Form	nployer identification number (El		olitical organizations to	Yes No which the filing organization
5	Did the filing organization file Form Enter the names, addresses and en made payments For each organizar contributions received that were pro-	nployer identification number (El tion listed, enter the amount pai omptly and directly delivered to	d from the filing organiz a separate political org	olitical organizations to zation's funds Also ent anization, such as a se	Which the filing organization er the amount of political
5	Did the filing organization file Form Enter the names, addresses and en made payments For each organizar	nployer identification number (El tion listed, enter the amount pai omptly and directly delivered to	d from the filing organiz a separate political org	olitical organizations to zation's funds Also ent anization, such as a se	Which the filing organization er the amount of political
5	Did the filing organization file Form Enter the names, addresses and en made payments For each organizar contributions received that were pro-	nployer identification number (El tion listed, enter the amount pai omptly and directly delivered to	d from the filing organiz a separate political org	olitical organizations to zation's funds Also ent anization, such as a se	which the filing organization er the amount of political parate segregated fund or a
5	Did the filing organization file Form Enter the names, addresses and en made payments. For each organization contributions received that were pro- political action committee (PAC). If a	nployer identification number (El tion listed, enter the amount pai omptly and directly delivered to additional space is needed, prov	d from the filing organize a separate political org ride information in Part	olitical organizations to cation's funds. Also ent anization, such as a se IV. (d) Amount paid from the filing organization.	which the filing organization er the amount of political parate segregated fund or a (e) Amount of political contributions received and
5	Did the filing organization file Form Enter the names, addresses and en made payments. For each organization contributions received that were pro- political action committee (PAC). If a	nployer identification number (El tion listed, enter the amount pai omptly and directly delivered to additional space is needed, prov	d from the filing organize a separate political org ride information in Part	olitical organizations to zation's funds. Also ent anization, such as a se IV.	which the filing organization er the amount of political parate segregated fund or a (e) Amount of political contributions received and promptly and directly
5	Did the filing organization file Form Enter the names, addresses and en made payments. For each organization contributions received that were pro- political action committee (PAC). If a	nployer identification number (El tion listed, enter the amount pai omptly and directly delivered to additional space is needed, prov	d from the filing organize a separate political org ride information in Part	olitical organizations to cation's funds. Also ent anization, such as a se IV. (d) Amount paid from the filing organization.	which the filing organization er the amount of political parate segregated fund or a (e) Amount of political contributions received and
5	Did the filing organization file Form Enter the names, addresses and en made payments. For each organization contributions received that were pro- political action committee (PAC). If a	nployer identification number (El tion listed, enter the amount pai omptly and directly delivered to additional space is needed, prov	d from the filing organize a separate political org ride information in Part	olitical organizations to cation's funds. Also ent anization, such as a se IV. (d) Amount paid from the filing organization.	which the filing organization er the amount of political parate segregated fund or a (e) Amount of political contributions received and promptly and directly delivered to a separate
5	Did the filing organization file Form Enter the names, addresses and en made payments. For each organization contributions received that were pro- political action committee (PAC). If a	nployer identification number (El tion listed, enter the amount pai omptly and directly delivered to additional space is needed, prov	d from the filing organize a separate political org ride information in Part	olitical organizations to cation's funds. Also ent anization, such as a se IV. (d) Amount paid from the filing organization.	which the filing organization er the amount of political parate segregated fund or a (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.
5	Did the filing organization file Form Enter the names, addresses and en made payments. For each organization contributions received that were pro- political action committee (PAC). If a	nployer identification number (El tion listed, enter the amount pai omptly and directly delivered to additional space is needed, prov	d from the filing organize a separate political org ride information in Part	olitical organizations to cation's funds. Also ent anization, such as a se IV. (d) Amount paid from the filing organization.	which the filing organization er the amount of political parate segregated fund or a (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.
5	Did the filing organization file Form Enter the names, addresses and en made payments. For each organization contributions received that were pro- political action committee (PAC). If a	nployer identification number (El tion listed, enter the amount pai omptly and directly delivered to additional space is needed, prov	d from the filing organize a separate political org ride information in Part	olitical organizations to cation's funds. Also ent anization, such as a se IV. (d) Amount paid from the filing organization.	which the filing organization er the amount of political parate segregated fund or a (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.
5	Did the filing organization file Form Enter the names, addresses and en made payments. For each organization contributions received that were pro- political action committee (PAC). If a	nployer identification number (El tion listed, enter the amount pai omptly and directly delivered to additional space is needed, prov	d from the filing organize a separate political org ride information in Part	olitical organizations to cation's funds. Also ent anization, such as a se IV. (d) Amount paid from the filing organization.	which the filing organization er the amount of political parate segregated fund or a (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.
5	Did the filing organization file Form Enter the names, addresses and en made payments. For each organization contributions received that were pro- political action committee (PAC). If a	nployer identification number (El tion listed, enter the amount pai omptly and directly delivered to additional space is needed, prov	d from the filing organize a separate political org ride information in Part	olitical organizations to cation's funds. Also ent anization, such as a se IV. (d) Amount paid from the filing organization.	which the filing organization er the amount of political parate segregated fund or a (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.
5	Did the filing organization file Form Enter the names, addresses and en made payments. For each organization contributions received that were pro- political action committee (PAC). If a	nployer identification number (El tion listed, enter the amount pai omptly and directly delivered to additional space is needed, prov	d from the filing organize a separate political org ride information in Part	olitical organizations to cation's funds. Also ent anization, such as a se IV. (d) Amount paid from the filing organization.	which the filing organization er the amount of political parate segregated fund or a (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.
5	Did the filing organization file Form Enter the names, addresses and en made payments. For each organization contributions received that were pro- political action committee (PAC). If a	nployer identification number (El tion listed, enter the amount pai omptly and directly delivered to additional space is needed, prov	d from the filing organize a separate political org ride information in Part	olitical organizations to cation's funds. Also ent anization, such as a se IV. (d) Amount paid from the filing organization.	which the filing organization er the amount of political parate segregated fund or a (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.
5	Did the filing organization file Form Enter the names, addresses and en made payments. For each organization contributions received that were pro- political action committee (PAC). If a	nployer identification number (El tion listed, enter the amount pai omptly and directly delivered to additional space is needed, prov	d from the filing organize a separate political org ride information in Part	olitical organizations to cation's funds. Also ent anization, such as a se IV. (d) Amount paid from the filing organization.	which the filing organization er the amount of political parate segregated fund or a (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.

Schedule C (Form 990 or 990-EZ) 2015 K Part II-A Complete if the orga	LAMATH CO	ECONOMIC DE	VELOPMENT AS	SSN 93-0	0654603 Page 2
section 501(h)).	IIIZAUUII IS EXEI	inprunder section	i oo i (c)(o) and me		CICCHOII GIIGEI
	on belongs to an affi	liated group (and list in	Part IV each affiliated	group member's nar	me. address. EIN.
expenses, and share				o	,,,
		nd "limited control" pro	visions apply		
Limits	on Lobbying Expe			(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influe	nce public opinion (arass roots lobbying)			
b Total lobbying expenditures to influe			Ī		-
c Total lobbying expenditures (add line	-	ay (amour loss) mig/	Ť		
d Other exempt purpose expenditures	, -	•	Ì	····	
e Total exempt purpose expenditures	*	4)	ļ l		
f Lobbying nontaxable amount Enter	•		h columns.		
If the amount on line 1e, column (a) or		bying nontaxable am	11		-
Not over \$500,000		the amount on line 1e			
Over \$500,000 but not over \$1,000,0		00 plus 15% of the exc	ess over \$500,000		
Over \$1,000,000 but not over \$1,500		00 plus 10% of the exc			
Over \$1,500,000 but not over \$17,000		00 plus 5% of the exce			
Over \$17,000,000	\$1,000,		00 010, \$1,000,000.		
Over \$17,000,000	ψ1,000,				
g Grassroots nontaxable amount (ente	er 25% of line 1f)				
h Subtract line 1g from line 1a If zero			Ì		
i Subtract line 1f from line 1c. If zero c			Ì		
j If there is an amount other than zero		line 1. did the organiz	ation file Form 4720		
reporting section 4911 tax for this ye		into 11, ale alle eliganiz			Yes No
roporting doctaon for the time y		eraging Period Under	section 501(h)		
(Some organizations that	nt made a section 5		have to complete all o	of the five columns	below.
	Lobbying Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount			1		
(150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount			ļ		
e Grassroots ceiling amount		1 "			
(150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2015 KLAMATH CO ECONOMIC DEVELOPMENT ASSN 93-0654603 Page 3

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

ch "Yes," response on lines 1a through 1ı below, provide ın Part IV a detailed description)	(b)	
of the lobbying activity.	Yes	No	Amo	unt
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), s	section 501(c)(5). or se	ction	
501(c)(6).		.,,		
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1	ı	Х
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		X
3 Did the organization agree to carry over lobbying and political expenditures from the prior year	7	3		Х
answered "Yes." 1 Dues, assessments and similar amounts from members		1	171	,833.
	nolitical	•	1/1	.,055.
	political			
expenses for which the section 527(f) tax was paid).		20		
a Current year		2a 2b		
b Carryover from last year		2c		
c Total	100			
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) di		3		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the second of the s				
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying	g and political			
expenditure next year?		4		
5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information		5		
Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated	I liet\ Dout II	A lines 1 :	and 0 /aaa	
instructions); and Part II-B, line 1. Also, complete this part for any additional information	i group list), Fait il	7A, III 162 1 4	and 2 (See	
Instructions); and Part II-B, line 1. Also, complete this part for any additional information				
				
				

SCHEDULE D

(Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

<u> </u>	KLAMATH CO ECONOMIC		93-0654603
Pa			S Or ACCOUNTS. Complete if the
	organization answered "Yes" on Form 990, Part IV, line		
	<u>_</u>	(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 wr	iting that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's ex	clusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor adv	isors in writing that grant funds can be	e used only
	for charitable purposes and not for the benefit of the donor or o	donor advisor, or for any other purpose	e conferring
	impermissible private benefit?	_	Yes No
Pa	rt II Conservation Easements. Complete if the organ	nization answered "Yes" on Form 990,	
1	Purpose(s) of conservation easements held by the organization	(check all that apply)	
	Preservation of land for public use (e.g., recreation or edu		torically important land area
	Protection of natural habitat	· -	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifier	d conservation contribution in the form	of a conservation easement on the last
_	day of the tax year.	a conservation contribution in the form	Held at the End of the Tax Year
_	Total number of conservation easements		2a
a	Total acreage restricted by conservation easements		2b
b	Number of conservation easements on a certified historic structure	ture included in (a)	2c
С		, ,	
ď	Number of conservation easements included in (c) acquired aff	ter 6/17/06, and not on a historic struc	} }
_	listed in the National Register		2d
3	Number of conservation easements modified, transferred, release	ased, extinguished, or terminated by tr	ne organization during the tax
	year ▶		
4	Number of states where property subject to conservation ease		
5	Does the organization have a written policy regarding the perio	• •	
	violations, and enforcement of the conservation easements it h		└── Yes └── No
6	Staff and volunteer hours devoted to monitoring, inspecting, he	andling of violations, and enforcing cor	nservation easements during the year
	<u> </u>		
7	Amount of expenses incurred in monitoring, inspecting, handling	ng of violations, and enforcing conserv	ation easements during the year
	> \$		
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of section 17	0(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?	-	└ Yes
9	In Part XIII, describe how the organization reports conservation	n easements in its revenue and expens	e statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	n's financial statements that describes	s the organization's accounting for
	conservation easements.		
Pa	rt III Organizations Maintaining Collections of	Art, Historical Treasures, or (Other Similar Assets.
	Complete if the organization answered "Yes" on Form 9	90, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC	958), not to report in its revenue state	ement and balance sheet works of art,
	historical treasures, or other similar assets held for public exhib	ortion, education, or research in further	ance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describe	es these items	
b	If the organization elected, as permitted under SFAS 116 (ASC	958), to report in its revenue statemei	nt and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, edu	ication, or research in furtherance of p	ublic 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 treas	sures, or other similar assets for financi	
_	the following amounts required to be reported under SFAS 116		
_	D	v 100 000) relating to these items.	•
a		•	¥
D	Assets included in Form 990, Part X		

_		CO ECONOM							<u>54603</u>	
Par										
3	Using the organization's acquisition, accessi	on, and other record	ls, checl	k any of the	following that	t are a s	significant	use of its	collection i	items
	(check all that apply):									
а	Public exhibition	d		Loan or exc	hange progra	ams				
b	Scholarly research	е		Other						
C	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how th	ney further t	he organizati	on's exe	empt purpo	se in Par	t XIII.	
5	During the year, did the organization solicit of	r receive donations	of art, hi	storical trea	sures, or oth	er sımıla	r assets			
	to be sold to raise funds rather than to be ma								Yes	☐ No
Par	t IV Escrow and Custodial Arran					"Yes" or	n Form 990), Part IV,	line 9, or	
	reported an amount on Form 990, Pa			_						
1a	Is the organization an agent, trustee, custod	an or other intermed	lary for	contribution	ns or other as	sets no	t included			
	on Form 990, Part X?		•						Yes	☐ No
ь	if "Yes," explain the arrangement in Part XIII	and complete the fo	llowina t	table [.]						
_			3						Amount	
С	Beginning balance						1c			
	Additions during the year				•	=	1d	_		
	Distributions during the year						1e			
f	Ending balance				•		1f			
-	Did the organization include an amount on F	orm 990 Part Y line	21 for	eccrow or c	uetodial acco	unt liab			Yes	☐ No
	If "Yes," explain the arrangement in Part XIII.	•	•				•		_ res	HNO
Par										Ш
	Eliastinonia anasi complete	(a) Current year		rior year	(c) Two year		(d) Three y	raare back	(e) Four y	anna haak
4	Paginning of year balance	(a) Current year	(6) 7	noi yeai	(C) Two year	3 Dack	(u) Tillee y	Cais Dack	(e) roury	ears vack
	Beginning of year balance									
	Contributions		-							
	Net investment earnings, gains, and losses				 					
	Grants or scholarships									
е	Other expenditures for facilities									
	and programs				ļ					
f	Administrative expenses		:		ļ					
g	End of year balance				l				L	
2	Provide the estimated percentage of the curr	rent year end baland	e (line 1	g, column (a	a)) held as:					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
c	Temporarily restricted endowment ▶	%								
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.								
3a	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are held a	and administe	red for t	the organi	zation		
	by								Y	es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" on line 3a(ii), are the related organiza	ations listed as requi	red on S	Schedule R?	•				3b	
4	Describe in Part XIII the intended uses of the									
Pai	t VI Land, Buildings, and Equipm									
	Complete if the organization answere	d "Yes" on Form 99	0, Part I\	V, line 11a S	See Form 990), Part X	, line 10.			
	Description of property	(a) Cost or c	ther	(b) Cost	t or other	(c) A	Accumulate	ed	(d) Book	value
	moon.p.o. o. p.op.o.y	basis (ınvestı			(other)		preciation		(4) -55	
12	Land						-	<u> </u>		
	Buildings				2,127.		6	51.	1	,476.
	Leasehold improvements				<u> </u>				<u>_</u>	<u>, </u>
	Equipment			5	7,804.		56,9	69		835.
	Other	-			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u> </u>		~ - • 	-	<u> </u>
	I. Add lines 1a through 1e (Column (d) must e	equal Form 990 Part	X colu	nn (R) line '	10c)				2	,311.
TULA	<u>n rigia milos ta uniougit te fooluliili (u) lijust e</u>	quair oiiii 330, r ail	,, colui	יייי , ווויר, ניייי	,				<u> </u>	, J L L 0

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.

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5,878.

(8) (9)

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

Schedule D (Form 990) 2015 KLAMATH CO ECONOMIC	C DEVELOPMENT ASSN	93-0654603 Page
Part XI Reconciliation of Revenue per Audited Finance	cial Statements With Revenu	e per Return.
Complete if the organization answered "Yes" on Form 990, F	Part IV, line 12a	
1 Total revenue, gains, and other support per audited financial statem	nents	1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments	2a	1
b Donated services and use of facilities	2b	
c Recoveries of prior year grants	2c	
d Other (Describe in Part XIII.)	2d	,
e Add lines 2a through 2d		2e
3 Subtract line 2e from line 1	_	3
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
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part		5
Part XII Reconciliation of Expenses per Audited Finan	icial Statements With Expens	ses per Return.
Complete if the organization answered "Yes" on Form 990, F	Part IV, line 12a	
1 Total expenses and losses per audited financial statements		1
2 Amounts included on line 1 but not on Form 990, Part IX, line 25.		
a Donated services and use of facilities	. 2a	
b Prior year adjustments	2b	
c Other losses	2c	
d Other (Describe in Part XIII)	_2d	
e Add lines 2a through 2d		2e
3 Subtract line 2e from line 1		3
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
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Par	t I, line 18.)	5
Part XIII Supplemental Information.		
Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines	s 1a and 4, Part IV, lines 1b and 2b, Pa	ırt V, lıne 4, Part X, lıne 2, Part XI,
lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to p	provide any additional information	

SCHEDULE O

(Form 990 or 990-EZ)

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Employer identification number KLAMATH CO ECONOMIC DEVELOPMENT ASSN 93-0654603

FORM 990, PART VI, SECTION B, LINE 11:
FORM 990 IS REVIEWED DURING A BOARD MEETING BEFORE IT IS FILED.
FORM 990, PART VI, SECTION C, LINE 19:
ALL CORPORATE DOCUMENTS ARE AVAILABLE FOR VIEWING AT THE CORPORATE OFFICE
UPON REQUEST.
PART V1 GOVERNANCE, MANAGEMENT AND DISCLOSURE.